



# AOTEAROA NEW ZEALAND SOCIAL WORK

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## A rich collection of social work scholarship from Aotearoa New Zealand

Our winter issue includes a rich set of articles reporting on both local and international scholarship. This issue begins with “Whakamana Tangata: An evaluation of a restorative Te Ao Māori-based approach in youth justice” by Andrea Păroşanu, Ashley Seaford, Nan Wehipeihana (Ngāti Tukorehe, Ngāti Raukawa, Ngāti Porou, Te Whānau-ā-Apanui) and Aneta Mihinui-Selwyn (Te Arawa). In a mixed methods study, Păroşanu et al. explored the implementation and evaluation of Whakamana Tangata, a restorative, te ao Māori-based practice approach within a youth justice residence. This approach, developed within youth justice reforms, seeks to promote respectful and constructive engagement within secure residential care. Findings support restorative practices, combined with te ao Māori values, and a shift towards relational rather than punitive responses within the youth justice system. The authors conclude, however, that challenges remain, particularly regarding consistent embedding and alignment of restorative principles and te ao Māori values within the institutional frameworks of the youth justice system.

The representation of social work in public perceptions and via news media is a topic of ongoing interest in the profession. Staniforth et al. (2022) highlighted how the sensationalised nature of the media in Aotearoa New Zealand earlier noted that the most shocking responses from the public relate to child protection uplifts and deaths. They also highlighted the media’s criticisms on the perceived failings of individual social workers rather than any focus on political and systemic issues. In our second article for this issue, “Soft-spoken and sympathetic: Gendered news-media social worker narratives in Aotearoa New Zealand”, Niamh McLean and Katheryn Margaret

Pascoe note a current gap in the literature by focusing explicitly on the role of gender in media reporting. They report that social work is portrayed as a feminised profession, with key themes of altruism and nurturing reinforcing the historical perception of social work as *women’s work*. McLean and Pascoe recommend that collaboration between the profession and the media would challenge current portrayals of social work to better inform public perceptions while arguing for improved recognition of the value and treatment of social work and care work within society, the public, and across other professions and disciplines.

In “Catalysts for collaboration: Antecedents and potential benefits of non-profits working together”, Duncan Matthews, Laura Chubb and John Fenaughty write about the potential opportunities for small, non-profit organisations through working together. The article is premised on the findings of small-scale qualitative study completed as part of a master’s project. The findings draw on a literature review and interviews with six sector leaders in non-profit organisations to present conclusions related to cross-organisation collaboration. Of particular note is the size of the non-profit sector in New Zealand and the large number of small, non-profit organisations (organisations with between 1 and 20 staff). The authors suggest these present an untapped resource with potential to be realised from increased collaboration. The article realistically explores some of the barriers to collaboration but suggests there is much to be gained through interagency collaboration including peer support, shared resources, and knowledge building. By drawing connections with the international body of literature, the authors posit that this collaboration has flow-on impacts in relation

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to organisational efficiencies and resilience. The article contributes valuable knowledge about the benefits of working together, sharing resources and knowledge—especially for small organisations.

In “Only those who love us should decide our care: Elevating survivor voices of Takatāpui, Rainbow, and MVPFAFF+ communities”, Paora Moyle (Ngāti Porou) challenges social work and social workers to listen to the survivor voices from the Takatāpui, Rainbow, and MVPFAFF+ communities. They use a Pū Rā Ka Ū framework to honour the stories of the survivors of abuse in care. The stories—and therefore the survivors—stand clearly in the power and truth of their reflections. As social workers we are asked to acknowledge the role that we have, as a profession, played in the cultural genocide and structural violence of this group of survivors. In sharing these accounts, Moyle challenges us to honour their voices, and radically reimagine how social work can engage with and support communities who have been, and are being, harmed by our practices.

This journal is privileged at times to publish stories about the history of social work in Aotearoa, offering us insight into the work of individual social work practitioners, educators, and researchers which highlights how the profession has grown and been shaped by its people in the context of significant social and political change. In this issue, Barbara Staniforth and Carole Adamson continue the “Their stories: Our history” series with an article about Jan Duke, and her key role as registrar with the Social Workers Registration Board and her contribution to professionalisation of social work in this country.

Using a life history research methodology, the authors interviewed Jan and people chosen by her as colleagues who walked alongside her at crucial times over the past 20 years and whose memories could add depth to the work she carried out with the Board. The result is a rich narrative

of the processes, relationships, tensions and resistances that cover the first quarter of this century. This time in our history saw profound changes in the social work landscape which included the development of social work education standards and the introduction of mandatory registration. This was a political time for Aotearoa social workers and the participants cite “Aunty Jan’s” skills in building relationships, managing dissent, navigating complex legislative hurdles, and advocating for those social workers disadvantaged by the changes, particularly our tangata whenua colleagues. The authors of this article lead us through Jan’s story in a way that offers nuance and fresh insight into what has occurred in our profession in the past 25 years.

By focusing on the ethical and practical challenges faced by social workers working in the context of assisted dying in Aotearoa New Zealand, Laura Ann Chubb, Harriet Nickels, Liz Beddoe, Georgina Guild and Eileen Joy offer a novel and timely contribution to the literature. This study examines social workers’ perspectives on assisted dying following the End of Life Choice Act 2019. “Supporting choice, preventing harm: Social workers’ knowledge gaps and ethical challenges with assisted dying in Aotearoa New Zealand” highlights key professional challenges, including navigating client autonomy, managing ethical dilemmas and the need for ongoing professional development. Chubb et al. identify the systemic barriers affecting marginalised groups, including Māori, and highlight the need for clearer role definitions and culturally appropriate practices aligned with te Tiriti o Waitangi.

The literature reporting the social work student experience in Aotearoa continues to grow. Earlier this year Watson and Howells (2025, p. 10) reported that it “can take over a decade before the financial benefits of a degree (higher salary) outweigh the lack of income while studying” considering social work and other professions with unpaid

placements. The impacts on social work students' financial wellbeing were also reported in Bartley et al. (2024). Studying social work also has social impacts. In "Student strategies for surviving social work education in Aotearoa New Zealand" Barbara Staniforth, Sonya Hunt, Liz Beddoe and Kendra Cox (Te Ure o Uenukukōpako, Te Whakatōhea, Ngāi Tūhoe, Ngāti Porou) add to the findings reported in Beddoe et al. (2024) in this journal. The previous article focused on the challenges social work students faced in their social work qualifying programme. These impacts were in personal and family relationships, their social and cultural participation, and on their physical and emotional wellbeing. The present article shifts focus to reports on part of a study of student hardship that asked Aotearoa New Zealand social work students about the strategies that they utilised to maintain their wellbeing, and to offer their advice to future students. The findings indicated a strong reliance on relational supports with peers, family/whānau and friends. The authors note that, while it is important to learn from the students about the strategies and supports that were useful in sustaining them and enhancing their resilience, it is critical that educators recognise the structural origins of these challenges and to resist the neoliberal policies and conditions that are downgrading the experience of tertiary students.

Our experience in Aotearoa of political and social realities parallels that of our international colleagues, however there are some unique challenges for communities beyond our borders which social work researchers give voice to, and which can guide and inspire practice around the globe. In this issue, Norkaina Samama reports on a community development project in the Southern Philippines, specifically on the role of women's self-help groups in striving for the basic human right of gender equality. This qualitative study adds to the growing body of research about the value of self-help groups for women—their role as platforms for service delivery and advocacy at social,

economic and political levels. There is substantial evidence for the value of such groups in tackling exploitation by supporting women to achieve financial independence, peer support, education and sensitisation. This study reports on the barriers to participating in such groups such as multiple social obligations and financial instability and recognises the Philippines as a deeply patriarchal society with strong cultural norms. The author is clear, therefore, about the challenges ahead, but their findings offer evidence that success can be achieved at the community level and insight into how self-help groups for women can be supported to develop and grow.

Shifting to India, in "Does spiritual coping help families of international migrants thrive? A qualitative study of social work practices in Kerala", Anurupa Bhattacharjee and Princy Thomas explore the role of spiritual coping mechanisms implemented by professional social workers to help families of international migrants in Kerala, focusing on their effectiveness and associated challenges. This qualitative study involved interviews with 12 social workers with at least 2 years' experience supporting families of international migrants and 10 individual members of families of international migrants who had received social work interventions incorporating spiritual coping strategies over a minimum period of 6 months.

The study found that various spiritual practices, including prayer, meditation, and mindfulness, were crucial for helping families of international migrants manage the emotional stress caused by separation. Spiritual practice also helped with management of emotions and provided relief from anxiety and depression. The authors recommend that social workers embrace a holistic approach that incorporates spiritual dimensions enabling them to offer more effective and culturally sensitive interventions, strengthening their support for families of international migrants as they face migration-related challenges.

A commentary piece completes the articles in this issue. In this provocative and engaging article Ranginui Belk (Ngāti Tūwharetoa, Rereahu, Ngāti Hine), Lana Petrovic and Eileen Joy ask the question “I just graduated—now what? A wero to social work education’s settler colonialism and White supremacy”. The commentary article examines settler colonialism and White supremacy within social work education and practice in Aotearoa New Zealand through two social work graduates’ perspectives and that of an educator. The lenses employed are personal and political. They lay down many challenges for social work education. In their conclusions, Belk et al. argue that our ethical standards and values demand a radical transformation of how future social workers are prepared for the work of actively challenging settler colonial structures in practice settings. They call for educators to intentionally radicalise students through creating learning environments where students develop the courage and the skills to advocate for structural change within organisations and policies. Finally, they suggest that, beyond graduation, ongoing funded professional development and supervision models are developed to centre decolonising practices.

In the one book review in this issue, Liz Beddoe reviews Paul Michael Garrett’s book *Social Work and Common Sense: A Critical Examination* which Beddoe notes is a welcome addition to followers of his substantial body of work.

Liz Beddoe

For the Editorial Collective

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# Whakamana Tangata: An evaluation of a restorative Te Ao Māori-based approach in youth justice

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## ABSTRACT

**INTRODUCTION:** This article considers the implementation and evaluation of Whakamana Tangata, a restorative, te ao Māori-based practice approach within a youth justice residence. Developed as part of broader youth justice reforms and grounded in te ao Māori values and restorative–relational practices, the approach seeks to promote respectful and constructive engagement within secure residential care.

**METHODS:** Using a mixed-methods approach, the evaluation explored the implementation and embedding of Whakamana Tangata in Te Maioha o Parekarangi in Rotorua. Data analysis included 31 semi-structured interviews with residential kaimahi, leadership, Design Group members and rangatahi, alongside focus groups, surveys and documentary analysis.

**FINDINGS:** Findings indicate that restorative practices, combined with te ao Māori values, contributed to improved engagement, more meaningful responses to harmful situations, and a shift towards relational rather than punitive responses within the youth justice system. However, challenges remained, particularly regarding consistent embedding and the broader alignment of restorative principles and te ao Māori values within institutional frameworks.

**CONCLUSION:** By analysing this practice approach, the article highlights the significance of strengthening te ao Māori-informed approaches within youth justice and their meaningful alignment with restorative practices. The study underscores the potential of this approach to positively impact youth justice environments, advocating for frameworks that prioritise connection, respect, and accountability over punitive responses.

**Keywords:** Restorative practice, te ao Māori values, youth offending, secure residential care, Aotearoa New Zealand

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In Aotearoa New Zealand, the state has played a role in criminal justice processes for children and young people since the mid- to late-19th century (Watt, 2003). During their involvement with the justice system, some young people are placed in supported residential facilities, an approach that reflects a longer history of institutional care. The provision of this type

of care has its origins in the establishment of industrial schools in 1867 and reformatories in 1900 (Dalley, 1998), highlighting a legacy of state intervention that continues to shape contemporary youth justice practices.

In 2025, residential care remains a small, but significant, component of the

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contemporary youth justice service model. Oranga Tamariki, in conjunction with a number of partners, operates a nationwide network of community-based homes that provide care for some young people who are involved with youth justice. While most young people can be safely cared for in the community, a small number are placed in temporary secure custodial care—an arrangement that raises ongoing questions about its effectiveness and alignment with principles of youth development. Research increasingly underscores the limitations of incarceration, revealing that it fails to address the developmental and criminogenic needs of young persons and does not effectively support meaningful rehabilitation (see Lambie & Randell, 2013). Concerns about the detrimental impacts of detention have also been expressed by the Children's Commissioner, highlighting risks such as further entrenching negative behaviour and advocating for its use only as a last resort (Office of the Children's Commissioner, 2017).

Despite these concerns, secure custodial care continues to be an integral part of the youth justice framework. Five youth justice residences<sup>1</sup> provide secure care for those on remand and those sentenced to certain orders by the Youth Court. They can also provide placements for some young people held under the adult jurisdiction.

In 2015 and 2017 two important reports were released. The Expert Advisory Panel was tasked with reviewing the operation of the care and protection and youth justice systems. Their report, published in December 2015, provided the broad conceptual framework for a new organisation that would replace Child, Youth and Family, the Ministry for Children – Oranga Tamariki (Ministry of Social Development, 2016). In relation to youth justice residences, the Expert Advisory Panel recommended that Oranga Tamariki should continue to develop the skills and knowledge of staff, deliver therapeutic care and evidenced-based

programmes to reduce the risk of future offending.

In addition, the panel made other recommendations that had important implications for the operation of residences. These included the need to use a consistent practice framework, reduce the over-representation of rangatahi (young people) Māori through culturally aware practice, work with Māori to develop effective approaches, and support victims of offending to participate meaningfully in restorative processes.

The Office of the Children's Commissioner was created in 1989 and until 2023 played an important role in monitoring the operations of Oranga Tamariki and its predecessor organisations.<sup>2</sup> Since 2015, the Office of the Children's Commissioner has released reports examining the operation of youth justice and care and protection residences.<sup>3</sup> In their 2017 State of Care report, the authors noted opportunities to improve the quality-of-care practices, enhance responsiveness to tamariki (children) Māori, and embed a consistent therapeutic practice model. Echoing the Expert Advisory Panel, they also pointed out the need to continue to develop staff members' therapeutic skills and knowledge.

In mid-2018, the Prime Minister's Chief Science Advisor released a report that reinforced the value of cultural connections. The report noted,

[W]hat we have seen at times is the power of te ao Māori and tikanga as a counter-force to gangs – as well as being protective in many ways. If we could enhance opportunities to more fully immerse our youth in this environment in the most culturally appropriate, meaningful way possible (including involving community supports to reinforce and strengthen knowledge and connections), we would see greater success.

### **Youth justice residences**

Youth justice residences are unique environments that present distinct and complex challenges. While these facilities are intended to provide structured care, young people who live in residences are separated from their family and community-based routines, often for long periods of time. They are supported by multiple staff teams who need to apply consistent approaches to care. The mix of young people—ranging in ages, developmental needs, and legal circumstances, whether on remand or serving a sentence imposed by the Youth Court—adds further complexity. Additionally, the over-representation of male and predominantly Māori youth raises questions about deeper systemic factors behind this disparity, stemming from a history of entrenched inequities. Youth justice custody numbers averaged 150 between April and June 2024. Over the period 2017–2024,<sup>4</sup> 89% of young people were male, and the proportion of rangatahi Māori ranged from 67% to 92%, with an overall average of 81% (Oranga Tamariki, Social Impact and Research, 2024). An examination of young people's childhoods reveals high levels of social, economic, cultural and familial adversity (Lambie et al., 2016). Furthermore, there is growing recognition of the high prevalence of neurodiversity amongst this population (Gibbs, 2022).

The current model of care utilised by youth justice residences consists of a mix of philosophies, conceptual models and frameworks, guiding principles, regulations, and staff practices focused on the order of maintenance and safety (Francis & Vlaanderen, 2023). The long-standing use of behavioural management techniques in residences shows this approach to care is underpinned by a framework provided by behavioural psychology (Cohen, 2011; Parker, 2006).

In their 2016 report, Lambie et al. discuss the critiques of behavioural modification techniques. Token economies and point systems may produce some degree of

compliance, but do little to contribute to a young person's growth of self-regulation; one of the key development tasks of early adolescence. As Littlechild (2009, p. 230) stated, "it can be argued that helping young people to develop into responsible adults who can have mutually rewarding relationships is also part of what young people and the wider society should expect from those who care for them."

Against this wider backdrop, the possibility of introducing restorative and relational practices into youth justice residences began to be explored in early 2018. Three primary objectives were identified. The first aimed to establish a consistent, culturally informed practice approach. Early thinking held that a culturally designed approach could partially address the recommendations and opportunities identified by the Expert Advisory Panel and Office of the Children's Commissioner. The second objective sought to replace the reliance on behavioural management techniques, and the third aimed to lay a foundation for the future introduction of therapeutic programmes. It was posited that introducing a restorative-relational practice model into residences could be the first phase of a wider culture change programme. By building on innovative practices already under way, and enriching the operational culture, a restorative-relational approach could augment the foundation for the staged introduction of additional practice frameworks, therapeutic models, kaupapa Māori models, and consistent approaches to supporting young people.

In mid-2018, a small team of Māori and Pākehā academics, practitioners and restorative practice/justice professionals was brought together. Their goal was to design, develop, pilot and evaluate a Māori-informed restorative practice approach that could be used in youth justice residences. The name Whakamana Tangata was endorsed by the Chief Māori Advisor at Oranga Tamariki. It describes an approach to practice that facilitates the restoration of the mana of people, promoting their wellbeing in holistic



and culturally meaningful ways. The youth justice residence in Rotorua, Te Maioha o Parekarangi, was chosen as the pilot site.

### ***Restorative justice and restorative practice***

As a construct, restorative practices share a similar philosophical base to restorative justice, but they are distinct in their scope and applications.<sup>5</sup> In essence, restorative-relational practices contribute to the creation of a group culture based on care, dignity, and respect. The focus is on resolving issues between people in a manner that promotes understanding, empathy, self-development, and restoration.

In Aotearoa New Zealand, some recognise the influence of elements of Māori customs and traditions on restorative justice processes and practices to address wrongful behaviour (Wearmouth et al., 2007). Other scholars acknowledge “some synergy between restorative justice principles and indigenous tradition” (Cleland & Quince, 2014, p. 173). However, Cleland and Quince (2014), along with other critics (see Moyle & Tauri, 2016; Tauri & Webb, 2012), argued that incorporating Māori values and perspectives into FGCs and the broader youth justice and care and protection systems is often problematic and may result in tokenism and cultural appropriation. Similarly, Blank-Penetito et al. (2022) drew attention to the marginalisation of rangatahi and whānau by the criminal justice system, raising concerns about tokenism and cultural co-option in youth justice processes. In response, critics call for a focus on policy reforms and community-driven approaches that emphasise Māori leadership and autonomy in shaping impactful responses to young people and their whānau.

Turning to the role of residential settings for adolescents involved in justice processes, McCarney (2010, p. 275) stated:

The introduction of restorative practices is not just a matter of learning new skills. It is also about changing attitudes and

cultures – the creation of an ethos of respect, inclusion, accountability and the taking of responsibility. In a restorative environment young people, and indeed staff, are required to become accountable for the impact of their actions on other people, and to take responsibility for putting things right when mistakes are made. A restorative approach shifts the emphasis from managing behaviour to focusing on the building, nurturing and repairing of relationships.

Restorative practices in education began to be implemented in Aotearoa New Zealand in the late 1990s. The use of this approach in five schools was investigated, with generally positive results reported (Buckley & Maxwell, 2007). However, the unique nature of residences meant taking a restorative practice model used by a school and embedding it into a youth justice residence was deemed undesirable. A model designed to fit the residential environment was required.

### ***What should a restorative-relational, te ao Māori-based practice model for residences look like?***

The underlying ethos and values of a restorative-relational practice approach were found to be closely aligned with te ao Māori values of rangatiratanga (autonomy / self-determination), kaitiakitanga (safety), whakapapa (identity and belonging), whakawhanaungatanga (familial relationships), whakamānawa (respect), and manaakitanga (support and care). The key stakeholders who designed the approach proposed that these values, and their associated obligations and reciprocities, be developed into Whakamana Tangata, a te ao Māori-centred approach of restorative-relational practice.

### **Illustrating the approach**

Whakamana Tangata is a relational-restorative practice approach for rangatahi which weaves together five Māori values—ara tikanga,<sup>6</sup> mana,<sup>7</sup> tapu,<sup>8</sup> mauri ora,<sup>9</sup> and

piringa<sup>10</sup>—and four restorative principles: relationships, respect, responsibility, and repair.<sup>11</sup> It expresses a way of being and living in relationship with other people that enhances mana, protects tapu, and seeks to foster mauri in all relationships. The values of mana, tapu and mauri ora give expression to te ao Māori and describe the social context in which relationships are exercised. Piringa, within Whakamana Tangata, relates to a process of building and restoring connection through safe, face-to-face dialogue. Ara tikanga as a practice encompasses knowing the right course of action, having the strength to do the right thing in difficult circumstances, choosing the right pathway, and finding the courage to move forward.

This approach draws inspiration from the voyaging of Māori to Aotearoa and their successful navigation of Te Moana-nui-a-Kiwa, the Pacific Ocean. Trained navigators were guided by te rā (the sun), ngā whetū (the stars), ngā manu me ngā hua rakau (birds and plant life), and ngā hau me ngā tai (the winds and tides). Whakamana Tangata employs this same journeying metaphor for rangatahi and kaimahi (youth workers) as they navigate life within the residence and beyond.

Core practices applied within Whakamana Tangata, mainly referred to in this article, include the kōrero whakapiri, hui whakapiri and noho mauri. Further practices and practice tools as part of Whakamana Tangata encompass the Social Discipline Window (adapted by McCold & Wachtel, 2001), a tool for reflecting on the quality of relationships with rangatahi; Pātai versus Kōrero (ask versus tell) to encourage dialogue and participation in a conversation; Community Hui, where rangatahi can practise skills such as listening to others, sharing and managing their thoughts and feelings, having their voices heard, and solving problems, and Hue Whakapiri, which symbolises the three components of a Hui Whakapiri: preparation, participation, and follow-up.

Kōrero whakapiri is a structured restorative dialogue, based on four steps, to address low- or medium level incidents. This one-to-one conversation takes place between kaimahi and rangatahi and is particularly employed when rules, regulations, tapu, tikanga and kawa have been breached. Hui whakapiri refers to a facilitated restorative process used to discuss issues with the intention of seeking resolution. It is employed to restore mana and balance mauri ora when tapu has been breached, and when relationships and connections have been impacted or damaged. Lastly, the noho mauri process is a restorative version of the time-out procedure, adapted from a process referred to as a Non-Participation Table. Its aim is to explore self-regulation techniques and help rangatahi understand the broader implications of their wrongdoing. Noho mauri provides rangatahi with time to calm down and de-escalate, followed by a kōrero whakapiri to explore the implications of the harm and how to address it.

## Findings from the pilot evaluation

### *Evaluation approach and methodology*

The overall aim of the evaluation was to assess the implementation of the Whakamana Tangata approach in Te Maioha o Parekarangi (Te Maioha).<sup>12</sup> Specifically, the evaluation explored its impact on the practice of residential kaimahi and how it affected the relational culture within the residence. Additionally, though to a lesser extent, it considered the approach's effects on rangatahi in Te Maioha.

A developmental evaluation approach was employed, which provides feedback and generates insights while a programme is in the design and early implementation phase.<sup>13</sup> This approach supported refinement and adaptation as Whakamana Tangata was being implemented and embedded within the residence. The evaluation also identified factors that influenced the implementation and sustainability of the approach, while assessing stakeholders' overall experiences with the pilot.

Ethical approval was obtained from Te Herenga Waka – Victoria University of Wellington’s Human Ethics Committee. The evaluation design and objectives have been discussed with the Design Group as well as with the residence manager of Te Maioha and senior officials at Oranga Tamariki. The evaluative framework was informed at an early stage by contributions from Māori researchers and residential kaimahi involved in the design and planning of the practice approach.

The evaluation used a non-experimental design and included both qualitative and quantitative data analysis to assess the implementation and embedding of the practice approach, as well as its broader impact on the residential culture.

In total, 31 semi-structured interviews were held with different sets of participants. These included 22 interviews with residential kaimahi and leadership to capture their experiences with, and perspectives on, the implementation and further embedding of Whakamana Tangata. Additionally, two interviews were conducted with members of the Design Group to gather their views on the introduction and embedding of the approach, and seven short interviews were held with rangatahi on Whakamana Tangata values and practices. Interviews were held face-to-face except for one which was conducted via Zoom. Interviews with rangatahi were conducted by designated Oranga Tamariki kaimahi outside the residence, and in accordance with Oranga Tamariki ethical guidelines. Although this approach may raise concerns regarding potential power imbalances and intimidation that could affect the responses of rangatahi participants, it was chosen to ensure interviews were conducted sensitively and appropriately by well-prepared staff. The involvement of kaimahi who have expertise in engaging with rangatahi, along with their familiarity and understanding of the cultural and systemic contexts, helped foster a supportive interview process.

In addition to the interviews, two focus groups with seven young men at Te Maioha and one focus group with three kaimahi were facilitated by Design Group members to seek early feedback on Whakamana Tangata. Another focus group, comprising four Design Group members, was held to discuss the underlying philosophy and concept of the approach. In total, 14 participants attended the focus groups. Informed consent was gained prior to the interviews and focus groups, and the recordings were transcribed verbatim.

Furthermore, the findings were informed by questionnaires and a survey. Post-training questionnaires were completed by 149 participants in initial and ongoing Whakamana Tangata training. A survey seeking feedback on kaimahi views and experiences on the practice approach included responses from 47 participants. Moreover, a small number of follow-up questionnaires ( $N = 8$ ) provided kaimahi reflective feedback on the experience with hui whakapiri.

The methods also included the analysis of background information and the review of training and practice videos. Data were collected from December 2018 to December 2020. Data coding and analysis were conducted using NVivo data analysis software.

### ***Limitations of the evaluation***

One of the main limitations of this evaluation was the small number of rangatahi who contributed directly—only 14 participated through focus groups and interviews. This limitation is related to time and resource constraints in complying with ethical standards in a timely manner. Therefore, our assessment on how rangatahi experienced Whakamana Tangata is complemented by kaimahi perspectives of the value of the practice approach for rangatahi.

The validity of our findings faces additional limitations due to the context in which Whakamana Tangata was implemented. The

implementation occurred during a period of significant change and transitions within Te Maioha. Thus, when discussing the impact of Whakamana Tangata, we refer to our assessment as reported by the participants. It is important to acknowledge that it is not feasible to attribute all observed changes solely to Whakamana Tangata, nor can we disregard the influence of other concurrent activities.

Another limitation pertains to the inability to use statistical data on behavioural incidents to assess the impact of the practice approach on rangatahi behaviour. This limitation arises from various factors, including the way data are collected and the complex nature of incidents. Consequently, meaningful and valid conclusions could not be drawn, and the findings were not included in the evaluation.

Finally, the effects of Covid-19, alongside legislative and structural changes in youth justice and significant staff turnover at the site, had an impact on implementation and evaluation timeframes.

### **Key findings and discussion**

This section discusses key evaluation findings. First, it focuses on critical factors that contributed to the successful implementation of Whakamana Tangata in Te Maioha and the challenges related to its further integration into practice. Second, it assesses the impact of the restorative, te ao Māori-based approach on kaimahi practice and the residential culture. Third, it examines how well rangatahi comprehended and responded to the practice approach, acknowledging the limitations of the small sample size.

#### **Factors that contributed to the successful implementation**

##### **Design process**

The evaluation revealed that the implementation of Whakamana Tangata, conceptualised as a *way of being*, was effectively set up by the Design Group.

The Design Group consisted of 10 practitioners and researchers with diverse professional backgrounds, including social service, education, youth justice, restorative justice practice, public policy, academia and iwi<sup>14</sup> governance. Nearly half of the Design team self-identified as Māori. The participation of three local staff members in the Design Group facilitated the creation of a tailored, residence-specific approach for kaimahi and rangatahi, fostering a greater sense of ownership. Respondents highlighted the value of this co-design approach in the conceptual development of Whakamana Tangata. The Design Group considered rangatahi voices in developing and continuously adapting the practice approach. External advice was also sought from local iwi Te Arawa and Māori justice sector experts.

The design process evolved through comprehensive discussions, debates and thoughtful reflections over an extended duration. The group delved deeply into core aspects that would shape Whakamana Tangata, including the Māori values and restorative principles. Te ao Māori encompasses a rich array of values, and the Design Group carefully chose the most appropriate ones for the residential setting, as emphasised by a Design Group member:

The DG [Design Group] worked really hard in thinking about what would work for Māori young people. Along with reviewing a range of literature and evidence, deep discussion, they grappled very thoughtfully. They considered the appropriateness and fit for rangatahi and for a YJ [Youth Justice] residence. For example, there are many Māori values (tikanga) that apply in a te ao Māori world. They considered and selected those most appropriate for the context and the fit with restorative practice. (Design Group member)



The Design Group's profound conceptual groundwork signalled the initiation of a journey towards aligning Māori values with restorative justice practices, an ongoing endeavour.

*Training, development of resources and integration of Whakamana Tangata values into restorative practices*

The training and professional development opportunities developed by the Design Group provided a solid foundation for the implementation and embedding of Whakamana Tangata into residential practice. Training recipients found the Whakamana Tangata training to be a valuable experience.

This [training] has helped me to build rapport with all different personalities of our rangatahi and also my work peers. (Te Maioha kaimahi)

We are on a journey and the idea of navigating our waka using stars, and then giving our rangatahi the skills to one day navigate their own waka really resonated with me. (Training participant)

Additionally, a suite of materials, including the Whakamana Tangata kete (manuals) and visual resources, was created by the Design Group and the Practice Lead (see below for the role of the Practice Lead). These materials were progressively adapted to serve as reminders to rangatahi and kaimahi of the values and to facilitate their integration into conversations.

Whakamana Tangata values and principles were also gradually incorporated into existing recording processes and aligned with other value frameworks, including those developed by the educational provider.

*Role of the Practice Lead and site-based Design Group members*

The introduction of the Whakamana Tangata Practice Lead (Kaiwhakaue<sup>15</sup>) role was a

pivotal factor for the implementation of the practice approach. The Practice Lead, embedded within the Design Group, shared real-world insights with the Design Group. Regularly mentored by a Design Group member, the Practice Lead facilitated adaptations of the approach, gathering practical insights and feedback from colleagues. Collecting views from rangatahi, through the use of creativity and arts, enabled the transformation of Whakamana Tangata tools into a language that was more accessible to rangatahi. In particular, the Practice Lead assumed a critical role in offering on-site guidance, mentoring, training and support to residential kaimahi, shepherding the implementation within the residence.

He connects really well with all the staff and with leadership. He makes it real. He makes it something that people want to engage with. So, I think that person is really key... (Te Maioha kaimahi)

Along with the Practice Lead, two site-based Design Group members contributed to an enhanced understanding and implementation of Whakamana Tangata values and practices within the residence. They assisted in developing professional capacity within the residence while serving as a valuable knowledge and learning resource for the Design Group.

### ***Challenges and barriers to implementing and embedding Whakamana Tangata***

The implementation of Whakamana Tangata coincided with a period marked by significant transitions and legislative reforms in the youth justice sector. Notable changes included the implementation of Section 7AA of the Oranga Tamariki Act<sup>16</sup> and the inclusion of 17-year-olds in the youth justice system, alongside structural changes at Oranga Tamariki. Concurrently, new frameworks and programmes were introduced at youth justice residences across



the country, which imposed additional expectations on staff during the rollout of the new practice approach. Some kaimahi were initially sceptical about the long-term sustainability of the approach. Some expressed confusion and uncertainty as they navigated through the diverse sets of values adopted at the site:

Is this something that's going to be around? Because, after being around for so long, I want to know what I am going to put my energy into. Is this something else that's going to change in two years, and we're going to be adapting to something else? (Te Maioha kaimahi)

A few kaimahi perceived Whakamana Tangata as a soft option for addressing harmful behaviour, while others resisted the approach, believing they were already doing it in practice.

To address these challenges, concerted efforts were made to align Whakamana Tangata values with those already in place. Nevertheless, as with any new practice approach, instilling confidence and integrating it into day-to-day routines requires time. The application of Whakamana Tangata faced particular difficulties due to the raft of internal and external changes occurring simultaneously. One kaimahi highlighted the difficulty of “maintaining fidelity within a flexible environment, given the constant changes” as a key concern.

High staff turnover and the recruitment of new kaimahi further complicated the implementation and integration process. Additionally, Oranga Tamariki has come under some intense media scrutiny. All these factors contributed to a complex implementation environment, resulting in the extended timeframes observed for kaimahi to apply the new practice approach effectively.

### ***Whakamana Tangata as a culture and practice shift for Te Maioha***

The integration of Whakamana Tangata into the residential culture and day-to-day

practices of kaimahi has become increasingly evident. This shift was demonstrated by the growing number of kaimahi who have applied Whakamana Tangata values, principles, and tools in their practice. Moreover, significant efforts had been made to adapt tools and site processes to better align with Whakamana Tangata.

Practice changes were noticeable in the manner in which kaimahi engaged and communicated with rangatahi and their peers. Kaimahi have progressively adopted more restorative-relational and less directive language and communication when engaging with rangatahi. For example, they have encouraged rangatahi to participate in conversations using open-ended questions, as well as inviting reflection on their behaviour. This communicative approach has also been increasingly reflected in the way kaimahi worked, fostering an environment that supported kaimahi to explore new ways to engage with each other.

The use of te reo Māori, along with Whakamana Tangata values and concepts, has helped locate kaimahi within te ao Māori. Kaimahi have expressed appreciation for the authenticity and genuineness of Whakamana Tangata, viewing it as a way of thinking that resonates with their work and offers guidance for their practice.

A survey conducted among 47 kaimahi, capturing their experiences with Whakamana Tangata training and practice application, revealed that 94% of kaimahi applied the principles and values of the approach, to some extent, in their practice. More than half indicated that they consistently used the principles and values, with 45% doing so most of the time and 15% adhering to them all the time. The relatively small proportion of kaimahi fully integrating the approach suggests that its implementation remained an ongoing process at the time, highlighting potential challenges in embedding the practices comprehensively.

Numerous respondents acknowledged that the application of Whakamana Tangata had contributed to a shift in their mindset concerning their practice. Increasingly perceived as a *way of being*, kaimahi expressed that Whakamana Tangata raised their consciousness of working in mana-enhancing ways (55%)<sup>17</sup>. Furthermore, it underscored the importance of genuinely listening to rangatahi (49%) and facilitated a deeper comprehension of their needs (47%). Kaimahi also found that Whakamana Tangata equipped them with tools and practices to engage more effectively with rangatahi (47%), and offered a value- and principle-based framework for respectful engagement with them (43%).

I believe that, most importantly, it has educated me and influenced my practice to be increasingly more mana enhancing and gave examples of this to which I can now carry out and be aware of on the floor. (Survey quote)

In relation to their working relationship with peers, kaimahi emphasised that the practice approach helped them communicate more effectively with their colleagues (49%), show respect for points of view different from their own practice (47%), and engage in reflective practice conversations with their peers (45%). It also increased their knowledge regarding how to handle difficult situations and conflict (43%).

Kaimahi commented on a shift towards more frequent use of restorative, reflective practices instead of reactive responses. Such practices contain hui whakapiri, kōrero whakapiri and noho mauri, as briefly described above.

I think just the general feel and practice; I just remember maybe three years ago there was a lot of incidences – staff were involved more often than they ever should be, and [...] well, not often were the boys heard. They weren't asked what

actually happened. It was, "No – you did this – goodbye – you're in secure"; that kind of feeling. It was a lot more common. It's great to see that kind of stuff doesn't happen now. (Te Maioha kaimahi)

A common example of implementing Whakamana Tangata in daily work involved using the hui whakapiri process, with emphasis placed on the preparation and follow-up phases to ensure effective practice.

Kaimahi found that restorative practices, such as hui whakapiri, were beneficial for rangatahi due to their structured format, use of plain language, and incorporation of Whakamana Tangata values. These practices helped rangatahi engage more constructively with one another and supported them in reflecting about the harmful event and its impact, thereby enhancing their abilities for self-reflection and emotional self-regulation.

Furthermore, kaimahi emphasised the growing importance and practice value of noho mauri for rangatahi to prevent further escalation of conflicts. This practice allowed them to reflect on their behaviour and, subsequently, engage in a restorative conversation to explore ways to repair the harm caused. Remarkably, kaimahi noted a shift, with several rangatahi taking the initiative to take part in noho mauri over the course of the pilot, a development not observed prior to the introduction of this approach.

It's much more positive. The relationship, so time out is not perceived now as a punitive process where you've been naughty so you've got to go to timeout, but actually, this is a really important time for us to unpack what's going on for you today and how can we help you and how can we support you, so that has definitely changed. (Te Maioha kaimahi)

### *Rangatahi experiences with and views on Whakamana Tangata*

As previously mentioned, the evaluation included only a small number of rangatahi. Therefore, alongside their input, kaimahi perspectives were also considered regarding the value of Whakamana Tangata for rangatahi.

A total of 14 rangatahi participated in the evaluation, either through interviews or focus groups. Seven rangatahi engaged in interviews, sharing their experiences with Whakamana Tangata practices and their thoughts on its values and principles. Of these, six had previously participated in a hui whakapiri, while one had engaged in a noho mauri.<sup>18</sup>

The responses to hui whakapiri were mixed. Four out of the six rangatahi who had taken part in a hui whakapiri acknowledged its value reporting that it provided them with opportunities to set aside differences, engage in dialogues, and resolve problems with each other. However, two rangatahi did not find the experience beneficial. The one rangatahi who had participated in a noho mauri described it as a way to be “given some space”, but expressed frustration at missing out on scheduled programmes.

The Whakamana Tangata values that resonated most with rangatahi were mana, ara tikanga and piringa. These values were notably applied, for instance, when helping others to get along with each other, encouraging rangatahi to participate in activities, and making others feel welcome.

Rangatahi who participated in the focus groups ( $N = 7$ ) observed a shift in kaimahi practices. For instance, when conflicts or incidents arose, they were given the opportunity to calm down before engaging in explanatory discussions with kaimahi. Moreover, rangatahi noted that kaimahi did not automatically resort to sending them to the secure unit,<sup>19</sup> instead, they were given the chance to de-escalate, reflect and engage in a conversation with each other.

This was particularly noticeable to rangatahi who had stayed in youth justice residences other than Te Maioha.

I had [a] confrontation with another young person in another unit and they didn't use those over there. They were going to resort to sending me to secure, but then [the kaimahi] came over and said “Let's try a different way”, and put the Whakamana Tangata in play. And just leave us down in the wing for a little bit and calm down and let us talk, me and the other young person..., rather than sending us to secure straight away. So it was better we didn't go to secure. (Rangatahi, focus group)

Furthermore, rangatahi appreciated receiving the tools and strategies to better manage situations and resolve issues with their peers. They valued the opportunity to voice their opinions and were encouraged to consider alternative responses when faced with challenging situations. Nevertheless, it is important to note that placements in youth justice residences are typically too brief to significantly impact long-term behavioural change.

### **Conclusion**

Whakamana Tangata has emerged as more than just a programme or framework; for both kaimahi and rangatahi, it has introduced a shift in thinking about engagement with each other, emphasising restorative practice and te ao Māori values.

The application of Whakamana Tangata values and principles, as reflected in specific tools and practices, has fostered a culture that promotes a more respectful, relational and dialogical approach in interactions with rangatahi. The findings suggest that Whakamana Tangata has encouraged kaimahi to actively listen to rangatahi and promote their participation in decision-making processes. This shift has contributed—at least to some extent—to

a deeper understanding of the needs of rangatahi, reinforcing their sense of being valued within the residential environment.

Furthermore, there is emerging evidence that Whakamana Tangata has facilitated the early stages of a shift toward a more respectful and positive team culture. Kaimahi have reported increased confidence in engaging in open and courageous conversations while respecting differing perspectives. The practice approach has also supported reflective practice among kaimahi and provided them with options to engage more respectfully and collaboratively with their peers.

Within a relatively short implementation period, Whakamana Tangata has become part of the fabric of Te Maioha. Despite the complexities and challenges associated with its implementation, there is good evidence supporting its positive impact on kaimahi, with emerging indications of benefits for rangatahi. However, at the time of the evaluation, Whakamana Tangata had not yet been fully embedded across the residence, nor was it consistently applied. Nevertheless, early indications suggest promising progress toward deeper integration into everyday practice.

Following its introduction at Te Maioha, the practice approach has been progressively rolled out at the remaining four youth justice residences. Restorative practices have begun to take shape at multiple sites. To address challenges in embedding Whakamana Tangata and to strengthen kaimahi understanding, continuous professional development has been established. Additionally, a permanent Kaiwhakaue (Practice Lead) position has been created in all (bar one) residences, providing structural support for the ongoing integration of the approach. Further efforts could be made to enhance whānau engagement in Whakamana Tangata practices, particularly to support rangatahi in their transition back to their communities. Strengthening this

aspect would further promote the enduring sustainability of the approach.

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## Notes

<sup>1</sup> The authority to establish a secure youth justice residence, and their purpose, is set out in section 364 of the Oranga Tamariki Act 1989. Two youth justice residences are located in Auckland, and one each in Rotorua, Palmerston North and Christchurch. Alongside these youth detention facilities, Oranga Tamariki operates a small number of secure care and protection facilities.

<sup>2</sup> In 2023, the Office of the Children's Commissioner was disestablished and in its place a Children's Commissioner created.

<sup>3</sup> The reports can be found at <https://www.manamokopuna.org.nz/publications/?search=state+of+care>.

<sup>4</sup> More precisely, the data cover the period from July 1, 2017 to June 30, 2024.

<sup>5</sup> For a more recent discussion on the meaning of restorative justice, we refer to various authors' contributions to *The International Journal of Restorative Justice* 2023, (6)3, "Special issue on the evolving meaning of restorative justice: A discussion".

<sup>7</sup> Ara signifies a way or path, and tikanga means to do things correctly. Ara tikanga expresses the call to a new pathway.

<sup>8</sup> Mana is the respect people deserve from others and give to others. It is the inherent dignity that all people are born with. As a practice, mana is about giving and showing respect.

<sup>9</sup> Tapu signifies something sacred or precious. It also describes the boundaries needed to protect the mana of people or significant objects or places.

<sup>10</sup> Mauri ora expresses the vitality and fullness of an active life (Moorfield, 2011). It provides people with a sense of control over themselves and the capacity to deal with their environment.

- <sup>11</sup> Piringa is generally thought of as having a safe place, haven or refuge (Online Māori Dictionary).
- <sup>12</sup> The description of the five values is based on the explanation provided by the Design Group in *Kete Tuatahi (Kete One)* (Oranga Tamariki, 2020a) and *Kete Tuarua (Kete Two)* (Oranga Tamariki, 2020b). For more details on the values and principles see Oranga Tamariki, 2020 and 2020a.
- <sup>13</sup> The evaluation was conducted by [authors], see report on the pilot evaluation (authors, 2021).
- <sup>14</sup> As such, it integrated elements of formative and summative evaluation.
- <sup>15</sup> Extended kinship group, tribe, nation.
- <sup>16</sup> The Māori word kaiwhakaue can be translated as steersman, waka steerer.
- <sup>17</sup> The section underlines the commitment to the Treaty of Waitangi. It emphasises that Oranga Tamariki must give regard to the three core legislative principles mana tamaiti, whakapapa and whanaungatanga, and ensure that these principles inform policies, practices and services.
- <sup>18</sup> Kaimahi could select multiple responses.
- <sup>19</sup> A hui whakapiri is a facilitated restorative process, while a noho mauri refers to a time-out procedure designated to give rangatahi time to calm down and de-escalate, as previously described.
- <sup>20</sup> Youth justice residences have an area (unit) that is designated for secure care. Young people can be admitted to this area if they meet the grounds set out in section 368 of the Oranga Tamariki Act 1989. The use of secure care is carefully regulated in the legislation.
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# Soft-spoken and sympathetic: Gendered news-media social worker narratives in Aotearoa New Zealand

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## ABSTRACT

**INTRODUCTION:** Social work is a female-dominated profession. This study aims to answer the question: what are the gendered narratives of social workers as portrayed in Aotearoa New Zealand newspapers. Despite previous studies investigating the portrayal of social workers in newspaper media in association with crises or specific events, this research investigates a current gap in the literature by focusing explicitly on the role of gender in media reporting across period of 3 months in 2023.

**METHODS:** Newztext was used to search regional and national news media publications between January 1, 2023 and April 1, 2023 for any mention of social work or social workers. In total, 36 articles were included in the final sample, and content analysis was conducted by combining a qualitative and quantitative approach to identify both latent and manifest narratives.

**FINDINGS:** Social work is portrayed as a feminised profession, with key themes of altruism and nurturing combined with dominant terms of help and support reinforcing the historical perceptions of social work as women's work. The findings also evidence unfavourable working conditions experienced by the profession.

**CONCLUSION:** Although further research is needed, this study recommends that collaboration between the social work profession with the media is vital to challenge current portrayals of social work to better inform public perceptions. This will subsequently help improve the value and treatment of social work and care work within society, the public, and across other professions and disciplines.

**Keywords:** Media, social work, newspaper, gender, narratives, public perception

## Media perceptions of social work: A review of the literature

News information shared through multiple communication channels shape, construct, and reproduce individuals' opinions and perceptions of themselves, others, and the world around them, and as a result, can also influence their behaviours and attitudes (Lowrey, 2018; Nairn et al., 2011).

Mass media, including newspapers, act as a vehicle for promoting and reinforcing dominant norms and messages to the public (Arias, 2019). Information shared through the media, therefore, aids in creating an acceptance of common knowledge, whether positive or negative, resulting in shared beliefs and updating of societal norms (Arias, 2019). This phenomenon can be further understood through the theories

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of agenda setting (Wanta & Alkazemi, 2018) and cultivation theory (Arendt, 2010) which explain how news media construct, maintain, and reproduce societal perceptions and representations.

Agenda-setting theory explains how the amount of coverage and focus given to an issue or topic in the media influences the public's attention and discussion of the topic, including the perceived importance to an individual's own life (McCombs & Shaw, 2005; Wanta & Alkazemi, 2018). It is argued that media filter information to the reader, and suggests that the issues predominantly reported on can influence what becomes prominent in the public domain. Agenda theory can act to reinforce an individual's beliefs and how strong they hold an opinion rather than necessarily changing them (Wanta & Alkazemi, 2018).

Cultivation theory describes the effect of long-term exposure to the media in shaping consumers' perception and behaviours (Arendt, 2010). Though cultivation theory was originally formed based on investigating the influence of television, research focusing specifically on the role of newspapers has found an individual's perception of the world and their view of reality becomes more aligned with the messages and attitudes shown through the newspaper the more they consumed these (Arendt, 2010). Widely accessed forms of media and media outlets, therefore, have the power to influence the public's perception, with the potential to shape the general public's understanding of social work and related practice and issues (Lowrey, 2018; Stanfield & Beddoe, 2013; Wanta & Alkazemi, 2018).

To date, there have been multiple studies investigating the influence of the media in forming or altering public perceptions of social work around the world. One study in Sweden reported changes in the public's trust in social services and social workers due to exposure of scandals of benefit fraud in the news (Niehaus & Krüger, 2016). The

study found that questioning or diminishing the trustworthiness and credibility through the news can alter the perceived value of social work by either confirming or highlighting the public's opinions and ultimately shaping societal beliefs (Niehaus & Krüger, 2016). Furthermore, individual actions like client cooperation and likeliness to access services can also be influenced by messages in the media (Arias, 2019; Myllylahti & Treadwell, 2021; Niehaus & Krüger, 2016).

In the context of the United Kingdom, it has been argued that the news media is one of the main contributors to individual and public perceptions of social workers and the social work profession (Legood et al., 2016). This is highlighted in Warner's (2014) analysis of news media related to the death of Peter Connelly in England. The study highlighted how news media lead a moral and emotional attack on social workers through language choice and partial portrayals to demonise social workers. This case study argues that the media can act as a conduit to mobilise public anger through portraying certain narratives and constructs of social workers (Warner, 2014).

Similar negative media portrayals of social workers seen in the United Kingdom have also been observed in Aotearoa New Zealand (Keenan, 2000; Stanfield & Beddoe, 2013). Described as a "frenzy of media interest in child abuse cases" (Keenan, 2000, p. 7), Stanfield and Beddoe (2013) further posited how public scrutiny and a focus on negative stories can contribute to "high stress levels and low retention rates" in the profession which, in turn, can affect the quality and consistency of social work services (Stanfield & Beddoe, 2013, p. 42). Furthermore, they argued that inaccurate news reporting can have a substantially negative impact on the public's perception and opinion of social workers, decreasing the likelihood of members of the public engaging with social workers or social services. Extended by a telephone survey-based study, Staniforth

et al. (2014) found members of the public believed the image of social work needed to be improved and concluded that the participants' ideas for improvement may stem from internalisation of negative and highly emotive portrayals of sensitive cases in the media, often associated with violence or perceived incompetence of social workers. In a further study examining the media portrayal of Child Youth and Family, the statutory child care and protection service in Aotearoa New Zealand at the time, Staniforth and Beddoe (2017) found limited reporting on the range of issues and interventions in which social work and social workers are engaged. Findings highlight a strong theme of failure, with only an occasional "glimpse of a noble, quietly heroic social worker" being shown (Staniforth & Beddoe, 2017, p. 16).

The above studies are reiterated by Staniforth et al. (2022) who similarly found that negative news stories created a general lack of understanding and undervaluing of social workers. Staniforth et al. (2022) highlighted how the sensationalised nature of the media in Aotearoa has garnered the most shocking response from the public, particularly of child protection uplifts and deaths. The findings go further, however, by also highlighting the media's criticisms on the perceived failings of individual social workers rather than structural and systemic issues. The authors argued that, for the social work profession to influence the narrative of the media, relationships with the media and developing spokesperson roles with organisations are needed to be proactive against negative portrayals (Staniforth et al., 2022).

As a profession that has gained significant negative attention, social work must be proactive and transparent in both practice and mistakes while also actively working to build connections with the media (Legood et al., 2016; Staniforth et al., 2014; Staniforth et al., 2022). The issue of gender is discussed briefly by Staniforth et al. (2014), although

it is not considered as part of the analysis of current studies in an Aotearoa New Zealand context. Gender, however, has played a key factor in the history and development of social work both internationally and within Aotearoa New Zealand.

### A gendered history of social work

Historically, the aim of social work has been to provide aid and charity to those who were poor, sick, widowed, or orphaned, and mentally or physically disabled people (Leighninger, 2012; Pierson, 2011). Arising from growing inequality and social issues combined with insufficient state support, early pioneers of social welfare and social work established the first coordinated movement, the *friendly visitors* in England in the 1800s (Chenoweth & McAuliffe, 2015; Leighninger, 2012). Friendly visitors were volunteers, and almost always middle-class white women of an evangelical background. Through visiting people in their homes, it has been argued the friendly visitor movement was underpinned by the intention of improving personal conditions through reforming the moral character and choices of the poor in association with religious values and classist and gendered ideas of the home (Chenoweth & McAuliffe, 2015; Pierson, 2011; Winter & Cree, 2016).

Alongside the friendly visitors was the establishment of the Charity Organisation Society (COS) in the 1840s in England. It was a privately funded establishment aiming to co-ordinate local charities which involved many of the friendly visitor volunteers (Pierson, 2011). The COS continued to follow the philosophy of the deserving poor and operated on beliefs of moral and internal deficits rather than external factors impacting on individuals' living situations (Chenoweth & McAuliffe, 2015; Maidment & Beddoe, 2016; Pierson, 2011). Harlow (2004) highlighted the deeply rooted nature of historical philanthropy and charity work; social work has long drawn upon women's expected roles, knowledge, and skills which

aided in providing women with acceptable opportunities and activities to contribute outside of the home sphere. This argument is reinforced by Winter and Cree (2016) who stated that friendly visitors were thought to draw upon the natural ideas and abilities of women and their class status to be role models for poor families. As social work continued to expand as a profession through England and the United States of America, increased demand and paid positions eventually led to a need for training and a shift away from the voluntary model (Dahle, 2012; Maidment & Beddoe, 2016; Pierson, 2011).

Leighninger (2012) noted that the expansion from volunteers to paid and trained workers has been a key development whereby social work became a viable career path for many college-educated women, perceived as a profession that follow traditional gender roles (Pierson, 2011). Moving from voluntary to a salaried position was also vital to the growth of the profession in Aotearoa New Zealand, being similarly viewed as a viable career path for women (Maidment & Beddoe, 2016) with shared Eurocentric gender roles resulting from colonisation.

### **Aotearoa New Zealand context**

Prior to colonisation and the systematic settlement of migrants from Great Britain and beyond, tangata whenua had a system of social welfare based on community, collective responsibility, and restorative justice (Maidment & Beddoe, 2016; Nash, 2007; Waitangi Consultancy Group, 1991). The introduction and enforcement of Eurocentric ideologies and western beliefs, however, influenced gendered traits and assumed normative behaviours with a strong focus on a nuclear family unit. As argued by Garlick (2012), this was replicated through early forms of social welfare whereby child welfare field officers were allocated based on the worker's gender and supposed natural traits. Men were assigned to work with and monitor male adolescents, while women

were tasked with looking after infants, girls, and young boys, and to engage in more general roles relating to domestic duties (Garlick, 2012). Social work in Aotearoa New Zealand continues to be a female-dominated profession, with 84% of the profession identifying as female (Aotearoa New Zealand Association of Social Workers [ANZASW], 2022). Gender is an important consideration as social work has been, and continues to be, a highly feminised profession, contributing to vertical and horizontal segregation, as evidenced in the recent pay equity claims in Aotearoa.

Vertical segregation is the division of labour between management and worker positions in a profession, often resulting in differences of pay, benefit, and status (Heilman, 2001; Ministry for Women, 2019, 2022; Talbot, 2003). Within social work, men have historically been recruited for management positions due to gender stereotypes valuing perceived natural leadership abilities (Jones et al., 2019 McPhail, 2004). The Ministry for Women (2022) refers to horizontal or occupational segregation as instances where either men or women occupy 70% or more of the workforce, identifying nursing, teaching, and social work as examples of highly feminised professions within Aotearoa New Zealand (Ministry for Women, 2022; Mitchell et al., 2022). Occupational segregation is considered a main contributor to the gender pay gap, as feminine work is historically undervalued and underpaid compared to professions dominated by men (Ministry for Women, 2022; Pease, 2011).

A recent development within social work as a profession in Aotearoa New Zealand is pay equity, which addresses historic gendered pay inequalities. The issue of fair and equitable pay arose from a pay equity claim for Oranga Tamariki in 2018 which has ultimately led to pay equity for community and iwi social workers which began in 2022 (Social Service Providers Aotearoa [SSPA], 2022). An investigation into the responsibilities and competencies

needed in social work compared to other male-dominated professions has contributed to greater recognition of the skills and knowledge required for the role, acknowledging the historic underpaying of the profession due to social work being female dominated, and thus undervalued within society (ANZASW, 2022; SSPA, 2022). Ongoing concerns of pay equity, who is eligible and how it is addressed across the profession continue to highlight the gendered nature of social work.

With social work continuing to be a female-dominated profession and recognising the influence the media holds over public perceptions, the following study was designed to answer the question, “What are the gendered narratives of social workers and the profession as represented in Aotearoa New Zealand newspaper articles.” Previous studies have explored the media representation of social work in general terms or in response to crises (Legood et al., 2016; Stanfield & Beddoe, 2013; Warner, 2014), however, an exploration of the gendered narratives has been overlooked. This study seeks to extend existing research and subsequently considers potential implications on an individual, organisational, and wider societal level including pay, work conditions, and vertical and horizontal segregation of social workers.

## Method

As part of an Honours dissertation, a content analysis of news media produced over a 3-month period, from January 1–April 1, 2023, was conducted. This period was determined to gather a sample of current newspaper articles, whilst being restricted in size due to the dissertation requirements and available time. Newztext was used as the search database to compile and collect relevant articles. This database was chosen as an archival search engine as it includes national and regional newspaper articles with consistent indexing across all sources to ensure systematic coverage of news media that was not limited

to individual publishers. Whilst the authors recognise access to information has diversified with greater media outputs, newspapers retain relevance in society whereby much of the material is also now published online and shared through social media, and printed copies help bridge a continued digital divide, as it cannot be assumed everyone has both access to technology and the necessary skills to navigate online material. Furthermore, newspapers continue to cover both national and regional attitudes and perceptions of social workers, providing written records that contribute to an archive that can illustrate both current developments and historical narratives.

The keyword “Social work\*” was employed to search Newztext, capturing occurrences of “Social work” OR “Social worker” OR “Social workers” across the title, body and author notes of all newspaper articles. This approach was adopted to ensure all potential newspaper articles relating to social work practice and the role of social workers were included in the initial search.

The initial search produced 190 newspaper articles from within Aotearoa New Zealand as seen in Figure 1. Seventy articles were replicated in two or more newspapers. After removing replicates, there were 106 unique results. The title, body of the text, and author’s note for each article was screened to determine relevance to the research question. Newspaper articles that made no direct mention of social workers and the work they do were excluded from the final study (See Figure 1). In total, 36 newspaper articles that contained comments, discussion, or mention of social workers and their work were included in the final sample. This process was repeated with the second author to ensure consistency in determining inclusion and exclusion.

## Analysis

The authors of this study both identify as tangata Tiriti/tau iwi, cis gendered women,



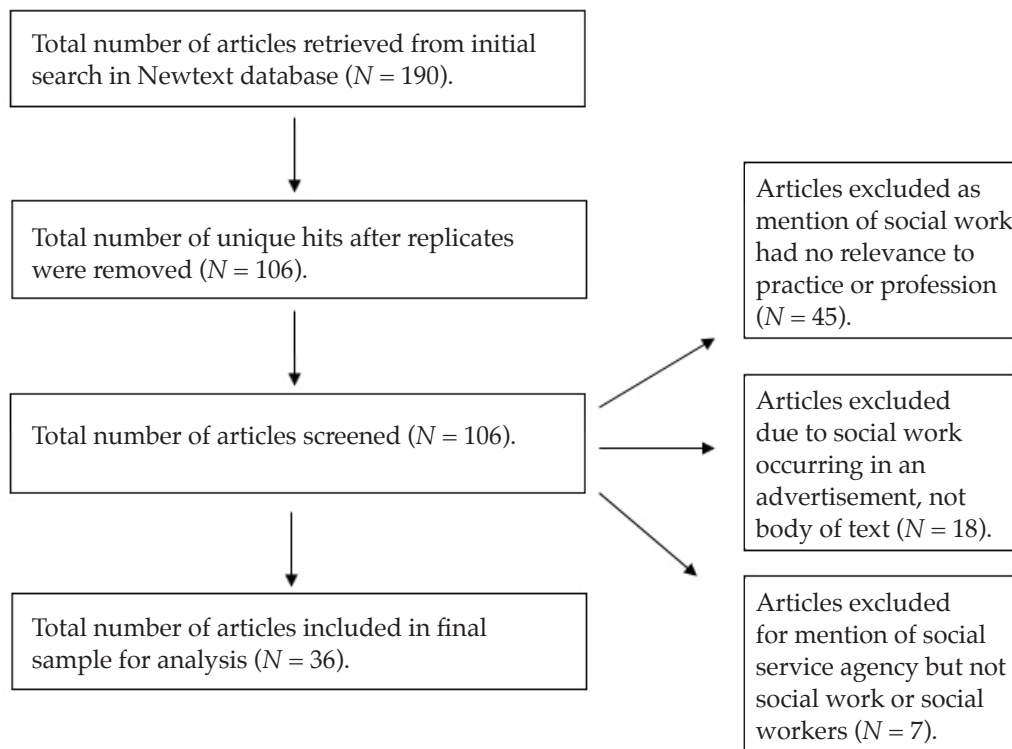


Figure 1 Flow Chart of Inclusion and Exclusion Criteria Process Applied to the Study

and are registered social workers. One is a current practising social worker in care and protection and the other is a social work educator. We recognise that our perspectives are shaped by our cultural heritage and personal/professional experiences with others and the world. This study captures a Pākehā perspective and does not necessarily reflect Indigenous knowledge or diverse cultural considerations. As authors, we do not believe that gender exists in a binary, rather we recognise gender is a spectrum. However, for the nature of this study, the categorisation of gendered language and terms, as discussed below, was informed by sociological literature developed through traditional/Western narratives and stereotypical constructions of gender, and as such, presents a dichotomy between masculinity and femininity. There was explicit attention to pronouns used in the newspaper articles throughout the analysis process; however, it was evident that nonbinary pronouns were not used in the media sample.

Gender stereotypes refer to the generalised view and characteristics of women and men. Within gendered stereotypes are qualities, traits and characteristics based on social expectations and definitions for men and women to be masculine and feminine respectively (Koenig, 2018; Mitchell et al., 2022). For women, stereotypically acceptable feminine traits including being caring, compassionate, nurturing, helpful, soft, emotional, and submissive; while for men acceptable behaviour includes stereotypically masculine traits of power, dominance, leadership, strength, independence, bravery, and assertiveness (Kachel et al., 2016; Mitchell et al., 2022; Prentice & Carranza, 2002). These beliefs and ideations stem from traditional Western and Eurocentric views of men and women, particularly from within the family unit where men have been expected to be the breadwinners and economic providers while women have been expected to be carers for the family and within the home (Dahle, 2012; Kachel et al., 2016; Ministry for Women, 2019; Pease, 2011).

To prepare for the content analysis, an initial scoping of such stereotypical gendered terms in the literature was conducted to formulate a guiding list. For example, masculine language included decisive, ambitious, and strong, while feminine language included caring, sympathetic, warm, and compassionate (Koenig, 2018; Prentice & Carranza, 2002; Talbot, 2003).

A quantitative content analysis was first conducted. Each article was numbered and analysed individually, counting the occurrence of terms and concepts used within the articles which described social workers and their practice (Rubin & Babbie, 2017). The frequency of terms was recorded, alongside which article the terms were used in to determine the predominant language used. A second-level analysis was conducted to evaluate the terms, in respect of synonyms, to group terms which held similar meanings.

Next a qualitative content analysis was conducted to analyse the underlying messages and perceptions conveyed in the articles (Hsieh & Shannon, 2005; Schreier, 2012). This included coding each individual article, identifying the explicit and latent messages when the media referred to social workers and their role or practice. Upon completion of coding, the first-level analysis was revisited to recheck for consistency in application. The codes were then analysed to evaluate the context of the extracts under

each code, checking for coherence in the meaning ascribed to each extract to then create initial groupings to identify similar themes. The final level of analysis included an assessment of prevalence and relevance to the research question to determine key themes and minor themes. The qualitative themes were then considered alongside the quantitative findings to understand dominant narratives, questioning the gendered representation of social workers.

### Quantitative findings

There were a total of 49 terms identified. Multiple terms shared the same meaning and were grouped together, reducing the overall total to 32 terms. This study reports on the five most predominant terms which occurred nine times or more across the sample, with the remaining terms having only been used four times or less.

As seen in Table 2, the most common language used were general verbs which included the terms, *advised*, *wrote*, *listened*, *monitoring*, and *asked*. The verbs described the practical aspects of social worker's practice when working at a micro level with service users. These words were not considered gendered descriptors, rather this finding indicates that there is some, although limited, knowledge of the tasks associated with social work. Core functions and descriptions such as promoting social change, empowerment, advocacy and

Table 2 Quantitative Analysis: Most Frequently Used Terms

Term	Frequency	Number of articles each term appeared in (N = 36)	Masculine or feminine language?
Verbs	13	11/36	
Help	10	6/36	F
Building relationships (with service users)	10	5/36	F
Leadership	10	7/36	M
Support	9	7/36	F

Note: Reported findings include only the top five most frequently used terms across the sample.

challenging structures were absent from the media despite being central to the mandate of the profession (International Federation of Social Workers, 2014).

The second most common term was *help*, which included suffix variations *helped* and *helping*. This was closely followed by the term *support*, including *supported* and *supporting*. Both *help* and *support* are stereotypically feminine traits which derive from an understanding and common perception of women doing acts of service for others; benevolence (Dahle, 2012). This is a widely accepted perception associated with the social work profession, aligning with previous research which investigated the New Zealand public's understanding of social workers (Staniforth et al., 2014).

Social workers *building relationships* with clients was also identified 10 times. Language including *spending time with*, *building relationships*, and *connecting with* was used to describe social workers building relationships with tamariki and whānau. A number of these terms were found in articles discussing a recent Oranga Tamariki report which highlighted the need for social workers to prioritise relational practice with whānau. The concept of spending time with others and building connections and relationships is typically associated as a feminine trait (Mitchell et al., 2022).

The final most frequent term used to describe social workers was language relating to *leadership*. This included *leading*, *founder*, *organised*, *pioneered*, and *decision-making*. These terms were used to describe social workers as leaders including their actions and holding positions in which they provided leadership to people, organisations, and the social work profession. This included examples of sitting on a board or chairing a committee. Leadership is a stereotypical masculine trait; however, across the sample, this term was used to describe women on six occasions and men four times.

The quantitative findings show a strong inclination of the news media using key words of a feminine nature to describe social work and social workers. The few masculine words are sparingly used in a positive light which are expanded upon below in the discussion. There appears to be a lack of accurate representation of the broad and diverse scope of work, responsibilities, skills, and competencies the social work profession and social workers encompass.

### Qualitative findings

Five key themes and one minor theme were established through qualitative content analysis, each of which was then assessed for gendered language or gendered implications in connection with the research. Due to its limited size and scope, this article reports on the three most prevalent qualitative themes: social workers being nurturing; altruism; and unfavourable working conditions. Each theme includes a general definition, how it was used in the newspaper articles, and a minimum of three extracts to illustrate the theme.

#### *Social workers being nurturing*

The most dominant theme was the portrayal of social workers as nurturing of service users and their communities. Within the articles, social workers were described as empathetic, nurturers, kind, and supportive. This theme includes mention of individual social workers as well as broad generalisations of social workers and the profession.

Article 16. "She proved to be a born social worker and had a heart for the poor."

Article 29. "So fear not, workers in jobs that require empathy, emotional intelligence and critical thought. Like creatives or people who work with others who have emotional needs, like therapists, social workers, and teachers."

Article 32. "Carla says social workers and counsellors are connecting with those in need."

### **Altruism**

The theme of altruism refers to the selflessness of social workers that has been portrayed in the newspaper articles. Social workers were often noted as generous, giving their time and resources to help others and those in need, often going above and beyond what is expected of them or within their job description.

Article 5. "As much of New Zealand enjoyed their summer holidays over the last month, there were many core public service workers doing the mahi and not spending much time with their whānau. They might have been... social workers helping families in crisis."

Article 6. "Te Tuinga Whānau Support Service Trust community social worker Scotty Harvey was supposed to take annual leave from December 19 until January 9 but made the last-minute call to work until the end of the year because of how busy it was at Whare Taratoa on Chadwick Rd."

Article 26. "[The social work lecturer] said she didn't know why anyone would spend four years training to be a social worker, teacher or nurse if they were doing it for the money."

### **Unfavourable working conditions**

Unfavourable working conditions refers to social workers being under-resourced and ill equipped to perform their work and roles. This was noted often in the newspaper articles as a result of strains on social workers due to high demands on services and a lack of staffing and funding. Additionally, one article highlighted the growing complexities of individuals and whānau that require intense engagement with social workers and social services paired with cuts to social work roles. These unfavourable working conditions reflect the historical and societal expectations that women do unpaid care work.

Article 6. "It was still too busy so we [the social workers] just didn't take the time off.

We just couldn't because people are still needing support through that period."

Article 13. "[H]igh workload from social workers resulted in limited trust between the child, caregivers and whānau."

Article 30. "A Wainuiomata principal is upset at the loss of her school's social worker at a time when students have higher and more complex needs."

### **Discussion**

Upon closer analysis of the quantitative findings, the prevalence of leadership was predominantly portrayed positively for male social workers. For example, article 4 praised a male social worker as a leader in their field, holding positions of power for decision-making. This was illustrated by praise of his ability to establish and grow multiple services and associations for practitioners in addiction services. The article further highlighted his achievements and contributions to the field and recognised his services for the New Zealand Order of Merit award. As previously explored in the literature, the term *leadership* is stereotypically associated with masculine traits (Koenig, 2018; Prentice & Carranza, 2002). Despite this association, there was reference of leadership for female social workers in six out of the 10 occurrences. When associated with the role of female social workers, however, women were only portrayed positively in association with leadership in three of six instances, while men were portrayed positively in all occurrences in the sample. The positive occurrences of females as leaders or in leadership roles are mitigated by the context. For example, one instance (article 16) occurred in an obituary, another (article 8) simply described a social worker leading a walk, and the third (article 36) described a married couple as founders of a service, though the woman was not mentioned as a leader on her own despite holding the necessary and relevant qualifications.

Additionally, two articles openly critiqued the leadership capacity of social workers in association with the Malachai case. In 2021, a young child, Malachai Subecz, was abused and murdered by his caregiver. The resulting Oranga Tamariki Practice Review found the government department did not meet their obligations to Malachi or his whānau, and did not undertake a comprehensive assessment when concerns of care and protection were reported to them (Oranga Tamariki, 2022). The newspaper articles quoted Malachi's family who noted the female social worker did not have the capabilities to lead on the case and should have been overseen by supervisors and managers. In these instances, the female social workers were in a position of power to influence decision-making and were critiqued for doing an inadequate job leading the case. These findings are not unfamiliar and align with previous studies in Aotearoa. Staniforth et al. (2022) and Staniforth et al. (2014) found that individual social workers are blamed within the media as scapegoats in highly sensitive and contentious cases relating to child care and protection. With continuous exposure of negative instances involving individual social workers, cultivation and agenda theory can reiterate in society that female social workers lack capacity to lead or be in position of power and responsibility, whereas male social workers are portrayed positively as leaders in the media. Applying an agenda-setting theoretical perspective would suggest that the positive representation of male social workers as leaders can filter into unconscious bias of recruiting, hiring, and promoting of male social worker to management positions. This perspective can help towards an understanding of the trend in employment statistics and existing literature describing vertical segregation within social work internationally and within Aotearoa New Zealand (Jones et al., 2018; McPhail, 2004; Ministry for Women, 2019, 2022).

The qualitative theme of social workers being nurturing is reinforced by the quantitative

findings which illustrate the dominance of the terms *help* and *support*. This is a familiar narrative reoccurring throughout the history and development of social work grounded in care and the charitable acts of women. The findings suggest the media are perpetuating feminine stereotypes of social workers as carers who embody characteristics of tenderness, nurturing and empathy (Beddoe, 2013; Dahle, 2012; Harlow, 2004). Being kind and empathetic is an important value for social work as identified in competency eight of the *Aotearoa New Zealand Core Competencies*, and the *Code of Ethics* through the values of Aroha and Manaakitanga (Social Workers Registration Board, n.d; ANZASW, 2019). Therefore, the finding is not necessarily unexpected, and is further reinforced by the second qualitative theme, *altruism*.

Altruism can be understood as selflessness, going above and beyond to support the wellbeing of others. It has long been expected of women to perform unpaid care labour which is also reinforced through cultivation theory of the historic and ongoing narratives of women as caregivers. Social work is rooted in charitable acts and service, characterised by women giving their time and efforts for free to support the needs of others (Chenoweth & McAuliffe, 2015). The expectation and stereotype that women are selfless and willing to give their energy contributes to an intrinsic and fundamental undervaluing of social work (Baines et al., 2014; Dahle, 2012), which is further evidenced in the qualitative theme of unfavourable working conditions for social workers. Within this theme, social workers were described as underappreciated and underfunded while facing high demand for services. The devaluing of social work is evident in vertical and horizontal segregation associated with gender, resulting in subpar working conditions including pay, support and funding. Evaluating the findings through cultivation theory, it can be argued that the media contributes to maintaining and reproducing the gendered societal



perceptions and representations of social work, with dominant narratives of help, support, care and altruism reinforcing bias of women's work and occupational segregation.

This is recognised in the current policy context of Aotearoa as identified in the recent pay equity scheme which has highlighted the consistent undervaluing of social work as a feminised profession (ANZASW, 2022). The pay equity scheme is currently being rolled out to increase the pay of Oranga Tamariki social workers and subsequently community and iwi-based social workers employed in agencies who hold government service contracts (ANZASW, 2022; SSPA, 2022). The pay equity scheme can be understood as a challenge against current societal perceptions of social workers and care work by recognising the historically poor working conditions and undervaluing of social work compared to male-dominated professions with similar levels of role complexity, responsibility and training requirements. This policy development could highlight the value of social work to the public by recognising the need to address existing gendered inequalities, although further change is required within policy to address gendered and societal stereotypes that are linked to the history of social work which continue to be conveyed through the terms and themes in the newspapers in this study.

To address the current dominant narratives and mitigate potential negative consequences, it is recommended that social workers and the social work profession in Aotearoa are more active in challenging current portrayals by engaging with journalists and media outlets to highlight the other important aspects of social work such as advocacy, community development and programme implementation, whilst seeking to accurately illustrate leadership roles across all genders in the field. Such involvement would help disrupt the current devaluing of care work and establish a better representation of social work in the public sphere.

### Limitations and recommendations for further research

There are several limitations to this study. The first is the inability to capture the representation of intersectional identities in the media. Articles included minimal details about individuals or groups; therefore, other factors that contribute to identity and lived experiences such as ethnicity or age, could not be accounted for. In Aotearoa New Zealand this is of significance, with previous research noting the portrayal of Māori in English language media has largely been negative, prioritising violence or crime and trivialising Māori culture, whilst routinely masking or normalising Pākehā culture (see Nairn et al., 2011, 2012). Future studies that can analyse the portrayal of social workers through an intersectional lens would add to the understanding of media representation in the profession. Additionally, a European-dominant perspective of gendered narratives has framed the research, and Indigenous understandings and concepts of gender should be integrated in future research in the context of colonisation or multicultural nations.

A second limitation is the challenge of utilising a gendered binary. Such an approach can erase or simplify social work practitioners who identify between, or outside of, the gender binary. With the absence of gender-diverse pronouns or positionality statements in the articles, the authors were unable to identify any reference to members of the profession who identify as gender diverse in the media, and therefore could not account for this in the analysis. Further research should be done to better understand the (mis)representation of non-binary or gender-diverse social workers in the media. Furthermore, this study was the conceptualisation of gender based on masculinity and femininity as a binary for men and women respectively. As a result, long-held stereotypical concepts of gender performativity were used in this study to determine the portrayal of social

workers in newspaper articles in Aotearoa New Zealand. This is linked to the historical nature and construction of language stemming from traditional and Western beliefs of women and men (Talbot, 2003). In Aotearoa New Zealand, the mainstream use and normalisation of non-binary terms and language has occurred only in recent years. Future research may be able to better capture these changes in society and dominant language associated with social workers and the profession when understanding public perception and portrayals in the media with particular regard to gender.

Lastly, there continues to be a gap in understanding the representation and portrayal of male social workers in the media. Recognising that male social workers are not adequately captured in the sample of articles examined in this study, further research that focuses specifically on the narratives of male social workers is warranted. The limited visibility of male and gender-diverse social workers in the current sample is reflective of the feminisation of social work and is a finding in itself. This may, in part, be influenced by the short period of analysis which spans only 3 months.

Despite these limitations, the current study provides an analysis of recent media coverage at a time which does not include any periods of crisis or high-profile cases. The analysis, therefore, can be considered a baseline or regular representation in the media, unlike previous, crisis-focused media attention that has contributed to an overarching theme of failure and sensationalism in the portrayal of the profession (see Staniforth & Beddoe, 2017; Staniforth et al., 2022; Warner, 2014).

## Conclusion

This study aimed to investigate what the gendered narratives of social workers are in Aotearoa New Zealand newspaper articles over a short period of time in 2023. As

argued in the literature review, social work has been based on charity and women's unpaid care work which has continued to develop internationally, with ongoing gender-based disparities in the workforce, as seen in Aotearoa New Zealand through vertical and horizontal segregation. Examining narratives in the media is important to understand the current context as the media can influence public opinion which, at times, has been a contentious issue between the press, the public, and the profession (Warner, 2014).

The results have reinforced that social work is still associated with feminine care work. Further findings indicate that social workers are portrayed through gendered stereotypes, men being portrayed more positively as leaders and women and social work more generally represented as carers and nurturers. With the persistent gendered narratives evident in the study, there is potential to inform public perception of social workers with subsequent consequences for individuals and organisations within the profession, influencing the treatment and value of social work within society and across other professions and disciplines. To mitigate these consequences, this study recommends that social work as a profession in Aotearoa should actively challenge current portrayals of social workers by collaborating within the profession to work with media outlets to highlight the value of care work and illustrate the other important aspects of social work role. The study, however, includes limitations of intersectionality, use of a gender binary, and limited representation of gender-diverse and male social workers, resulting in recommendations for future research.

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# Catalysts for collaboration: Antecedents and potential benefits of non-profits working together

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## ABSTRACT

**INTRODUCTION:** The non-profit sector in Aotearoa New Zealand (Aotearoa), primarily comprising smaller organisations (with 1–20 employees), faces unique challenges exacerbated by colonial and neoliberal funding models. The scope of this article does not allow for a critique of the neoliberal context but instead focuses on networking pragmatically within a neoliberal, competitive funding system. Scholarly literature often emphasises larger non-profits in contexts like the USA, limiting its applicability to Aotearoa's smaller entities. While a large proportion of the scholarly literature presents advice to advance the work of non-profit organisations generally, evidence on smaller non-profits is scarce, especially concerning what it means to broach collaboration effectively in such contexts. In this article, inter-organisational collaboration is proposed as a potential solution for smaller non-profits.

**METHODS:** Driven out of a small, exploratory graduate study, this article presents a strong platform for future research. The findings are based on a literature review supported by semi-structured interviews with six sector leaders in Aotearoa to explore their perspectives on the benefits of inter-organisational collaboration amongst small non-profits.

**FINDINGS:** Findings suggest that collaboration among small non-profits can advance peer support resource sharing, enable mutual accountability, and even encourage critical examination of colonial legacies to make progress on their journey as Te Tiriti o Waitangi partners. However, the authors argue that a collaborative and efficient non-profit sector will not emerge under current funding models in Aotearoa.

**CONCLUSIONS:** Sector leaders and funders are urged to recognise the significance of relationships and use these findings to prioritise collaborative practices in their work.

**Keywords:** Non-profit, philanthropy, community organisations, collaboration, leadership, challenges

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This article outlines the potential for improved performance of the non-profit sector in Aotearoa New Zealand through increased levels of collaboration between small non-profit organisations. Small non-profits are of particular interest in Aotearoa,

given they outnumber their larger non-profit counterparts by 10:1, a significantly greater proportion than in other countries (McLeod, 2017). Scholarly literature published over the last thirty years has attempted to describe the benefits derived from collaboration



between non-profits (Arya & Lin, 2007; Bunker, 2013; Gazley & Brudney, 2007; Gray & Wood, 1991). However, the dominance of organisational theories in the literature (Gazley & Guo, 2020) may have overlooked the fundamental importance of interpersonal relationships and peer support as vehicles for achieving these benefits.

A case for the benefits of non-profits working together is built by first providing a contextual overview of the scholarly literature on the definition of, antecedents to, and the potential benefits of, collaboration for non-profit organisations. Next, the qualitative findings from interviews with six key informants working in Aotearoa New Zealand's small non-profit sector further contribute foundational insights into benefits from inter-organisational collaborations. These findings highlight peer support, shared resources, and shared knowledge as the vehicles by which organisations become more effective, more focused on their purpose, and create additional opportunities to improve impact. Leaders of small non-profit organisations and those who fund them can use these findings to begin considering what meaningful pathways to collaboration might look like for their organisation with other small non-profits in the sector in the context of a neoliberal, competitive funding system.

### Non-profit collaboration in Aotearoa New Zealand

A central concern is how collaboration is most usefully conceptualised. Gray's (1989) definition of collaboration includes a "process through which parties who see different aspects of a problem can constructively explore their differences and search for solutions that go beyond their own limited visions of what is possible" (p. 5). This definition implies an equitable, forward-moving process that members engage in. Other authors have adopted and adapted Gray's (1989) definition in the three decades since (Gazley, 2010; Guo &

Acar, 2005; Kim & Peng, 2018; Thomson & Perry, 2006). However, Gazley and Guo's (2020) simplified definition of "a joint effort between organisations that share some mutual goal" (p. 5) is helpful for considering collaborations between non-profits. As conceptualised in this article, collaboration refers to a relationship freely entered into between non-profits within Aotearoa.

The non-profit sector in Aotearoa New Zealand has some unique characteristics that require consideration. Most studies on collaborative benefits have focused on larger non-profit organisations in countries such as the United States of America (USA), limiting their applicability to the greater proportion of smaller non-profits globally, including in Aotearoa. In this article, the term *small non-profit* refers to organisations with between 1 and 20 staff, a categorisation aligned with other studies on the sector that band organisations by the number of paid staff (Harrison, 2010; McLeod, 2017; Stats NZ–Tāhūranga Aotearoa, 2020). The high proportion of small non-profits compared to other countries such as Australia and the United Kingdom (McLeod, 2017) contributes to a fragmented and uncoordinated sector. The lack of a coordinated approach to service delivery limits the effectiveness of non-profit organisations in achieving their purpose (Eschenfelder, 2011).

Further, these small volunteer-led non-profits are challenged to compete with larger non-profits that operate more corporately (Aimers & Walker, 2016). Collaboration offers a potential antidote to fragmented service delivery and competition with larger non-profits. However, research on collaboration and guidance provided to small non-profits must be tailored to their size and locale.

Organisations in Aotearoa's non-profit sector rely on philanthropic and government sectors to remain operational. Elliott and Haigh (2013) reminded us that New Zealand government's preference for contracting with non-profits was part of the neoliberal agenda

and that, by the late 1980s, non-profits were active in taking on service contracts from government. This has become an essential part of the delivery of state social services and has the well-known effect of fuelling competition between non-profits (Moore & Moore, 2015). The benefits of collaboration explored in this article can provide insights into the impact of decades of funding models that deprioritise—or even dissuade—collaborative approaches. While competition is embedded in current funding structures, collaboration is sometimes framed as a tool for efficiency rather than as a challenge to market-driven models. This paradox shapes how collaboration is perceived and resourced in Aotearoa's non-profit sector.

### Antecedents required for collaboration

Antecedent conditions must be present within and between non-profits to collaborate successfully. Small non-profit organisations, with fewer resources at their disposal, might have lower collaborative capacity than their larger counterparts. This is supported by research that found larger organisations are more likely to collaborate than smaller ones (Bunger, 2013; Guo & Acar, 2005).

Non-profit leaders are critical to an organisation's collaborative capacity and must have the skills and knowledge to collaborate effectively. Goldman and Kahnweiler (2000) found that a leader possessing "flexibility, patience, understanding of others' viewpoints, sensitivity to diversity and a cooperative spirit" (p. 446) is essential. Later studies by Kim and Peng (2018), Thomson and Perry (2006), and Weiss et al. (2002) described the required skills of organisational leaders as *boundary-spanning*—behaviours that proactively bridge the boundaries between organisations. Mayan et al. (2020) noted the development of interpersonal relationships as a critical antecedent to collaboration. Staff who interact with one another through

regular work inter-organisationally are likely to develop these relationships (Bunger, 2013). Organisations with overlapping characteristics—such as geography and problem domain—are most likely to interact regularly and develop these inter-organisational relationships (Kim & Peng, 2018; Thomson & Perry, 2006).

Committing organisational resources to collaborative outcomes often relies on trust in participants to overcome competition and the uncertainty of realising benefits (Bunger, 2013; Vangen & Huxham, 2003). Leaders develop a perception of trustworthiness in one another based on their interactions and the history of the problem domain in which they operate (Kegler et al., 2010). Trust is an important antecedent of collaboration that facilitates shared decision-making (Larue, 1995; Tsasis, 2009) and the sharing of information and resources in collaboration (Gray, 1989; Proulx et al., 2014; Thomson & Perry, 2006).

### Building a compelling case on the benefits of collaboration

The non-profit, philanthropic and government sectors must have strong evidence of the benefits of collaboration to justify funding it. Literature to date has identified potential benefits from non-profits collaboration, but the strength of evidence is not yet sufficient. Benefits must be examined in the context of small non-profit organisations operating within Aotearoa to build a compelling case for the benefits of collaboration.

Arya and Lin (2007) and Cross et al. (2002) identified that non-profits might benefit from increased technical capacity, innovation capacity, and the flexibility to respond to changes. Improved quality of services, increased access to resources and knowledge, and greater access to information and opportunities for collaboration are other benefits that contribute to improved resilience of

organisations (AbouAssi et al., 2021; Tsasis, 2009). Improving reputation and growing opportunities for influence are also commonly found as collaboration benefits (Kim & Peng, 2018; Wood & Gray, 1991). Tsasis (2009) identified further benefits, including opportunities to secure additional funding, increased access to information, increased clout for advocacy, and opportunities for further collaboration. Some benefits might be transient and only available to organisations while they remain members of the collaboration. For example, Eschenfelder's (2011) case study of nine family centres beginning a collaboration in Florida, USA demonstrated that access to increased funding would not be available to organisations should they leave the collaboration.

Despite these 30 years of research illuminating the benefits of collaboration, the case for collaboration remains inadequate for the non-profit, philanthropic and government sectors alike to prioritise collaboration. Gazley and Guo (2020) went so far as to say, "We are unable to demonstrate clear and compelling evidence of the benefits . . . of working together" (p. 212) in their systemic review of the literature. Evaluating the benefits of collaboration is not easy, with Gilchrist (2019) noting the clumsiness of evaluating the relationships that are fundamental to many of the benefits of collaboration. The concept of peer support offers one avenue to understand the relational benefits of collaboration, with Eschenfelder (2011) finding that individuals within organisations enthusiastically offer support and training to one another when collaborating. This article draws upon Austin and Seitanidi's (2012) definition of collaborative value as "the transitory and enduring benefits . . . generated due to the interaction of the collaborators" (p. 728), identifying that both the transitory and enduring benefits resulting from interpersonal relationships must be considered when building a case for the benefits of collaboration.

## Methods

This small, exploratory, qualitative study was conducted as part of a master's qualification and received ethical approval from the University of Auckland's Human Participant Ethics Committee. The study's overarching aim was to collect insights from leaders working in Aotearoa's non-profit sector to explore perspectives on the benefits of inter-organisational collaboration in the non-profit sector.

Participants were recruited through social media platforms, and an electronic invitation was shared to reach individuals working in non-profit sector organisations in Aotearoa. Recruitment was aimed at attracting sector leaders—those involved in the management or governance of an organisation, and staff members not involved in management but with long-term experience working in the non-profit sector. A total of six sector leaders from five organisations participated in the study. Four held organisational leadership roles. One was a researcher in a small non-profit and had a non-management role. One participant was an organisational leader, and the researcher was from a Kaupapa Māori organisation (i.e., an organisation leading with an Indigenous Māori worldview). All participants were assigned a pseudonym where quotes have been attributed. These six sector leaders represent a fraction of the 11,000 small non-profit organisations in Aotearoa New Zealand. Participation was voluntary and may not represent the views of all those working in small non-profit organisations. For example, only one organisation represented by participants was Kaupapa Māori. Greater representation of sector leaders working in Kaupapa Māori organisations would have enabled a deeper understanding of the cultural fit and implications of collaboration for Māori. Given that Covid-19 restraints have been lifted since the time these data were collected, it would be prudent for future researchers to attempt to expand

the number of participants and sample to provide a wider representation of the non-profit sector.

Given the constraints of a 1-year thesis and the context of stringent Covid-19 restrictions at the time of data collection, we secured interviews with six critical informants in Aotearoa New Zealand with experience in a non-profit collaboration. Interviews are a well-established data-collection method for researching collaboration between non-profits and were previously used in qualitative studies by Kegler et al. (2010) and Eschenfelder (2011). This qualitative method was chosen because quantitative methodologies were “less successful at measuring and analysing collaborative processes” (Gazley & Guo, 2020, p. 224). The findings comprise voices from those involved in the non-profit sector—key to advancing knowledge for non-profit leaders and something for which an exploratory qualitative approach is well suited (Merriam & Tisdell, 2016). Given the government-mandated restrictions at the time, semi-structured interviews were conducted via video conference. The interview schedule sought to understand the participants’ organisation and current collaborations, how the collaboration began, the outcomes of collaboration, and what collaboration they would consider in the future.

As the researcher, the first author’s position as an insider to the non-profit sector was essential to the research, allowing rapport with participants and exploring the nuances of organisations, relationships, and collaboration. The first author’s subjectivity was also central to the thematic analysis approach used to analyse the interview transcripts, as prescribed by Braun and Clarke (2006). Findings were developed thematically from the transcripts. A selection of findings is presented thematically with direct quotes from participants.

## Findings: Benefits of working together

All participants discussed the benefits derived from their organisation’s involvement in collaborations. This article focuses on one central theme, “Benefits of working together,” and its six associated sub-themes:

1. Staff are more effective because of peer relationships.
2. Shared resources increase the effectiveness of organisations.
3. Sharing of knowledge through collaboration increases impact.
4. Collaboration creates opportunities for further collaboration.
5. Collaboration allows organisations to reduce administrative burdens and increase their focus on purpose.
6. Collaboration facilitates knowledge and application of Te Tiriti o Waitangi.

Some quotes have been edited with the permission of participants for brevity, clarity, and to maintain anonymity.

### *Staff are more effective because of peer relationships*

Oriwa detailed the importance of peer relationships in collaboration:

A huge part of my [role is] relationships with people; we’ve got [15]

[members] here . . . I need to be on good terms and working well with a huge amount of people. (Oriwa)

Being on good terms and working well with others was an important part of collaboration. All participants discussed how staff benefited from the peer support available in collaboration. Oriwa linked this support to increased effectiveness, stating:

What is brilliant for the professionals working here is relationships [with] all these other [members]. . . we’ve got

a big open plan office, and people are communicating with each other getting advice . . . for management, it's actually really good to have that sort of peer support here. And to have some of those conversations be like, look, this is what I'm thinking about doing, are you doing this . . . in an office on your own, you can be pretty isolated. (Oriwa)

Advice, feedback, and peer support enabled staff to respond more effectively to the needs of walk-in clients. In this context, the collaboration increased the number of professionals working in the shared workspace and improved access to knowledge and skill development.

Additional and better peer support through collaboration was also viewed as benefiting organisation leaders (who may not have these opportunities otherwise) who could use these peers to discuss and share ideas. Unfortunately, leaders are more isolated in small non-profits and may have few options for collegial support outside collaboration. Participants gave examples of leaders working together to better support their staff. Atawhai, as the only staff member participant, gave this example of meeting with other organisation leaders to resolve an operational leadership challenge they were facing:

Last year, I was overwhelmed. And we [met] and worked out the change of hours stuff. And that wasn't initiated by me that was initiated by them . . . they just wanted to support me better. (Atawhai)

Atawhai also discussed how they felt supported by multiple leaders in the collaboration when feeling overwhelmed.

Irirangi built on this sentiment by explaining why staff are more effective when working with people in multiple organisations:

She can see that she's making a difference in two different spaces. So that's when she gets the reward from it. (Irirangi)

Irirangi connected working in multiple spaces to the increased satisfaction staff feel within their role.

### ***Shared resources increase the effectiveness of organisations***

Most participants discussed shared resources that made administration and programme delivery more effective. One participant provided a strong example by summarising the increased effectiveness of their service through sharing donated items:

We get quite a lot of shared resources here from people who donate goods, donate kai [food] . . . we share a lot of those donations with each other so that we've got a big, shared food cupboard that if anyone's got any client who needs anything to help themselves. (Oriwa)

Kai and goods are donated to Oriwa's collaboration, creating a shared pool that any organisation can access to meet client needs. Irirangi provided another example of pooling resources by combining two part-time roles across organisations into a single, full-time role that attracted more highly skilled staff. The ability to draw on collaboration members' resources also allows organisations to respond to the unexpected; this is best described by Irirangi:

There was a point where [other organisations'] printers were down. And I'm like, well, just use ours. (Irirangi)

Unexpected situations, such as printers being down, are navigated through collaboration, and how issues are navigated reflects the resilience capacity of an organisation, which contributes to the effectiveness of organisations.

### ***Sharing of knowledge through collaboration increases impact***

Four out of six participants discussed how knowledge was shared between organisations and the impact that resulted.



Atawhai discussed how knowledge of grants was shared between organisations:

Knowledge of grants bounces off each organisation. For instance, [name redacted] Trust . . . came through . . . as a suggestion that [organisation A] . . . and I thought, hey, this would be a great fit for [organisation B] . . . So, I applied [for organisation B] and [was successful]. I was like, hey, the system's working. (Atawhai)

Atawhai's example demonstrates how knowledge of grants gained in one organisation benefitted another in the collaboration. Non-profit organisations require funding to achieve their purpose, so additional funding secured increases their impact. Organisation B may not have been aware of this additional funding opportunity had they not collaborated with Organisation A.

Hirini gave an example of how knowledge sharing increased impact in another way:

Supporting those groups within your own [territorial authorities] out across the regions, because all of the [territorial authorities] have a different prioritisation for climate action and environmental work. (Hirini)

Hirini's collaboration shares knowledge on how to approach local territorial authorities for climate action and environmental work. Sharing the information about the prioritisation of issues increases each organisation's impact when working with authorities. Hirini went on to discuss other knowledge sharing, such as the creation of collective submissions on issues of importance. Other participants suggested that sharing knowledge increased impact as staff have access to greater knowledge and experience than organisations could access for them individually. Oriwa articulated a strong example:

We have a work group called the practitioners group . . . [that] plan

trainings throughout the year, that [members] raise what they're interested in... They also look at what agencies we have and go, you know, Community Law comes in does clinics here, let's get Community Law in, because I'd really like to know more about protection orders. (Oriwa)

Oriwa details a proactive approach to developing peer support through a practitioners' group, facilitating knowledge sharing in their collaboration where members identify their needs and training is available to all members' staff. Members may provide training on their specialist areas of knowledge.

### ***Collaboration creates opportunities for further collaboration***

All participants gave examples of additional opportunities to collaborate that arose through collaboration. Hirini highlighted the need to identify influencers in organisations:

I think every community group . . . has key influencers. They're not necessarily the people in leadership positions. They can be a really enthusiastic volunteer, or, you know, it might be the youngest person, the oldest person, or the most beige looking person, but they're the driving force that keeps it moving along, and it's been a process of identifying who those people are. (Hirini)

Relationships developed with these key influencers created opportunities for collaboration, with participants describing those relationships as not limited to those with formal organisational leadership roles. Another participant discussed how collaboration allowed members to come together on more extensive initiatives:

[The collaboration] brought us together a lot closer. And that gave us other opportunities to move forward with other things. I think like the [name redacted] initiative that we brought forward was

because of [our existing collaboration].  
(Irirangi)

Irirangi talked about a larger collaborative initiative that is progressing more quickly because of the collaboration. Oriwa gave this example:

[Collaboration member's] office manager [is] about to retire. And so, they might look to engage [another collaboration member] to do [their office management] instead of employing someone else to do it. (Oriwa)

Oriwa detailed how their collaboration created the opportunity for additional collaboration on the retirement of an office manager. The opportunity would not have arisen without the existing collaboration in place. Oriwa gave a further example of data-sharing between organisations, a collaboration that took 4 years to establish and was only viable because of the existing collaboration. Collaboration creates opportunities for new, larger, and more complex collaborations.

### ***Collaboration reduces administrative burdens and increases focus on purpose***

Small non-profits have limited motivation and skills to complete mandatory administrative tasks. Hirini explained:

It's a passion for having the hands in the dirt for planting trees, for weeding, for trapping pests, for protecting species . . . That's the thing that brings joy to life. The thing that doesn't bring joy to life is GST [Goods and Services Tax filing]. (Hirini)

Non-profit organisations are motivated by purpose. Administrative requirements such as accounting for GST offer little motivation to small non-profits. Hirini said that established, small non-profits may be reluctant to learn new tools such as Xero, an accounting software package to support

administrative tasks. Irirangi offered an alternative solution:

One of the possibilities is that they can [collaborate] with us . . . so they don't have to go through all that pain. (Irirangi)

Irirangi suggested that small non-profits view administrative requirements as painful, and that collaboration supports organisations to meet them. Hirini gave an example of how it works:

They're all volunteers and they didn't have the structure set up for employment . . . So, we've employed the four staff . . . to meet the requirements of their [funding]. We administer that, we're the employer, we provide that administration and reporting. And they work with the staff to meet their goals and vision. (Hirini)

Hirini's organisation employs staff on behalf of a small, volunteer-led member organisation. The organisation is not required to establish structures for employing staff and administering and reporting on funding. The volunteers remain focused on the organisation's goals and vision—purpose—while gaining the benefits of paid staff.

### ***Collaboration facilitates knowledge and application of Te Tiriti o Waitangi***

All participants discussed the role of Te Tiriti o Waitangi in their work, which affirms tino rangatiratanga (i.e., self-determination) for Māori. Application of Te Tiriti o Waitangi challenges non-profits to uphold genuine partnership, share decision-making power, and support Māori-led solutions. One participant highlighted the desire for knowledge from members:

Many of them really want to understand Māoridom, tikanga, Te Tiriti [o Waitangi] . . . they really need to understand Tangata Whenua . . . and the different cultural aspects . . . Sometimes it's just in the pub having a beer. Yeah, seriously.

But that's how they get to how we think, how we feel. (Kamaka)

Kamaka, who is Tangata Whenua (i.e., a Māori person, one of the original inhabitants of Aotearoa), discussed how many members want to learn about Māoridom (i.e., the world of Māori), tikanga (i.e., customary Māori practices), and Te Tiriti o Waitangi and indicated that an understanding of how Tangata Whenua think and feel, is required. Knowledge may be best developed through having a beer at the pub, and collaboration creates opportunities for this kind of informal peer support.

Oriwa outlined a formal approach to developing knowledge:

We have a . . . cultural advisor who works over the whole [collaboration]. [They have] cultural supervision with me . . . I see him each month, and we'll talk through things. He also runs quarterly cultural development training for any [collaboration member] who wants to come. And he will feedback things to me . . . any gripes or any things he thinks that aren't quite right or any improvements we can do. And he pops in once a month, and he's just available for people to have a kōrero [talk] with around anything. (Oriwa)

Cultural knowledge and practice are developed through a multifaceted approach in Oriwa's collaboration. Training and informal kōrero are available to all collaboration members with a cultural advisor. Oriwa received cultural supervision and feedback on improvements that the collaboration and its members could make in their practice. Small non-profits without skilled Tangata Whenua staff are unlikely to access this level of cultural support outside of organisational collaborations.

Hirini explained one reason their organisation collaborates:

One of our strategic objectives is to deliver education . . . the deeper skills

required to affect change such as, you know, we're working with [small] groups that are predominantly tauwi [non-Māori] . . . on understanding Te Tiriti o Waitangi . . . in how that applies to their work. (Hirini)

Collaborating with small organisations on how to apply Te Tiriti o Waitangi in their work is a purpose of Hirini's organisation. They proactively develop the deeper skills required to affect change in predominantly tauwi organisations, facilitating knowledge and understanding of Te Tiriti o Waitangi.

## Discussion

These findings contribute insights into benefits from inter-organisational collaborations and highlight peer support, shared resources, and shared knowledge as vehicles for organisations to become more effective, more resilient, and more focused on their purpose and create additional opportunities to improve impacts. Participants also described the collaboration as having the potential to unlock new opportunities, such as the meaningful integration of Te Tiriti o Waitangi into the non-profit sector's work. The non-profit sector should promote the use and the potential realisation of benefits to prioritise cultivating antecedent conditions for collaboration in their work to increase impact so that philanthropic and government agents can recognise their influence and value the opportunities to be unlocked by fostering a collaborative non-profit sector.

Findings on the importance of interpersonal relationships as both antecedents to collaboration and the vehicle by which benefits were derived were pronounced in interviews with our participants. Organisational theories dominate scholarly literature (Gazley & Guo, 2020) and have contributed to minimising the importance of interpersonal relationships to collaboration and their benefits. However, Bunker (2013) posited that organisations where staff interact regularly and develop interpersonal

relationships are more likely to collaborate, while Mayan et al. (2020) described relationships as antecedents to collaboration. The predominant consideration of interpersonal relationships as antecedents to, rather than the vehicle from, which benefits are derived, limits the understanding of the benefits of collaboration.

Our small study makes a link between the interpersonal relationships of collaboration and the resulting benefits. Gilchrist (2019) noted the challenge of measuring interpersonal relationships, stating that it “rarely has tangible or attributable ‘outputs’ and, consequently, funders and managers often do not appreciate its value” (p. 185). However, findings in our study indicated that quality of services, access to resources and information, and opportunities for further collaboration arise from the interpersonal relationships that underpin collaboration. Unfortunately, collaboration is often positioned as a way for non-profits to meet funder expectations as it plays a role in trust-building and public accountability rather than necessarily driving systemic change (Greatbanks et al., 2010; Yang & Northcott, 2019). However, collaboration can also serve as a means of collective advocacy and resistance, offering a platform for non-profits to challenge the very systems that shape their funding constraints. This dual role raises critical questions: Does collaboration primarily reinforce funders’ priorities, or can it create space for non-profits to push for structural change?

Staff and relationships between staff were described as the most significant resource for many small, non-profit organisations in our study—reinforcing the idea that collaboration is as much about interpersonal connections as it is about organisational strategy. This finding aligns with Austin and Seitanidi’s (2012) argument that transitory benefits, such as peer support, play a key role in collaboration outcomes. Further research focused on the benefits of peer support may contribute to developing a stronger argument for collaborative efforts.

The findings in this study align with the scholarly literature on the increased resilience of those organisations participating in organisational collaborations. Support was found for previous work in the field on the improved quality of services, increased access to resources and knowledge, and greater access to information and opportunities for collaboration (AbouAssi et al., 2021; Arya & Lin, 2007; Cross et al., 2002; Tsasis, 2009). Increased resilience and quality of services are strong organisational benefits from collaboration that must be made more explicit to the non-profit sector.

Reducing the administrative burden of small non-profits is another finding relevant to organisations that has not been well explored in the scholarly literature. Bunger (2013) is the only author to explore the topic of administrative collaboration in depth—however, their focus is on large non-profit healthcare providers outside of Aotearoa New Zealand. Small, volunteer-led organisations are present worldwide, but the findings presented in this study are particularly relevant in Aotearoa, where they outnumber larger organisations by 10–1 (McLeod, 2017). Small organisations are also more likely to need support to collaborate than larger organisations (Kim & Peng, 2018). Findings in this study on the benefits of collaboration for small organisations support the need for non-profit leaders to prioritise organisational resources and seek funding support to collaborate. This recognition of the potential benefits of collaboration has significant potential to lift the efficacy of the non-profit sector.

The role of collaboration in facilitating knowledge and application of Te Tiriti o Waitangi in non-profits locates this study uniquely in Aotearoa New Zealand. Participants described collaboration as a mechanism for tauwiwi organisations to hold each other accountable for applying Te Tiriti o Waitangi in their work, many of whom may not pursue this knowledge otherwise. This suggests that collaboration

is an effective way to reduce the non-profit sector's role in the systematic oppression of Māori (Newcombe & Amundsen, 2022). Since this study was conducted, political developments have reinforced the concerns participants raised about systemic barriers to collaboration with Māori. Some spoke about the role of collaboration in holding non-profits accountable to Te Tiriti o Waitangi and ensuring Māori-led approaches were valued. Yet, these efforts exist in a shifting political landscape. The introduction of the Treaty Principles Bill (New Zealand Ministry of Justice, 2024), which sought to redefine the principles of Te Tiriti, threatened to directly undermine Māori self-determination. The Local Government (Electoral Legislation and Māori Wards and Māori Constituencies) Amendment Act 2024 (New Zealand Government, 2024) reinstates referenda requirements for Māori wards, reversing previous steps toward greater Māori representation in local government. These shifts add weight to participants' concerns that non-profit collaboration is shaped by forces beyond the sector itself, limiting the extent to which it can be a tool for structural change. Previous studies have researched the role of collaboration in strengthening the agency of Indigenous organisations (Abel & Gillespie, 2015; Bradshaw, 2000). However, they have not investigated the decolonisation effects on mainstream organisations. These continuing barriers mentioned in our study reflect longstanding structural inequalities that make meaningful collaborations in a bi-cultural context challenging. Our findings suggests that future research in this area would be relevant for non-profits working in other colonial contexts, including areas of North and South America, Australia, Africa, Asia, and parts of Europe, which seek to honour treaties with Indigenous populations.

Unlocking the significant potential of collaboration requires the support of the philanthropic and government sectors. Mayan et al. (2020) noted that unfortunately funders generally do not support the necessary time and effort

to establish interpersonal relationships with the philanthropic sector in Aotearoa following the government's shift towards the contracting for outcomes model adopted from the late 1980s. While informal networking plays a key role in developing collective action and partnerships, its importance is often overlooked within a neoliberal policy environment. Neoliberalism prioritises competition and measurable individual performance (Aimers & Walker, 2016), which can make governments hesitant to endorse collaborative approaches unless they align with efficiency goals (e.g., collaboration as a means of improving financial efficiency, reducing duplication of services, or streamlining administrative processes). Even so, informal networking—despite its role in fostering trust and long-term cooperation—remains underfunded and undervalued within this framework.

In Aotearoa New Zealand, Aimers and Walker (2016) lamented the 30 years of neoliberal policy and government contracting affecting small non-profit organisations with community relationships. Neoliberal policy has instead necessitated a focus on the relationship between non-profits and government agencies. This study has not attempted to define what sufficiently funding non-profit collaboration in Aotearoa would look like, nor analyse and critique the impact of neoliberal policy on the sector. However, Bungler (2013) advocated for proactive approaches to networking for non-profit leaders, while Gilcrist (2019) recommended that informal networking be recognised as important for developing collective action and partnerships.

It is worth noting the overlap between the benefits of collaboration and the desired outcomes stated by the philanthropic sector in Aotearoa New Zealand (Waititi et al., 2021). Interpersonal relationships underpin collaboration and its benefits. However, reinterpreting the benefits of collaboration as outcomes within the neoliberal context may strengthen the case for collaboration.



Reframing benefits within the neoliberal context would support funders to address their reluctance to fund relationship-building activities.

### Implications and future directions

Our small study represents modest progress towards building a case to support non-profit collaboration, with further exploration and an expanded sample required to develop a stronger case. Future research should investigate how to foster the antecedents to collaboration, such as interpersonal relationships, and the role of peer support as the vehicle for deriving benefits from collaboration within Aotearoa New Zealand. Our study highlighted that current funding models prioritise competition, administrative efficiency, and contractual compliance over long-term, transformative collaboration. To enable meaningful collaboration, changes to how collaboration is resourced and structured are necessary.

This means moving beyond surface-level encouragement of partnerships and making concrete shifts in funding and contracting models. Our findings indicated that many small non-profits struggle with administrative burdens, particularly in managing contracts and reporting requirements. Instead of expecting small non-profits to duplicate administrative structures, funders and policymakers could explore pooled funding approaches, where organisations form collaborative funding bids with shared administration rather than competing individually.

Further implications include the role of collaboration in decolonising the non-profit sector. One-third of organisations in the philanthropic sector in Aotearoa have a strategy that prioritises the wellbeing of Māori (Philanthropy New Zealand, 2019), and enhancing collaboration in the non-profit sector is one approach that may support wellbeing for Māori. However, given the limited sample in this study, it

will be important for future researchers to include more Māori participants and explore a research question around the impact of competitive funding models on Kaupapa Māori organisations. Internationally, findings might be used to springboard into exploring the importance of collaboration to effect broader change in colonised countries. Our study indicated a potential value in Western non-profit organisations collaborating to support and mutually ensure the development of competencies and knowledge necessary for applying treaties in a way that aligns with agreements made with Indigenous populations. Some participants spoke about collaborations creating opportunities for advocacy—raising the question of whether non-profits could collectively push for systemic changes to funding and policy structures.

Informal networking was identified as a key factor in building trust and enabling long-term collaboration, yet it remains underfunded and undervalued within current funding models. Non-profit leaders in Aotearoa New Zealand should prioritise building inter-sector trust by facilitating regular and meaningful interpersonal interactions among staff from different organisations. By establishing and working to maintain genuine relationships, organisations can better navigate the complexities of collaboration and enhance mutual accountability. Funding criteria could also explicitly recognise and support relationship-building efforts, ensuring that non-profits have the resources to cultivate collaboration over time rather than measuring outcomes only in narrow, short-term ways.

A collaborative and efficient non-profit sector will not emerge under current funding models in Aotearoa. Insufficient prioritisation of collaboration in the philanthropic and government sectors is not a neutral act, and Aotearoa New Zealand suffers from reduced effectiveness, resilience, and impact of non-profits on society. A review

of competitive funding models is needed. The philanthropic and government sectors should further consider and explore the benefits of collaboration for the non-profit sector to assess the potential efficiencies and impact lost to Aotearoa New Zealand by insufficient funding. Current funding models fuel competition between non-profits and erode the antecedents necessary for collaboration. Future research should explore how funding structures could better align with collaboration's advantages, particularly in reducing duplication of services, strengthening sector-wide resilience, and ensuring long-term sustainability. The potential to unlock opportunity within the non-profit sector is too great to ignore.

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The authors declare that they have no conflicts of interest.

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# Only those who love us should decide our care: Elevating survivor voices of Takatāpui, Rainbow, and MVPFAFF+ communities

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## ABSTRACT

**INTRODUCTION:** This article examines systemic harm inflicted on Takatāpui, Rainbow, and MVPFAFF+ communities in Aotearoa through state and faith-based institutions. Drawing on survivor testimony from the Royal Commission of Inquiry into Abuse in Care, it situates these experiences within histories of cultural genocide, where colonial systems deliberately targeted those at the intersection of cultural identity and gender and sexual diversity.

**METHODS:** Using the Pū Rā Ka Ū framework, this qualitative study foregrounds verbatim accounts to honour survivors' voices.

**FINDINGS:** Findings reveal how institutional violence, medicalisation and conversion practices were mechanisms of assimilation, with ongoing intergenerational impacts. Survivors articulate both the trauma of identity erasure and visions for change grounded in mana motuhake and Indigenous-led solutions, calling for structural transformation over symbolic gestures. Social work emerges as a primary mechanism in state-imposed erasure, requiring critical examination of the profession's role in these systems.

**IMPLICATIONS:** As Ngāti Porou, takatāpui and nonbinary, a registered social worker, and a researcher, I position this work not to centre the social work profession but to create a platform for survivors' truths. This article serves those who have endured institutional harm by ensuring their visions for transformation remain unfiltered and central to future pathways toward justice.

**Keywords:** Takatāpui, nonbinary, MVPFAFF+, Pū Rā Ka Ū, state abuse, institutional harm

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Colonisation systematically erased Indigenous understandings of gender and sexuality through child removal, medicalisation, and conversion practices (Kerekere, 2017). In Aotearoa New Zealand and other settler colonial contexts, this deliberate severing of cultural ties reframed diverse gender and sexual identities as deviations rather than integral expressions of whakapapa. Pre-colonial Māori society embraced takatāpui identities as vital

to whānau and hāpori, but colonisation replaced this with heteronormative systems of control (Moyle, 2023).

As one survivor powerfully stated, “Resoundingly, taking someone’s identity away is the biggest act of abuse.”

Takatāpui, Rainbow and MVPFAFF+ people exist across all cultures, with identities shaped by intersectional and

evolving experiences. A survivor shared, “Being Rainbow, being MVPFAFF+, being LGBTQIA+ is different across all our generations ... There are multiple iterations of gender, there are multiple identities within gender.”

This study emerged from engagements between takatāpui, Rainbow and MVPFAFF+ survivors and the Royal Commission of Inquiry into Abuse in Care in Aotearoa New Zealand. Following an inadequate online hui in October 2022, survivors requested a kanohi ki te kanohi wānanga with all Commissioners. The Commission agreed to support an independent report capturing themes from these engagements, resulting in the survivor-led report, *As a Kid I Always Knew Who I Was* (Moyle, 2023).

Despite documenting widespread institutional failings between 1950 and 1999, the Commission avoided naming what survivors identified as cultural genocide. As a survivor advisor on the *Whanaketia* report (Royal Commission of Inquiry into Abuse in Care, 2024), I witnessed this reluctance to acknowledge harms that meet international definitions of genocide, contrasting with our work on *Hāhā Uri, Hāhā Tea* (Savage et al., 2021), which directly named the genocidal nature of child removal. The government’s response has been tokenistic, with the well-funded Crown Response Unit failing to deliver meaningful structural change (Pearse, 2024).

As Ngāti Porou, takatāpui and nonbinary, a registered social worker with 30 years of practice experience, and a researcher, I bring multiple perspectives to this work. However, this research is not intended to centre social work practice or theory, despite being published in a social work journal. Rather, it creates a platform where survivors of state-imposed erasure can speak directly to the systems, including the social work profession, which have functioned as mechanisms of colonial control. By prioritising lived experience and verbatim testimony, this approach

challenges traditional academic frameworks that filter survivor knowledge through professional interpretation. As one survivor powerfully stated,

“I don’t think anyone should have the power to make decisions about children who they don’t love.”

These words expose the dehumanisation of care reduced to policy. Real care must be grounded in empathy, dignity and whanaungatanga. The testimonies that form the foundation of this analysis represent both a record of systemic harm and a roadmap for structural transformation led by those most affected.

### **Methodology: Kaupapa Māori and Pū Rā Ka Ū framework**

The research followed a qualitative inquiry approach grounded in Kaupapa Māori principles (Moyle, 2014; Pihama et al., 2002). Data collection included written notes and transcribed audio recordings from several wānanga and fono. Participation varied across engagements, with survivors themselves determining how and what they wished to contribute. All participants who shared their lived experiences gave informed consent for their pūrākau to be used, and the findings were peer-reviewed by survivors who participated in the engagements.

An independent analysis was undertaken using the Pū Rā Ka Ū analysis framework. Although this framework was not explicitly referenced in the original 2023 research report, it has been applied in this article as a culturally grounded analytical lens to organise participants’ key kōrero. Initially developed by Wirihana (2012) and adapted with her consent, the framework offers a meaningful structure for engaging with complex survivor narratives. It has since been further developed by the research team at Te Whāriki Manawāhine o Hauraki<sup>1</sup> to prioritise verbatim quotes, upholding the integrity of survivors’ insights and experiences. The framework has a range of applications



(Moyle, 2025), and in the context of this research, the themes that emerged were:

*Pū relates to identity.* It reflects how survivors understand who they are and who they were always meant to be before institutional harm. Pū centres the formation of self through whakapapa, cultural knowing, and the right to live as oneself without interference.

*Rā represents hope.* It speaks to the insight, strength and light found in acts of survival and cultural reconnection. Rā reflects moments where survivors reclaimed pride, language, and belonging in the face of sustained attempts to erase them.

*Ka addresses harm.* It brings forward the realities of institutional violence, medicalisation, and conversion practices, as well as the ongoing impacts of those experiences. Ka holds the weight of trauma while recognising how survivors interpret their past and present within wider systems of control.

*Ū holds aspirations for the future.* It reflects the calls for structural change grounded in mana motuhake and Indigenous-led responses. Ū expresses the will to transform systems and ensure the care of future generations through collective, sustained change.

This approach allows survivors' kōrero to be organised within a Māori knowledge framework that respects the cyclical nature of understanding, growth and transformation.

### **Literature: resilience through colonial genocide**

Colonial powers have deliberately implemented policies of forced assimilation, systematically removing Indigenous children from their families and placing them in institutions intended to erase their cultures. This practice, documented across multiple settler-colonial states, including Aotearoa New Zealand, Canada, the United States,

and Australia, has devastated Indigenous identities, languages, and ways of life, inflicting generational harm that continues today (Atkinson, 2002).

### **Colonial assimilation in global context**

In Canada, the Indian residential school system operated for nearly 150 years with the explicit goal of assimilating Indigenous children into settler society (Blackstock, 2019). Generations of Indigenous children were forced to abandon their languages, spiritual practices, and cultural knowledge, leading to profound and lasting harm within Indigenous communities (Truth and Reconciliation Commission of Canada, 2015).

Similarly, in the United States, federal Indian boarding schools suppressed Indigenous identities, forcibly integrating American Indian, Alaska Native, and Native Hawaiian children into mainstream American culture (US Department of the Interior, 2022). In Australia, the forced removal of Aboriginal and Torres Strait Islander children, known as the Stolen Generations, caused widespread cultural dislocation and intergenerational trauma (Australian Human Rights Commission, 1997).

These global examples parallel Māori experiences in Aotearoa New Zealand, where colonial systems have targeted tamariki and rangatahi Māori since early colonisation. While the Royal Commission focused only on 1950–1999, the removal of Māori children represents an unbroken pattern that continues with increasing intensity today (Savage et al., 2021). Under the current government, the elimination of legislation requiring whānau engagement has further accelerated removals while reducing accountability (1News, 2024), abuse in care has also increased (Hanley, 2025).

This systematic, ongoing separation of tamariki from their whānau constitutes cultural genocide under international law.

Moyle (2013) and MacDonald (2023) argued how these practices directly fulfil the UN Convention's definition of genocide, which explicitly includes "forcibly transferring children of the group to another group" (UN General Assembly, 1948, p. 2; Short, 2010). By severing Māori children from their reo, whakapapa, and cultural identity across generations, the state has, not only maintained, but enhanced, the mechanisms of cultural destruction. Far from being historical, these assimilation policies remain active tools of colonial control embedded within contemporary state structures, now operating with fewer constraints than before.

### ***Erasure of Indigenous gender and sexual diversity***

For Māori, colonial disruption extended beyond general cultural assimilation to specifically target takatāpui individuals. Kerekere (2017) documented how pre-colonial Māori society embraced takatāpui as integral community members within long-standing traditions of inclusion. As the Royal Commission of Inquiry into Abuse in Care (2024) outlines in its Chapter 3, colonial policies systematically imposed Western heteronormative frameworks, erasing this cultural acceptance and marginalising takatāpui within both Māori and wider Aotearoa New Zealand society.

This pattern of erasure appears consistently across other settler-colonial states. Over 150 pre-colonial Native American tribes recognised third genders, demonstrating widespread acceptance of diverse identities (Gilley, 2006; Human Rights Campaign, 2020). Similarly, Pacific identities like fa'afafine and fakaleiti show how Indigenous cultures integrated gender diversity into their social structures (Weedon, 2019). Colonial institutions weaponised child removal specifically to suppress these identities, forcing conformity to rigid Western gender norms (Baig, 2020).

In Aotearoa New Zealand, state and faith-based institutions targeted takatāpui, Rainbow,

and MVPFAFF+ youth under the guise of rehabilitation. The *As A Kid I Always Knew Who I Was* (2023) research revealed these institutions sought to "fix" or "correct" diverse gender and sexual expressions while suppressing cultural identities, creating a compounded form of erasure (Moyle, 2023). These practices represent deliberate mechanisms for disrupting Indigenous understandings of gender and sexuality (Schaub et al., 2022).

Today, takatāpui, Rainbow, and MVPFAFF+ individuals are actively reclaiming cultural identities and restoring Indigenous knowledge systems (Fraser et al., 2022). Survivors' testimonies challenge colonial assimilation while advancing decolonisation and cultural renewal. These efforts reaffirm diverse identities within broader movements for Indigenous justice and the creation of inclusive, culturally grounded communities for future generations.

## **PŪ (Source)—Identity and belonging**

### ***The roots of identity***

Pū represents the root source and formation of identity, who we are and who we came into this world to be. Survivors in this study affirmed that takatāpui, Rainbow, and MVPFAFF+ people have the right to define their own identities and the language that represents them.

For me, and the whole thing ultimately, we all want a life, a life that is rich in wellness and in goodness but always being delivered in love.

For many survivors, identity is deeply tied to whakapapa, whenua, and wairua. It is not an isolated characteristic but a central aspect of self that must be acknowledged and respected in all aspects of life, particularly in care settings.

Identity is important all throughout. Identity needs to be respected and acknowledged in care. People need control and autonomy over their identity.

***Holistic cultural embodiment***

Many survivors highlighted that their cultural and Rainbow or MVPFAFF+ identities are inseparable. These are not separate aspects of self but an indivisible whole that shapes how they experience the world.

What is the relationship between Pacific cultural identities and Rainbow and MVPFAFF+ identities? I just really wanted to reinforce... everything that is stated in those two sentences are me as a whole, not me as different points.

Similarly, others described how their gender and cultural identities interact fluidly, rather than existing in separate categories.

First and foremost, before I am fakafifine, before I am a trans woman, I am tangata Niue. And within all of that cultural identity, MVPFAFF+ identities and how they interact, they interact autonomously, like there's no separation of them.

***Beyond victimhood narratives***

Survivors consistently expressed that their identities are not defined by the harm they experienced. They shared their identities in positive and affirming ways before discussing harm, reinforcing that who they are matters more than what they have endured.

For some, cultural identity and gender identity are deeply tied to caregiving and whānau wellbeing.

For Samoan, for me ... and I really believe that's the major role of fa'afafine, is we are carers of our families. And how many fa'afafine I know of that have ... become like the third parent.

Another described how their identities encompass multiple layers, including values, autonomy, and collective wellbeing.

Connectivity, seeing ourselves as multiple identities that within our own rights to identify, articulate, and live, that is how our values work.

These experiences highlight the need for care systems to understand and respect the interconnected nature of identity, culture, and wellbeing.

***Protective power of community***

For many survivors, identity was not only a defining aspect of self but also a source of resilience. When nurtured within affirming communities, identity became a protective factor against harm.

We know it is such a protective factor ... to be around community and to have that positive community where you're affirmed for who you are.

Whānau and community support played a crucial role in affirming identity, and some survivors rejected the notion that belonging is based solely on whakapapa.

It's not just about blood links, genealogy or whakapapa. It's about a community of people who share those same experiences.

Survivors also spoke of the lack of cultural safety and competency in care systems, emphasising the urgent need for better support structures.

The people who are trusted with these young peoples' lives don't have even a basic level of competency. That is so frustrating. All Oranga Tamariki staff, all those staff in those homes, need that urgently. That is a top priority.

***Navigating multiple margins***

Takatāpui, Rainbow, and MVPFAFF+ identities are inherently intersectional, interwoven with ethnicity, cultural identity, and other lived experiences. Survivors spoke about how these intersections contribute to

a holistic understanding of self and create a sense of connection and belonging across generations.

As Māori we claim our identity through whakapapa, through generations of tūpuna. As takatāpui we search for our tūpuna takatāpui amongst them as we strive to see ourselves reflected in the past. By connecting with the past, we aim to enlighten our people ...

Survivors also described how institutionalisation specifically targets people at the intersections of multiple marginalised identities.

[For some] it's their "Rainbowness" that results in them going into care, coming out can be a case for why they are placed in care [being rejected by their families].

### ***Visibility as resistance***

Survivors consistently expressed that identity is inseparable from wellbeing. They took time during the engagements to celebrate and acknowledge their own identities and those of the people around them.

Every life is worthy. Every journey is worthy. In fact, we are God's chosen. Why?... Because we are here to teach others about humanity or lack of, about the right way to live our lives and how to treat one another as human beings.

Many reflected on the need for future generations to experience greater affirmation and safety, ensuring that their identities are celebrated rather than erased.

### **Rā (Enlightenment)—‘hope’ and vision**

#### ***Illuminating the positive***

Rā represents the light shed on a kaupapa through participants' pūrākau. It follows naturally from Pū, as survivors often spoke

about their positive identities and aspirations before reflecting on harm. Hope was articulated through visions for community well-being, the future of care in Aotearoa New Zealand, and the restoration of mana motuhake.

Give us back our mana motuhake. The Indigenous realm is heavily affected by the way the state and religions have imposed their power, and we must not forget that.

Survivors consistently expressed that true care must be reclaimed by the community rather than dictated by colonial structures. They emphasised the need to restore traditional roles of caregiving, ensuring that Takatāpui, Rainbow, and MVPFAFF+ individuals can care for their whānau and tamariki in ways that align with cultural values.

We are naturally carers, we looked after our whānau, our tamariki and kaumatua before the colonials descended upon us.

We need to support more of our queer communities to be able to do those fostering and caring roles.

### ***Grassroots transformation***

Hope was not just conceptual but grounded in action, reflected in the ways that communities support and uplift each other regardless of government involvement. Many survivors spoke about the need for self-determined spaces where their communities could design their own solutions and healing pathways.

That for me is part of what needs to change. It is about creating space and having the courage to get out of the way.

Survivors expressed that transformation is already happening at the grassroots level, where Takatāpui, Rainbow, and MVPFAFF+ communities are actively shaping their own futures.

*Parallel journeys of healing*

Survivors highlighted that re-indigenisation belongs to Indigenous people and that decolonisation is a separate journey for tauwiwi. They rejected tokenistic attempts at “being more Māori” and instead called for authentic engagement with Indigenous identity and cultural self-determination.

Re-indigenisation belongs to Indigenous people; decolonisation is about tauwiwi decolonising themselves. It’s not about trying to be more Māori, it’s about feeling comfortable in your own skin and feeling proud about that, regardless of which Indigenous culture we come from.

Many survivors reflected on decolonisation as an ongoing, internal process; one that requires articulating trauma in a way that aligns with kaupapa Māori frameworks.

Decolonisation is huge! In order to decolonise we need to decolonise ourselves first. How do we navigate our trauma—it’s not about forgetting about our trauma, but about drawing down on it, and articulating it in a way that fits your kaupapa.

A key part of this process is ensuring mana motuhake is upheld, with Indigenous communities leading decisions that affect their lives.

Whakahokia mai te mana motuhake ki Ngāi Māori; return the land ... give us the power to know what is best for ourselves. Allow survivors to contribute to decision-making, to allow them to have a seat at the table.

These insights align with research on Indigenous self-determination and survivor-led justice movements, which emphasise that decolonisation must move beyond policy reform to structural transformation.

*Intergenerational vision*

Survivors expressed hope for a future where Aotearoa New Zealand embraces systemic change and builds a care system that is inclusive, affirming, and culturally grounded.

I just love New Zealand, and I’m really hopeful that in the future we can do some of the things we are talking about here and maybe make a better future.

Hope was also grounded in gratitude, community strength, and intergenerational resilience. Survivors recognised that their journeys were not just for themselves but for those who did not survive.

I’m thankful for survivors and the journeys that you navigate ... the contributions you make just by drawing a breath ... All of you matter beyond what you know. Why? Because you’re here representing those who are no longer in the world.

This hope was not naive optimism but a deeply rooted belief in transformation, built on community efforts to reclaim care, identity, and autonomy. Survivors described turning points that saved their lives, highlighting the need to shift from narratives of harm to narratives of survival, resistance, and possibility.

**Ka (Past, present, future)—harm and disruption***The core violence of erasure*

Ka represents the present moment from which we view the past to understand where we are going in the future. In the context of harm, survivors described the damaging impacts of societal attitudes, care settings, regulatory systems, faith-based institutions, and the state itself. Harm was not only attributed to these systems but also to individuals within them, bystanders who



chose not to act, and the collective denial of well-documented truths.

One survivor captured the core of this harm:

I've grown up in desolation not knowing who I am, who I come from. The state took any ounce of identity or connection, I had.

This harm took many forms, affecting both individuals and communities in complex and enduring ways.

### ***Systemic mechanisms of control***

Survivors described the systemic abuses experienced by Rainbow communities, many of which were not just historical but ongoing.

Incarceration in mental institutions for their sexuality. Incorrect diagnoses to enable commitment. Electric shock treatment and [being] drugged as punishment. Various and often intersecting forms of oppression, racism, homophobia, transphobia, sexism, ageism, ableism. Violence, including physical, sexual, and psychological. Exclusion and erasure. Repression of natural sexual desire, and re-education or conversion practices.

Although conversion therapy has been formally banned, survivors explained that conversion practices extended far beyond what legislation covers, embedding deeper psychological and spiritual harm into their lives.

We have been subjected to practices that seek to "convert" us... treating sex, sexuality, and gender diversity as abnormal, unnatural, wrong, something we can change if we want to. This has involved extreme physical abuse, but also more subtle practices to undermine our dignity, autonomy, and rights to self-identify.

Faith-based institutions played a significant role in sustaining this harm, both structurally and personally.

I experienced abuse from both the church organisation and on a personal level. My father, a local congregation leader, subjected me to severe emotional and psychological abuse.

Religious-based opposition to Rainbow inclusion continues today, particularly in education settings, where conservative faith groups actively campaign against inclusive policies.

They're attacking the work being done in schools, organisations like Inside Out. Conservative faith groups are driving a campaign against any Rainbow teaching, pulling in other vulnerable communities to amplify their message.

Intersex survivors also described experiences of medical harm and identity erasure, particularly the lack of informed consent regarding their own bodies. For example:

Some people find out later in life they are intersex, yet they are not told by those they need to hear it from. Taking one's identity away is a huge abuse. Interfering with someone's body when they shouldn't have.

These testimonies reveal the ongoing impact of systemic harm, violence, erasure, and institutional control, on Rainbow, takatāpui, and MVPFAFF+ lives.

### ***Weaponising the concept of care***

Harm caused by state and faith institutions is not just historical—it continues today. One participant expressed this reality:

I live daily with the effects of state abuse in my immediate whānau... The historical abuse by churches, the impact on relationships, on how people relate to each other, is ongoing. And the ongoing state abuse at the hands of police, or Corrections. That hasn't stopped at all.

Survivors rejected the term *care* to describe the State system:

Stop calling it “care”. What a bastardisation of the term, like calling it child protection or Oranga Tamariki; it’s the absolute opposite.

The environments we are talking about in the Inquiry were never ‘care’... Should we be using that term? The need for people to survive something demonstrates that care was not there.

A care-experienced advocate reinforced this failure:

What I keep feeling is the complete lack of care from the state, there wasn’t a system of care. Women were pressured to give up their children, even when there was no guarantee of a safe placement. So, what was it all about? Whenever the state takes children, they think they’re doing the right thing, but they don’t actually care.

### ***Societal complicity***

Survivors linked the widespread, systemic nature of abuse in care to deep-seated societal attitudes that have allowed harm to continue unchallenged.

Unless the attitude of New Zealand is changed, there will be no change.

The burden of fighting against these harms has exhausted many in the community.

We’re exhausted. We’re exhausted from fighting hatred. Those who make decisions about taking children from their cultural roots, their people, their communities, you are responsible. I don’t have the luxury of not getting up again. But we are exhausted on the front line.

These testimonies expose how institutional abuse is not only historical but ongoing, rooted in the systemic dismantling of Māori

society and the failure to protect those in state care.

### ***Structural underpinnings of harm***

Colonisation underpins much of the harm inflicted within the care system, shaping the isolation, punitive structures, and systemic erasure of Māori identity. Survivors highlighted disconnection from whenua as central to this loss.

Land plays a huge part in our whakapapa. For some Māori disconnected from whānau, hapū, and iwi, they’re still trying to figure out where they belong ... If we had our land, we would have our connections. If we had our connections, we wouldn’t have to question our own existence. Land back is huge.

One survivor reflected on how colonial disruption weakened whānau, making state intervention possible.

If our whānau were stronger, if they hadn’t been attacked for 200 years, the state couldn’t do that. That has to be a big part of putting things right.

Another highlighted that harm was not incidental but systemic.

Before we even went into care, whānau had been dismantled. The state creates poverty and struggle, then decides kids are at risk and takes them away; it’s a state-fed cycle.

### ***Whakapapa interrupted***

Harm does not end with one generation, is carried through whakapapa, impacting children of survivors.

My mum lost custody of me when I was nine. In some ways, that was positive because of the abuse she carried. Sometimes it was a hard place for a child to be.

Survivors reinforced the depth of intergenerational trauma:

Layers upon layers of intergenerational trauma ... in the context of whakapapa, it cannot be underestimated.

Abuse transfers and manifests in different ways across generations. It stems from colonisation, from poverty. It's in learned behaviours, in love that is not shown. Discrimination research shows physiological effects can even be passed on to children.

Many described the removal of mokopuna as deliberate, an act of genocide. An example:

The breaches of te Tiriti o Waitangi and the enormity of the impact on whānau Māori across generations require their own Royal Commission of Inquiry.

Despite the harm they have endured, survivors refused to be defined by abuse. Throughout the engagements, they spoke of hope, identity, and the urgency for change.

## Ū (Sustenance) aspirations for transformative change

### *Beyond performative listening*

Ū represents the sustenance provided by Papatūānuku, embodying the idea that what we nurture today sustains tomorrow. In this context, it reflects the aspirations of Takatāpui, Rainbow, and MVPFAFF+ survivors, their whānau, and advocates for transformative change. Their voices highlight the future they seek for Aotearoa, one that centres mana, rangatiratanga, and structural accountability.

The biggest thing, is to have people listen, listen to understand, don't listen to respond.

### *Reclaiming decision-making authority*

Survivors called for the end of state control over whānau and communities, demanding

that tamariki and rangatahi remain with their whānau instead of being placed in state care.

We've just got to stop ... need to stop putting people in places, to live with strangers, to be looked after.

The state's paternalistic approach has repeatedly failed, causing ongoing harm to generations of Māori and Rainbow communities.

Remove the abusers, not our babies! Our tamariki should remain at home in their communities with their nannies and multigenerational caregivers.

Survivors asserted that whānau should receive the necessary resources and support to care for their own children, instead of having them forcibly removed into harmful care systems.

### *Meaningful accountability*

Many expressed deep scepticism about apologies from the state and institutions, recognising that previous apologies have failed to create meaningful change.

Part of putting it right is making genuine apologies ... you can only tell if it is genuine when their behaviour changes.

Some felt that apologies primarily serve institutional interests rather than addressing the actual harm experienced by survivors.

I know the state wants to make an apology because it is going to make them feel better.

Survivors stressed that true accountability requires systemic reform, not just symbolic apologies.

### *Dismantling colonial power structures*

Survivors called for the dismantling of colonial structures, highlighting that state

abuse is ongoing and continues to uphold the power of settler institutions.

The abuse of the state is still ongoing ... the only way that I can think that we can stop these impacts is to remove the power.

Calls for decolonisation focused on tau iwi taking responsibility for their role in these systems and returning power to tangata whenua.

Decolonisation is about tau iwi decolonising themselves... it's about feeling comfortable in your own skin.

### ***By us, for us: self-determined healing***

Survivors strongly advocated for self-determined solutions, where they have full control over their own healing pathways and community-based support systems.

Survivors can take care of themselves, work for themselves, have access to the resources they are entitled to, to design their own solutions and their own healing pathways.

Institutions must create space for survivors and step aside, rather than imposing external interventions.

Just have the courage to get out of the way ... and stop taking up our space.

### ***Transforming cultural foundations***

Survivors urged for a broader cultural shift to prevent ongoing harm, particularly within institutions such as schools and churches, where toxic cultures enable abuse to continue unchecked.

Sexual abuse incidents will still happen, but hopefully a lot less if you take away the culture that allows them to keep happening.

This shift requires active engagement with survivor experiences, rather than surface-level reforms that leave harmful structures intact.

### ***Faith-based institutional reform***

Survivors demanded significant changes in how churches operate, including:

- Stripping charitable status from churches that uphold harmful practices:  
Churches shouldn't be given tax-free rights... because of the way they treat a group of people as a second-rate group.
- Implementing oversight mechanisms to monitor faith-based institutions:  
There needs to be an organisation auditing churches... if you're not cheering for New Zealand then you don't get it.
- Establishing mandatory ethical guidelines for clergy:  
In order to have charitable status, your pastors must sign up to a code of ethics. It's just simple stuff.
- Providing reparations for harm caused to Rainbow communities:  
Churches need to make reparation to the Rainbow community, proper psycho-social support for people who have been through conversion practices.

Survivors made it clear that churches must be held to the same standards as other institutions, ensuring accountability for past and ongoing harm.

### ***Resource sovereignty***

Many survivors advocated for sustainable funding for Rainbow and MVPFAFF+ organisations, recognising that these groups carry the burden of support but are often underfunded.

Rainbow organisations deserve the support. We are doing the mahi, but often the funding doesn't come through in the right ways.

To ensure long-term change, survivors highlighted the need for scholarships and funding opportunities that enable more Rainbow and Takatāpui professionals to enter counselling, mental health, and support services.

We need grants and scholarships to enable Pasifika, Māori, and other Rainbow people to become counsellors or mental health support.

### ***Transparent reconciliation processes***

Survivors demanded transparency and accountability from the state, particularly regarding historical abuse and records access.

People have a right to know who harmed them, who violated their tapu, their wairua.

They also called for ongoing monitoring of harm, particularly within faith-based institutions.

There needs to be someone maintaining a list of churches still doing conversion practices.

Survivors were clear that transformative systems change is necessary, ensuring that harmful structures are not just reformed but fully dismantled.

### **Discussion: Truth-telling and transformation**

Survivors' testimonies illuminate both systemic harm and pathways toward healing. Their experiences reveal how state- and faith-based institutions specifically targeted Takatāpui, Rainbow and MVPFAFF+ people at the intersection of cultural identity and gender/sexual diversity, creating compounded forms of discrimination and erasure.

Social work has functioned as a key mechanism of cultural genocide, acting as

an enforcement arm of colonial systems that remove tamariki from whakapapa, pathologise Māori whānau, and frame structural violence as protection. This complicity continues through Oranga Tamariki and other Crown agencies, where survivors identified profound competency gaps in supporting takatāpui, Rainbow, and MVPFAFF+ rangatahi, who described these harms directly, pointing to systemic failures in care and the erasure of their identities (Royal Commission of Inquiry into Abuse in State Care, 2024).

The profound contradiction in state care becomes evident: while agencies claim caregiver shortages, they simultaneously maintain discriminatory barriers that prevent Takatāpui, Rainbow and MVPFAFF+ people from fulfilling their traditional caregiving roles. As one survivor pointedly expressed: "The hypocrisy of Oranga Tamariki, they scream for caregivers, but they really want straight living nuclear family types, whilst blocking queer and trans folk from having kids in our care." For those who are both Māori and takatāpui, this creates a double discrimination that compounds barriers to reconnecting tamariki with affirming care environments.

This research highlights several key insights with significant implications:

First, the Pū Rā Ka Ū framework reveals how identity, hope, harm and transformation interconnect in survivors' lived experiences. Their testimonies demonstrate that reclaiming identity serves as both healing and resistance against colonial erasure.

Second, survivors consistently articulate alternatives to harmful systems, grounded in traditional caregiving roles and Indigenous knowledge systems. Their collective vision demands, not tokenistic acknowledgement, but fundamental restructuring of how decisions about care are made.



Third, transformative change requires dismantling systems that continue to marginalise Māori and Rainbow communities under the guise of protection. Survivors' calls for decolonisation include returning land to tangata whenua, recognising Indigenous-led solutions, and ensuring tauiwi confront their role in upholding colonial structures.

These findings have profound implications for social work education and practice in Aotearoa New Zealand. The profession must critically examine its ongoing participation in systems that remove tamariki Māori from whakapapa while preventing takatāpui caregivers from supporting their communities. Transformative practice requires supporting traditional caregiving roles, recognising intersectional identities, and prioritising community-led approaches that affirm cultural connection.

### **Conclusion: Honouring pūrākau, demanding justice**

This research documents both the harm inflicted on takatāpui, Rainbow and MVPFAFF+ communities and their vision for transformation. Survivors' testimonies reveal how colonial systems deliberately targeted those at the intersection of cultural and gender/sexual diversity, using care systems as mechanisms of control and assimilation.

The purpose of this work is not to centre social work, but to create a platform where survivors of state-imposed erasure can speak directly to systems that have shaped their lives. By amplifying these voices without institutional filtration, this article honours their expertise in defining both problems and solutions.

As Ngāti Porou, a survivor, takatāpui, a social worker and researcher, a parent and grandparent, my lived experiences shape this

work. This research is a contribution to my diverse communities and whānau, weaving together voices that demand rangatiratanga and justice. The weight of dislocation and trauma is not lost on me, nor is the strength found in connection, survival and collective voice.

I am reminded of my son's words at 8 years old, growing up within a Rainbow community:

You guys are sheroes, Mum, because how would we know what it's like if you didn't live your lives and share your stories?

These pūrākau of harm, healing, hope and change offer a roadmap for the future. By centring survivor knowledge as the foundation for transformation, we honour those of our rainbow and takatāpui whānau who came before us, affirm who we are now, and contribute to a future where our communities thrive with their connections to whakapapa intact.

Future work must continue this kaupapa, expanding opportunities for survivor-led research, creating pathways for intergenerational healing, and ensuring that policies and practices genuinely reflect the aspirations of those most affected. Only then can we move toward true justice, not as an abstract concept, but as lived reality grounded in mana motuhake, safety and dignity.

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### **Note**

<sup>1</sup> Te Whariki Manawāhine O Hauraki (Te Whāriki) is a tangata whenua social service that has been in operation for 40 years, based in Thames, Hauraki. The author of this study is the Director of Te Whāriki's research unit.

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# Jan Duke: Professionalisation, education, and registration of social workers in Aotearoa New Zealand

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## ABSTRACT

**INTRODUCTION:** This article details the contribution made by Jan Duke to the development of social work in Aotearoa New Zealand, with particular emphasis on the development of education and professionalisation in preparation for mandatory registration.

**METHOD:** A life history method is used to provide one “story” of Jan’s contribution. Interviews were held with Jan, as well as with six other people who worked alongside Jan over time. Other historical documents have also been used to support this article.

**FINDINGS:** Jan made a significant contribution in her roles on both the Social Workers Registration Board and then later as a Deputy Registrar within the Secretariat. Participants describe Jan’s social work values, her knowledge of regulation, her commitment to working alongside Māori and her relationship skills as all being critical in moving the profession of social work towards mandatory registration.

**CONCLUSIONS:** Jan Duke has played a significant part in the history of social work in this country, particularly in holding the tensions between Crown regulation and professional advocacy on the pathway towards mandatory registration.

**Keywords:** Social work, registration, regulation, social work education, Jan Duke

This article forms part of a growing body of historical accounts capturing the contributions made by individuals to the development of social work in Aotearoa New Zealand. Jan Duke features in this article with a specific focus on her role in social work professionalisation, raising standards for social work education and moving the profession towards mandatory registration.

Jan’s involvement in, and impact on, the current context of social work in Aotearoa spans the first quarter of this century. With

a background in nursing, social work and community work, Jan initially moved from Australia to Aotearoa as Head of Department and Professor of Nursing & Midwifery at Victoria University of Wellington. In 2003, she became a member of the inaugural Social Workers Registration Board (SWRB), where she was involved in setting up the infrastructure and new policies required for the Social Workers Registration Act (SWRA, 2003). She held that role on the Board until 2008 when she became the Deputy Registrar in the SWRB Secretariat<sup>1</sup>.

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Throughout her time on the Secretariat, she established many important relationships instrumental for moving the profession from voluntary to mandatory registration, while simultaneously strengthening the quality of social work education. Jan was able to do so through maintaining a careful balance of various tensions, through her partnerships, her skillset, and her ongoing commitment to social justice and social work values.

This article begins with a methodological description and then describes Jan's early developmental and professional years in Australia prior to her move to Aotearoa. Her main areas of contribution are then considered, set in a particular historical, cultural and political context and brought to life by the words of some key stakeholders in social work's professionalisation project in the early 2000s.

## Methodology

A Life History methodology, known as a topical life history, has been used to explore Jan's contribution within a particular time and area of her life (Lewis-Beck et al., 2004). The methodology can be further specified as being developed out of both researched and reflexive methods of life history (Lewis-Beck et al., 2004). Different kinds of data have come together to construct this researched "story"; as researchers, we also bring our own stories and experiences of Jan, and of particular times/events, to the research. It has been a reflexive process. We have selected some data, omitted other data and thus contributed to the construction of this story. There are many stories that could be told; this is ours, endorsed by the participants who have contributed to it.

In this kind of methodological process, it is important that the researchers situate themselves. Barb worked alongside Jan in her capacity of being a director of social work at one of the country's universities throughout 2011–2019. Carole served

extensively with Jan on recognition panels for social work programmes and, like Barb, has maintained personal contact with Jan since then.

## Design/methods

The life history method uses various forms of information to develop the story that is to be told. This article is composed of interviews with key stakeholders, previously documented material, a transcript from an interview with Jan from Sonya Hunt's PhD research (Hunt, 2020), as well as the authors' own experiences and knowledge of Jan.

This project received ethical approval from the University of Auckland Human Participants' Ethics Committee in February 2021. Jan was asked to provide the names of people she believed could add richness to the article. She named seven potential participants and signed release of information forms to be provided to those people. Potential participants were contacted by email and all initially agreed to be interviewed, with one interview not eventuating. In addition to Jan's initial in-person interview, six interviews were held via Zoom or phone calls from January to May of 2022. Jan was again interviewed in January 2024. She also agreed to the release of the transcript of an interview that she had done with Sonya Hunt, for her PhD thesis in 2016, to be used for this article (all personal communication material dated August 9, 2016). Jan's initial interview was professionally transcribed, and subsequent interviews used the Zoom transcriber function. These transcripts were uploaded into the NVivo data analysis software package and analysed thematically, based on Braun and Clarke's (2022) six stages of data processing with codes and then themes being developed from the data.

All participants were provided with the opportunity to approve any quotations attributed to them in the article, and Jan also had final approval of the article submitted.

### Jan's early years

Jan was born in rural New South Wales, the eldest daughter of eight children. She initially attended a one-teacher primary school and then went on to a Catholic boarding school for her secondary years. She was obliged to leave school in Year 11 to return home to help care for a family member, meaning she was unable to go to university as she had planned (J. Duke, personal communication, January 28, 2024).

Jan then did her general nursing training from 1969 to 1971 and relates that in 1973 she found herself newly married and had moved to the UK to undertake midwifery training. During her time in the UK, Jan remembered harrowing situations where the women she worked with were supported by various social service initiatives, and how this encouraged a broader perspective on care. By 1977, Jan had returned to Australia and with two children found herself at a crossroads. Having missed the earlier opportunity to attend university, she applied successfully to undertake her Bachelor of Social Studies degree (professional social work qualification) at the University of Sydney. Here her placements included an adolescent mental health unit and a state government's Women's Co-ordination Unit, where she drew on her nursing and midwifery knowledge and developed resources for women and girls who had unplanned pregnancies.

Jan's first social work job was as a community development social worker and co-ordinator of a neighbourhood centre in an inner Sydney suburb. She was involved in setting up several important initiatives there, including a childcare centre and a tenancy advocacy service. Jan also became actively involved with the New South Wales branch of the National Australian Social Welfare Union. The Union was successful in obtaining a national award for social and community workers nationally. While Jan loved the community work, funding for the centre was contract-based and renewed

annually, so there was never the economic certainty that she needed while raising two children (J. Duke, personal communication, January 28, 2024).

In 1985 Jan moved to a nursing education position and began what was to be an illustrious career in education, spanning just under twenty years. Through this time, Jan completed a Diploma in Labour Relations and Law and her Master of Arts (Hons) at the University of Sydney, as well as her PhD at the University of New South Wales (completed in 2002). Her trajectory is then one of increasing responsibility and leadership roles within the academy. Jan also engaged in consultancies for the World Health Organisation, and in other education policy consultancy related roles. She was also the Chief Executive Officer of the Australian Nursing Council in 1998-99 (J. Duke, personal communication, June 30, 2008).

### Aotearoa bound

In 2000 Jan was invited to apply for a role at Victoria University of Wellington as Professor of Nursing and Midwifery. Jan stated that they "wanted somebody who was social work qualified because Victoria had closed down its social work degree and they wanted somebody who would be able to work with them should they decide to restart their social work degree" (J. Duke, personal communication, March 26, 2022). Ultimately Victoria University decided not to re-establish a social work degree, but Jan was instrumental in setting up a postgraduate programme for social workers and occupational therapists who were new to mental health (see Staniforth & Appleby, 2022).

The early years of the development of professional social work are well charted by Nash (1998) and Hunt (2017, 2020). Jan Duke's appointments to the SWRB (to the Board in 2003 and the Secretariat in 2008) were indicative of the need to



provide knowledge and expertise for the development of both professional and educational standards.

### **“Who is this woman?”: Jan’s role on the Board 2003-2008**

The SWRA (2003) provided the first legal framework for the (initially voluntary) registration of social workers; the Board itself was first constituted in October 2003.

The majority of the inaugural SWRB board members had been appointed because of their experience in the social work professional body, the Aotearoa New Zealand Association of Social Workers (ANZASW). Jan described her journey to become a board member in her interview with Sonya Hunt in 2016:

I was actually contacted by somebody in Australia who had been watching the developments and suggested it might be interesting, given that I had been on a regulatory authority or two in Australia, and they thought that I might be able to put some regulatory knowledge into the Board. I had been Chief Executive of the Australian Nursing and Midwifery Council before I came to New Zealand. I threw my hat in the ring. (J. Duke, personal communication, August 9, 2016)

Jan observed that as a perceived outsider—a nurse *and* an Australian—her potential contribution was at first under-recognised and viewed with some suspicion:

It was interesting when we had the first meeting of the original board members ... there were nine of us there at the time. All of the others knew each other because the social work sector in New Zealand is fairly small and there was quite a lot of tension about “who is this professor of nursing, who has actually worked with regulations and understands regulations, that they have dumped on us?” So, it took a little while, I think, as not being seen as a social worker and

it took some time for them to realise that I actually did have a social work qualification and that Victoria University was actually running a programme for social workers in terms of what was then CTA (Clinical Training Agency)-funded entry to mental health for social workers and occupational therapists. (J. Duke, personal communication, March 26, 2022)

The first Board’s role from 2003 onwards was that of implementation. Sean McKinley was the first registrar for the SWRB who worked alongside Jan in both Board and Secretariat roles. He observed that, operationally and to the board members, Jan’s background and knowledge were unknown.

... there wasn’t a lot of lead-in time – there was less than 12 months from appointment to taking applications for registration so there was a lot of work that had to be done in that first 9 to 12 months. We had to be open for applications by October 2004. (J. Duke, personal communication, August 9, 2016)

Initial and subsequent Board members commented on the requirements for specific experience and knowledge about regulation required within the Board during this developmental phase. Toni Hocquard, a Board member from 2011 and a subsequent Chair of the Board, commented that Jan’s prior experience within nursing regulation in Australia melded an understanding of regulatory expectations and requirements with a professional social work perspective:

She had what no one else had, which was that nursing thing, the rest of us really just came from social work—she had that nursing background, and that’s what I think helped to give her the vision. I think it took some people a little while to cotton onto that ... (T. Hocquard, personal communication, January 21, 2022)

Also a Board member from 2011, Mary Miles commented about the depth of Jan’s experience of professional regulation:

I loved the lens she brought to the discussions and because it was wider than just practice, it was always she had that look at the regulation side, but also on the education side. (M. Miles, personal communication, May 26, 2022)

A key role in the initial period of the Board was to look at the establishment of programme recognition standards, whereby a social work programme could be recognised as having content and processes able to produce social work graduates at an established beginning practitioner level. During the years between 2003 and 2008, the SWRB completed the recognition process for all the then current social work qualifications. Jan's academic background and current role within a tertiary institution without a social work programme created an opportunity to contribute:

I guess I was so much from outside that it was obvious I wasn't going to have any conflict of interest with almost anything because I wasn't a member of the Association, I wasn't practising as a social worker and I'd had no input into the development of the legislation. (J. Duke, personal communication, August 9, 2016)

Jan had lead responsibility for drafting the programme recognition standards and social work educators were consulted. Current qualifications were automatically transitioned onto the current schedule and subsequently reviewed. During this process, Toni Hocquard observed that Jan used her academic background to navigate differing expectations of academic rigour within the polytechnic and university sectors:

In the polytechs, I don't think there was as much of a strong understanding of the importance of ... academic rigour, and I think she helped people to understand what that actually looked like. She didn't just challenge without substance, she was able to guide, and I think people might have found that threatening initially, but once they realised she knew her stuff,

then she would help ... the landscape changed a bit. (T. Hocquard, personal communication, January 21, 2022)

Kieran O'Donoghue, an academic who worked alongside Jan on many programme recognition panels and social work education standards reviews made a similar observation:

She was always an academic, she understood the value of knowledge across all realms, and I think that's a really significant and important part, and her ability to walk in different worlds, to engage with the wānanga sector, to engage with the institute of technology sector, and to engage with the university sector, and to recognise that they were all different. (K. O'Donoghue, personal communication, February 20, 2022)

### **Embedding the social work voice: Jan Duke's role as Deputy Registrar**

Jan served two terms on the SWRB before making the move to being the Deputy Registrar with primary responsibility for Education. This involved resigning her position at Victoria University and from her tenure on the Board of the SWRB. Jan's decision to move from board member to the



*Jan Duke, with Sean McKinley, Registrar/ Chief Executive SWRB and Robyn Corrigan, SWRB Chair*

Deputy Registrar role in 2008 was informed by her own professional trajectory and by the growth in the roles and tasks of the SWRB.

Acknowledging the tensions created by the legislative mandate of the SWRB, Jan suggested that as the regulation of social work was essential for the development and maintenance of standards, and for the protection of the public, that competency and social work practice needed to be defined from within the profession. Jan identified the continuing balancing act between the governance role of the SWRB, and the social work voice within the Secretariat. Whilst personnel and Board members change over time, the requirement for social work representation in the Board is for four out of seven members to be registered social workers: she observed the continuing importance of a clear social work voice within the expanding Secretariat staffing (J. Duke, personal communication, March 26, 2022).

Explaining the purpose of regulation to the profession was a key role and task. Jan described her role as being the “professional voice of the regulatory team” and using the relational skills of social work to navigate the profession’s responses to the regulatory processes:

I think it was really important for the profession to see that there was somebody from the Secretariat that understood ... and could engage with the profession and understood that it was a relational profession, and it is [about] maintaining those relationships and doing it in an important face-to-face way to move forward. Because ... there was a government organisation that was about social control. So, trying to balance that and getting social workers to understand that it was about protecting the public not controlling the profession. (J. Duke, personal communication, March 26, 2022)

Her Australian experience of nursing regulation had taught her that professions

could be enhanced and supported (as opposed to only being controlled) by regulation, with greater multidisciplinary acknowledgement:

And certainly, the health social workers found that once they moved to being a regulated workforce ..., their standing within the multidisciplinary team was different. They had a different acknowledgment from the doctors and the psychologists because they were also a regulated profession. (J. Duke, personal communication, March 26, 2022)

Toni Hocquard acknowledged Jan Duke’s role in changing the perception of the SWRB within the profession:

The Registration Board, because it’s located in government, it always carried that negativity that social workers always challenge about the system. So it came with that and to be able to negotiate the landscape and move it from being a vilified sort of an organisation to something that social workers could actually see as useful, I think, is something that Jan played a big part in. (T. Hocquard, personal communication, January 21, 2022)

Jan Duke’s tenure in the Secretariat enabled a greater social work voice within the regulatory space and worked towards influencing the perception of regulation within the profession. This was something that Jan felt was essential, but which could not always be taken for granted. Jan also believed that in going forward, that the contribution of the profession was needed in making important decisions on policy and practice.

I think the profession needs to make sure they always have a voice in some of those things and it is not just policy because we are a public service or agency or make policy, there needs to be professional learning and professional voice. That professional consultation needs to continue to happen, and I think it is for the profession to work out in a

way how that continues to happen given that the board Secretariat has got so big. There are so many staff and the numbers of social workers there are so small. (J. Duke, personal communication, March 26, 2022)

### ***The Education Role: Programme recognition standards***

One of the key steps in the regulation project was to ensure the quality of social work education was of high standard and consistent throughout the country.

Jan Duke came into the SWRB roles from a long career in academic practice in Australia and Aotearoa, as a teacher, professor and researcher. The new regulatory environment in Aotearoa had to navigate the complexities of social work education, delivered from within universities, wānanga, private training establishments (PTE) and polytechnics. The responsibility for approving academic courses as suitable for the education and training of social workers prior to the SWRA had been the responsibility of ANZASW. As Mary Nash's history of social work education in Aotearoa indicated, this earlier period of education and training oversaw a transition from short courses (e.g., Tiromoana and Taranaki House, see Staniforth, 2015) to 2-year diplomas, and 3-year degrees (Nash, 1998). In the first 5 years of the Board (2003–2008), Jan, along with Liz Beddoe and others, had been instrumental in developing the Board's role in recognising social work qualifications. Sean McKinley considered that:

[Her] contribution was immense ... especially in the area of qualifications ... because it grew to, like, 17 qualifications over something like 30 sites and unlike the other professions who registered under the HPCA Act, we were registered under our own Act, so we didn't necessarily have that pool of knowledge that the health sector had.

So we were really starting from scratch. (S. McKinley, personal communication, February 16, 2022)

Sean McKinley's observation was that programme recognition panels brought a new level of scrutiny and analysis to social work education, and that Jan's professional experience in nursing education enabled this. The process by which the panels were conducted was also crucial to getting the tertiary institutions onboard:

At the end of that first programme recognition visit, people actually realised that this wasn't sort of a Big Brother-type process. That we weren't telling educators how and what to teach, that it was actually more of a supportive process. "Tell us what you do, tell us how you do it, and tell us what you need from us to support you". (S. McKinley, personal communication, February 16, 2022)

One aspect of the resistance to the setting and imposition of education standards for social work programmes was the well-founded concern about standardisation and a 'one size fits all' approach, directed from the Crown, and potentially reducing the opportunity for programmes to represent and reflect cultural, regional and community identity (Staniforth et al., 2022). Kieran O'Donoghue recognised Jan's position in that, within the SWRB's role in recognising social work programmes, that:

... so she might tell us what sort of regulations we would have, but it wasn't for the Board to set curriculum and she was also, I think, one of the people that could recognise the need for diversity across the social work sector. (K. O'Donoghue, personal communication, February 20, 2022)

These tensions were especially crucial for Tangata Whenua educators, working in a regulatory environment that had seen opportunities for bicultural partnership



threatened by the assumption of Crown responsibility for both registration of social workers and the setting of education standards.

### *Shaping the degree*

The required length of the social work undergraduate qualification changed significantly over time. At the time the SWRA came into place, social work programmes were still offering 3- or 4-year undergraduate programmes. Jan reflected that national equivalence was needed, so employers could know that social workers graduated with a similar level of knowledge and expertise.

It took us a while ... to get from a [2]-year training to where everybody is doing a four-year degree where the students come out able to critically reflect on their practice, to be able to know where to find the evidence if they don't know what they need to know, they at least know where to search it. They know how to use professional supervision properly ... and the difference that the employers tell us they have noticed ... in the polytechnics, wānanga, PTE sector, they can just see (although there was resistance initially to that 4 years) the practitioners themselves and the employers can see that they are now getting a quality outcome from education. (J. Duke, personal communication, March 26, 2022)

Sean McKinley considered that the move to the 4-year degree was Jan's greatest achievement. He indicated that achieving the transition was underpinned by the relational platform that he witnessed Jan building. This was often a fraught process, with different implications for universities and other sectors. Such a smooth transition from 3- to 4-year degrees was:

... down to making sure you have all the i's are dotted, all the t's are crossed, because I think she also understood that

you got one chance to do this and so you needed to do it properly. And, and so there was again, you know, relationship-building, getting people to understand. (S. McKinley, personal communication, February 16, 2022)

Kieran O'Donoghue (personal communication, February 20, 2022) made the link between the transition to the 4-year degree, and the parity in the international workforce that enabled social workers from Aotearoa New Zealand to practise in Australia and beyond. He recalled that at Jan's farewell from her role at the Secretariat, Shannon Pakura (Chair of SWRB) mentioned that one of Jan's significant achievements was the mutual recognition with the Australian Association of Social Workers, which had been enabled by having parity in the length of undergraduate qualifications.

### *The Masters requirement*

The transition of undergraduate social work degrees from a 3-year to a 4-year qualification was a major driver for the enforcement of the Masters-level qualification for educators. An increased emphasis on education standards and academic rigour inevitably turned the spotlight on to the qualifications and experience of the educators within social work programmes. NZQA requires educators to have a qualification higher than that on which they are teaching. This requirement, eventually endorsed by the SWRB, meant that social work educators had to have a minimum of a Master's degree in order to teach on a Bachelor's programme. This remained a contentious decision, especially for Tangata Whenua, that attracted much criticism for being a monocultural understanding of expertise, and which resulted in some educators having to leave their posts. Jan reflected on this requirement:

I think that part of that was using a sledgehammer to crack a nut, it possibly came down harder than we needed to.



.... So, we had a situation where we had really new graduates coming out and teaching without any experience and the reason that the Board had consultation with the educators and decided to put the benchmark of a Master's degree to be able to teach social work skills was so that you had somebody who was fully registered with some practice behind them... So, they had that educational knowledge to understand what was required in teaching at an undergraduate level and what was required for people to become research active. (J. Duke, personal communication, March 26, 2022)

Jan commented that the expectation of a Master's qualification provided a foundation for the polytechnic programmes, in particular, to develop a firm academic basis with which to understand the requirements of the four year degree that was being mooted. Jan commented that some of the programmes welcomed the expectation of a Master's degree for their educators:

... in fact the wānanga were quite pleased at times to be able to use that requirement. I think in some instances they found it quite helpful, but it was a challenge, and it was a challenge for some of the Pakeha practitioners in some of the polytechnics as well, get your degree, finish your masters, be an academic. An academic according to NZQA needs to have a qualification above the one that you are teaching. .... We just formalised that in a hard barrier for a while. (J. Duke, personal communication, March 26, 2022)

This was a challenge for wānanga and was often viewed as a lack of recognition of other forms of expertise and knowledge that the SWRB has since addressed (in 2021).

Wheturangi Walsh-Tapiata, speaking from extensive experience in university and wānanga education, leadership and management, commented that within the

requirement for the postgraduate degree, Jan had worked hard with the institutions to enable qualifications to be achieved, and to address challenges to meeting these requirements as they arose (W. Walsh-Tapiata, personal communication, February 10, 2022).

In 2022, Jan observed that it was now possible to relax these qualification requirements:

The education institutions now know what they need to know and what they need in their staff and much more flexibility particularly around some speciality, practices, theories. They may have a really superb practitioner who is degree qualified not Masters qualified, who would be a superb teacher in some areas. (J. Duke, personal communication, March 26, 2022)

Whilst Jan's initial appointment to the SWRB was that of Deputy Registrar, her responsibilities extended far beyond the education mandate, with key involvement in the legislative change from voluntary to mandatory registration for social workers.

### ***Voluntary to mandatory registration***

The initial position of the SWRA and the Board regarding the registration of the profession was that it needed to remain a voluntary decision. A SWRB review on the Act in July 2007 had recommended a move towards mandatory registration, now that mechanisms for registration had been established (SWRB, 2007). It was necessary to negotiate the transition from voluntary to mandatory registration carefully. With the first purpose under the legislation being the protection of the public, voluntary registration would always leave the possibility that poor practice could continue without the disciplinary consequences enshrined within the regulatory framework.

Various brakes were applied on the timing of any move to mandatory registration.

Jan commented that the delay in moving towards a mandatory registration for social work had largely been the challenge of staffing Child, Youth and Family (the precursor to Oranga Tamariki), as well as the fact that about half the social work workforce was employed in the NGO sector, who were not funded to pay for registration costs of social workers (J. Duke, personal communication, March 26, 2022).

Jan's comments in interviews for this research revealed just how political a process the move to mandatory registration was, and how finely tuned the relational negotiations between Board, Secretariat and the Minister needed to be. "Lots of bigger picture actors determined the pace with the move towards mandatory legislation" (J. Duke, personal communication, March 26, 2022), and the funding of social work, registration and education were fundamental in this process.

I think as a secretariat we matured, and we had become sophisticated to know what to do. What do we need to do, how can we influence government, what do we need to do differently because we had enough sense of what government needed to hear. I think there was support across the House once we got to the readings. [...] I think the professions came together really well at the time of the draft legislation to make sure what eventually went through parliament and all of those discussions we had with the select committee afterwards was really where the profession really grabbed the legislation by the horns and said, "yes we need it now and want it and this is what it needs to look like." (J. Duke, personal communication, March 26, 2022)

From the perspective of some of the participants for this article, Jan is considered to have been instrumental in the success of this process:

I definitely think getting across the line in terms of mandatory there was a lot of

background work that she and Sean did. All the dissenters around mandatory. I think she really did help to move the groundswell. ... I remember some very big players in the social work world who were very anti-registration, at one point, who then swung over. I think that Sean and Jan were a double act. ... You know, pulling on the importance of relationships, I think, Jan spent a lot of time building relationships with people and then that allows you to have those honest [and] courageous conversations and I think Jan is very good at [these]. (T. Hocquard, personal communication, January 21, 2022)

### ***Section 13: Valuing cultural and community knowledge and expertise in the regulatory environment***

Section 13 unites the focus on education standards and qualifications with that of registration and competencies. As an enabling clause in the legislation, Section 13 was constructed to provide an avenue for those with considerable practice expertise and experience to have their contributions recognised and to enable their registration without the requirements of a formal social work education. It has been of extreme importance to Tangata Whenua, whose commitment to manaakitanga and arohanui ki te tangata transcends Western constructions of social work. In other words, Māori have engaged in practice similar to social work and Section 13 offered the opportunity for people working in communities to have their expertise formally recognised.

One of Jan's roles was to construct a strong framework for the assessment of Section 13 applications where previously there had been no prototypes. This entailed establishing a process for applications in which the relational, and often kanohi ki te kanohi, process was vital.

So, there was a lot of work with Section 13 in the early days and that involved

a lot of workshops in the community .... To really see the experience of social workers who that piece of legislation was written for. Supporting them with their applications for registration. Sometimes interviewing them just to have that extra bit of certainty before I wrote papers for the board on Section 13.

[Someone] would ring up and say "Jan, I need you to come and talk to this person because I need to work out whether I should be supporting her with Section 13, I'm just not quite sure about it. Can we have a conversation with her and just decide?" That ability and the flexibility that the Secretariat in the early days gave me to go out and have those conversations because they are our important social workers that we needed to get in. (J. Duke, personal communication, March 26, 2022)



Jan Duke with Karen Brown at the Section 13 Recognition Ceremony.

The importance of succeeding in a Section 13 application cannot be underestimated, and Jan's contribution to the mana of those who were successful was noted by several participants in this research. Karen Brown termed her the *Queen of Section 13*, saying that "anyone after her is a princess because it's certainly not the Queen" (K. Brown, personal communication, January 17, 2022).

Jan made a difference. To give us an opportunity to have that voice and that experience to demonstrate, we have the capacity and ability to do it. Sometimes people just need to understand, not everybody can run on the same track. (K. Brown, personal communication, January 17, 2022)

Karen recalled that a cluster of wāhine Māori had successfully been through the Section 13 process, but that there was no formal recognition by means of a certificate or celebration equivalent to that of a graduation.

I said to Jan, "the Registration Board doesn't even give a certificate to Section 13 people. We don't even get registered under the same cluster, we're the poor cousins ... I cannot tell my people that we're the poor cousins because we are not. So I'm going to get a Māori artist that's part of our whanau to create some certificates of achievement, I'll give you a copy for the Registration Board that they might consider doing it for all people, because it is bloody hard work, Jan." And then, when we organised, it was a big day for our Māori community, we asked Jan to come down and she came down and presented and we took photos of her presenting the Māori women with the tohu. I would say she's the best thing that has happened to us as Māori women here for Section 13 because all the women that have got the tohu here, most of us are section 13. (K. Brown, personal communication, January 17, 2022)

Wheturangi Walsh-Tapiata also observed Jan's commitment to Tangata Whenua and relational practice manifested in the Section 13 process:

We then brought together about twenty of our kaumatua who primarily we felt fitted the grandparenting clause and we wanted to put them through this process. Again, Jan walked alongside of us in terms of doing that whole piece of work. Why it's particularly special for me is that we put my mother through that grandparenting course - you know my mother has passed on, since that time, but Jan committed to forming a panel that would meet all of the requirements of the SWRB but was also a cultural panel and there were a whole group of us at that time, who were prepared to be on those panels. And I remember, they came to where I was based at that time and they went through a whole process and they announced that my mother was a competent social worker and therefore she became registered as competent, as a social worker under that grandparenting clause. And not only was that big for her, that actually it was really big for our iwi, because they did a whole big ceremony and process afterwards of acknowledging that we might have young ones coming through who have degrees, but actually, you are just as competent in this space, you know you're the cultural supervisor, you're the one that sits on all of our panels, the care protection panel on behalf of all of us. That was a really lovely phase of history, I think.  
(W. Walsh-Tapiata, personal communication, February 10, 2022)

### ***Bringing it together. The 2013 Conference***

In 2013, the SWRB sponsored its first (and only) conference for social work in Wellington. The theme for the Conference was "Protecting the Public-Enhancing the Profession" and was attended by over 200 social workers. There were over 51 papers

and three workshops presented, divided into themes of registration, practice, education and a special session on Māori models of education (Duke et al., 2013). This brought together the strands of all of Jan's roles in relation to education, professionalisation and registration. Jan saw this as one of her most important contributions.

I would like to add here that the 2013 conference that the Board sponsored was a great achievement. We had international keynote speakers (3), and an edited collection of refereed papers. It was a great example of how the Board enhanced the profession and the professionalism of social workers. Organising that conference was a big challenge, but the outcome was, I think the best social work conference in New Zealand in the past 20 years. (J. Duke, personal communication, March 26, 2022)

Whilst we can consider Jan's role with the SWRB as a Board member and as Deputy in a simple description of her contributions to milestones in education, policy, and mandatory registration, some of the characteristics of her practice transcend the different roles and outcomes. We now turn to some of the "hows" of Jan's contributions.

### **Jan's approach to getting things done**

Participants in this research highlighted the professional and personal processes that Jan used to ensure that the goals of the SWRB and of the profession were as integrated as possible. These are described below regarding her relational approach, her courage and determination, her advocacy for the profession, and her ability to balance directness with kindness, and knowledge with humility.

First and foremost, in participants' commentaries was Jan's use of a relational approach to raising challenges, addressing



issues and seeking resolution to difference. Jan considered relational practice to be crucial:

I think those stakeholder engagement relationships, that is what social work is about and that is what social work regulation should be about. Not about being legalistic, it is about maintaining the relationship so that you know the profession that you are working with. (J. Duke, personal communication, March 26, 2022)

Many of the changes brought about during Jan's time were contentious and involved holding and working through complex issues.

... those critical conversations, you end up valuing people when they don't shy away from it. You know, they come back time and time again with "can we try it this way?" You know that she never gave up. That is her dedication, actually, to SWRB and more broadly than that, to the profession of social work. (W. Walsh-Tapiata, personal communication, February 10, 2022)

As much as she would like us to not have 17 or 19 programmes [...], she was involved intimately with every one of them, she knew everybody that was involved in social work education, she would not step backwards in calling them when she had something to talk to them about. And she would also head a lot of things off at the pass and I think that that sort of wisdom, insight and relationship with the education sector was really important. (K. O'Donoghue, personal communication, February 20, 2022)

Jan's approachability made her an identifiable contact within the Wellington office of the SWRB. Wheturangi Walsh-Tapiata considered that face-to-face contact with Te Wānanga o Aotearoa students enabled ākonga to feel more confident about registration and competency processes, and contacting the SWRB with queries, because

'Aunty Jan' had visited and taught within their classes. Wheturangi recalled that these visits were extended to staff and out to community members as well (W. Walsh-Tapiata personal communication, February 10, 2022).

Toni Hocquard reflected that "when you actually look at all of the behaviours that Jan demonstrated, they're not nursing behaviours, they're social work behaviours" (T. Hocquard, personal communication, January 21, 2022). Sean McKinley engaged internationally with counterparts in other jurisdictions about common challenges for professional regulation, and considered that the SWRB successes were really down to the relationship building and the trust developed (T. Hocquard, personal communication, February 16, 2022).

Jan's relational approach came to the forefront in the implementation of competency and 'fit and proper' processes. The prime mandate of the SWRA is that of the protection of the public. The legislation enables competence to be assessed and processes for addressing poor practice to be developed and implemented. Through the Code of Conduct (SWRB, 2016) and a Competency process, the SWRB established the notion of 'fit and proper' that governed entry into social work programmes.

In her role, Jan frequently fielded questions from educators and students regarding the Board's position on criminal and health-related matters. Jan was often the sounding board for ethical questions, where a situation with (for example) a social worker or student's behaviour or past offending posed an ethical quandary that required careful discussion about a course of action, prior to any formal action by the SWRB.

Both of this article's authors held social work programme leader roles and can attest to how useful it was having someone in the Deputy role who could hold the tensions of the need for public protection with the social work values of potential for change



and recognising the value of people's life experience in their social work practice. Jan demonstrates this view:

There was one particular non-social work qualified person on the original Board who said that anybody who has a conviction should not be a social worker, to which my response was "well anybody of my generation who hasn't had a run in with the police over the anti-Vietnam demonstrations or the Springbok demonstrations or something, I would wonder about their commitment to social justice". (J. Duke, Personal communication, March 26, 2022)

This view was always backed by advice from Jan that people needed to be able to demonstrate their process of change, backed up by evidence and it was important to be able to guide students in developing their evidence portfolios from the beginning.

Mary Miles commented that conversations with Jan provided a 'sense of justice for the person who we were talking with, they felt they were fairly treated, that's the impression and feedback we got' (M. Miles, personal communication, May 26, 2022).

Relational practice is integral to whakawhanaungatanga and social work. Several participants spoke at length about Jan's ability to overcome suspicion and resistance from practitioners and educators, especially those whose identity and practice placed them in a (sometimes fraught) partnership with the SWRB as a Crown Entity.

She was really committed to making this work. But she knew that it wouldn't be easy because here's a whole lot of criteria from the SWRB. And we didn't always align in terms of wānanga. And so that meant a whole lot of real conflict, real and honest conversations, and I can tell you, to begin with people in the wānanga were highly critical of Jan, they did not see her as a critical friend. They saw her as the

blockage that we needed to get past. And 'ma wai ra?' [who will take responsibility, guide us?], over time, this is the change that occurs (W. Walsh-Tapiata, personal communication, February 10, 2022).

Several participants in this research told the stories of Jan's learning from her engagement with Tangata Whenua:

Jan used to contact me because, of course, anything that happened in the wānanga often required a powhiri. She would say "do I have to wear a black skirt?" because she didn't wear skirts and she only wore trousers. Over time, we saw Jan just come to accept that that's how it is when you're working in that space, and it's a really lovely little cultural example of how I think progressively over the years, she changed some, and we changed some, and I remember in a more recent event where I was with her, I didn't wear a skirt. She's "excuse me, how come you don't have your skirt on?" And that is an example of acceptance of our space and her acceptance into our space. (W. Walsh-Tapiata, personal communication, February 10, 2022)

Such reciprocity produced loyalty as well as traction for change. As Karen Brown put it, "she was and will always be supported by us, because she did what no other person would do in the Registration Board, black, white or orange. She gave us the time of day" (K. Brown, personal communication, January 17, 2022).

Nearly all the participants in this research also talked about Jan's dedication and determination and how much of her work was done behind the scenes and without recognition.

Every so often, there have been individuals who have a determination and they may not be the ones who are up front, but it is their determination that that keeps things moving. And that's never easy and they never get the credit,

... she could have gone at any time, 'now, I can't do this', you know. If standing there and holding the line isn't what we should all be about, then you know, I don't know. (T Hocquard, personal communication, January 21, 2022)

Wheturangi emphasised Jan's courageousness and determination in being an ally for Tangata Whenua in navigating the professionalisation project:

For or us as iwi Māori, we were really grateful to have her there. So at times when you can't have Māori, you have to have people that you know will stand up for us in the institution. And that's what she progressively became. I think that we were brave enough to have the brave conversations without diminishing the tangata of the person and trust, and that has to be the basis of not only a good relationship, but the process of getting us through some critical issues. She never gave up, that is her dedication, actually. (W. Walsh-Tapiata, personal communication, February 10, 2022)

All participants in this research indicated that Jan provided consistent advocacy for the profession of social work. Kieran O'Donoghue articulated this well:

She's really committed to that form of professional accountability to the public, but also that notion of being competent and recognised by the state for our social work expertise, knowledge and skills, and being accountable to a code of conduct. ... you could feel that there would be somebody in that corner that recognised the importance of professionalism. ... rather than the restriction of social workers. She was clearly positioned as somebody that was advocating for social work as a profession for the social workers and for the people that they were going to be working with ... (K. O'Donoghue, personal communication, February 20, 2022).

This advocacy demonstrated an important role that the profession should also take for itself:

I think that way when you think back to those days, social workers often talked about advocating for our clients and all the rest of it, but we were not so good at advocating for ourselves. And I think one of the things Jan brought was ... the possibility you could actually achieve so much more if you unified as a profession first. (T. Hocquard, personal communication, January 21, 2022)

In the authors' experience, there have been people who have felt intimidated by Jan and claims have sometimes been made that she "didn't suffer fools" easily. This at times presented in Jan's direct manner, that may not have been the "Kiwi" way. This directness was beneficial, as mentioned previously, and it was also very much balanced by kindness. This is exemplified by Kieran's comments about holding these traits together:

She was direct. I grew to love her directness because it was tied to her honesty and integrity. Jan is also an incredibly kind and thoughtful person. You don't see that first off. You see Jan's mission first off and Jan's professionalism and she has a purpose. So she's purpose driven. (K. O'Donoghue, personal communication, February 20, 2022)

Mary Miles commented about how she always loved going into the office when Jan was Deputy.

There was always a form of coffee in the morning to connect and [check if] everybody was okay ... And yeah if somebody's birthday, she'd be the one who would actually find the money for the cake and the coffee and she'd be the one to ensure that the environment we worked in was warm and connecting. (M. Miles, personal communication, May 26, 2022)

Several research participants commented on Jan's sharp intelligence and memory for detail, while also maintaining a very humble manner. "There was a complete lack of ego" (M. Miles, personal communication, May 26, 2022). Kieran O'Donoghue related that Jan was "an incredibly hard worker, and a very sharp mind. On panels [programme recognition], it was a challenge to be as prepared or more prepared than Jan (K. O'Donoghue, personal communication, February 20, 2022).

Sean McKinley commented:

... it was never about the position or the title ... It was very much, and I think that's probably what a lot of people didn't see, is that her investment and support of the profession, it was all based on the social work profession and getting the respect it deserved. (S. McKinley, personal communication, February 16, 2022)

We now move to some concluding sections, looking at Jan's own sense of her achievements and her thoughts moving on.

### Jan's views

We asked Jan what she thought her most important contribution had been and what her thoughts were regarding the future of the profession.

...the main contribution I have made to social work in the last years was working with the educators, being able to bring the educational lens as well as the professional practice lens helped with that. And I think you had to be a social worker, you couldn't do that if you were just an educator, you had to have social work as well as education in your background. I think it is that blend of social work and education that enabled us to move that forward to where it is today. (J. Duke, personal communication, March 26, 2022)

Jan finished at the Board on February 28, 2021. This was an auspicious day for social work in Aotearoa. Henceforth all New Zealand qualified social workers would be required to have completed an internationally recognised 4-year undergraduate or 2-year postgraduate social work qualification and become registered to practise. Jan's contribution to the profession was complete.

### Conclusion

This article has provided one story of the roles of Jan Duke in the professional, educational and regulatory developments of social work through the time of Jan's involvement with the Social Work Registration Board and Secretariat.

Jan used her knowledge, skills and values to ensure that the voice of the social work profession was well represented on social work's path towards mandatory registration. There were many tensions on this road. Lifting educational requirements, working with Tangata Whenua and the social work profession in a space where autonomy was being relinquished, and working with government to manoeuvre the many hurdles of legislation were all accomplished through Jan's thoughtful, respectful and relational manner. Through it all she was Jan:

She didn't do anything other than who she is, a very resourceful honest, available woman going well beyond the requirements of that role. (K. Brown, personal communication, January 17, 2022)

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### Note

1 A secretariat is the part of a legal entity that is in charge of the administration and clerical aspects of the running of the organisation.

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# Supporting choice, preventing harm: Social workers' knowledge gaps and ethical challenges with assisted dying in Aotearoa New Zealand

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## ABSTRACT

**INTRODUCTION:** This study is the first of its kind to explore social workers' perspectives on assisted dying following the legislation of the End of Life Choice Act 2019 in Aotearoa New Zealand. The topic is ethically complex and legally regulated, making social workers' perspectives particularly valuable since they may increasingly engage with people facing end-of-life decisions in settings like hospitals, hospices, aged care facilities, and palliative care programmes.

**METHOD:** Data were collected through an anonymous online qualitative survey from September to December 2023, capturing a diverse range of views from 120 social workers in Aotearoa New Zealand.

**FINDINGS:** Three themes were constructed from the data using Proudfoot's (2023) hybrid thematic coding strategy: 1) "some semblance of choice": navigating client autonomy, 2) "be careful": managing ethics, coercion and risk, and 3) "just my own research": limited knowledge and training. Participants noted the tension between upholding clients' rights to choose while being mindful of personal and external pressures that may influence decisions, especially among vulnerable groups. Participants also expressed a need for more precise guidelines and more training to handle the ethical dilemmas posed by assisted dying in a manner that is thoughtful, competent, and appropriate.

**IMPLICATIONS:** These findings suggest that social workers play a crucial role in mediating between client autonomy and protection. By understanding the ethical challenges and systemic barriers in assisted dying, social workers can better advocate for transparent policies and improved training, equipping them to provide better support to clients in their end-of-life decisions.

**Keywords:** Assisted dying, medically assisted dying, social work, MAiD

In 2019, the End-of-Life Choice Act (henceforth named 'the Act') was passed, granting permanent residents and citizens of Aotearoa New Zealand the right to end

their lives through medical intervention (NZ Government 2019). The Act's purpose is to "give persons who have a terminal illness and who meet certain criteria the option of

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lawfully requesting medical assistance to end their lives and to establish a lawful process for assisting eligible persons who exercise that option" (NZ Government, 2019). The New Zealand law requires the person accessing a medically assisted death to be over 18 years old, have a terminal illness that will end their life in under six months, be competent to make the decision and be experiencing physical suffering and defines a competent person as one who understands, retains, and communicates their knowledge and desire for an assisted death (Casey & Macleod, 2021; NZ Government, 2019). People with an intellectual impairment, such as those with dementia, as well as people who wish to access an assisted death due to mental health conditions or who are accessing it only due to being of advanced age, are not eligible for an assisted death (NZ Government, 2019).

Several terms for assisted death exist globally. For example, *medical assistance in dying* in Canada, *voluntary assisted death* in Australia, *assisted suicide*, *physician-assisted suicide*, and *euthanasia* (Blaschke et al., 2019; Hendry et al., 2013). Whilst the process can look different depending on how it is defined, the result remains the same: an eligible and voluntary person is given the right to choose when to end their life (Blaschke et al., 2019; Frey & Balmer, 2021; Hendry et al., 2013). An important caveat to the definition, as cited in Manson (2021), is the intention to end a person's life "with the primary intent of relieving pain and/or suffering at the person's voluntary, repeated, and fully informed request" (p. 27).

In Aotearoa New Zealand, *assisted dying* is the preferred name for the process, and it encapsulates both euthanasia and assisted suicide (Frey & Balmer, 2021; Manson, 2021). Euthanasia is defined as a medical professional intentionally ending the life of a voluntary participant through medical intervention (Feigin et al., 2019; Frey & Balmer, 2021). In comparison, *assisted suicide* is when a voluntary participant is

prescribed medication by a professional to self-administer to end their life (Blaschke et al., 2019; Csikai, 1999; Feigin et al., 2019). For this article, the authors subscribe to the terminology used within the Act and use the term *assisted dying* to refer to the process of legally hastening one's death through medical intervention, incorporating both physician and self-induced methods (Feigin et al., 2019; Frey & Balmer, 2021).

Discussions about palliative care, also known as end-of-life care, reflect an assumption that there is competition between palliative care and the introduction of assisted dying (Close et al., 2021; Fuscaldo et al., 2021). A study of healthcare workers ( $n = 1624$ ) in a regional health service in Victoria, Australia, revealed some participants' hesitancy towards the process, with one stating that palliative care should be a "priority over assisted dying" (Fuscaldo et al., 2021, p. 1639). Some palliative care practitioners have also expressed concerns that due to the legalisation of assisted dying, the public might conflate palliative care with assisted dying and would not want to be involved with them as they may "assume they will be killed off" (Blaschke et al., 2019, p. 565).

Another perspective put forth is the belief that the role of doctors is to heal and preserve life, and allowing them to assist in death could undermine the ethical principles of medicine (Casey & Macleod, 2021; Csikai, 1999; Digby et al., 2022). There is an argument that assisted dying erodes trust in the healthcare system, especially in cases where patients fear their doctors might suggest death as an option too readily. Some clinical staff share their concerns that better palliative care measures could change the mind of someone wanting to access an assisted death (Digby et al., 2022). For instance, Blaschke et al. (2019) quoted a medical professional who believed that their patients "don't have a true wish to die" (p. 565). Rather, they express this wish as a symptom of their condition (Casey & Macleod, 2021; Digby et al., 2022). This raises

the question of what quality of life looks like for those with a terminal illness and whether their wish to die is valid given that their symptoms cannot be relieved, and death for some is “viewed with relief” (Feigin, 2019, p. 100).

In Aotearoa New Zealand, the debate between palliative care and assisted dying is complicated by the stance of palliative care services, such as Hospice New Zealand, which practises conscientious objection toward providing assisted dying services, including administering or being present during the administration of a life-ending dose (Hospice Rotorua, 2020; Hospice Whanganui, n.d.). However, many hospice sites reaffirm their commitment to supporting all patients, including those seeking assisted death, despite their non-involvement in the process (Hospice Rotorua, 2020; Hospice Whanganui, n.d.).

Elsewhere, advocates are calling for a more collaborative approach to care, which looks like organisations working together, and an increase in funding and education to empower individuals to choose the best option for themselves (Blaschke et al., 2019; Chowns & Richardson, 2016). Organisations like Palliative Care Australia (2025) support this shift, affirming that their services remain accessible to everyone, including those considering assisted death (Close et al., 2021). Blaschke et al. (2019) asserted the necessity of recognising end-of-life care’s complexity.

Social workers are uniquely positioned to advocate for patient autonomy while navigating the ethical boundaries set by law, policy, and healthcare systems. However, there is scant literature on their role in supporting the assisted-dying process in Aotearoa New Zealand, and the evidence base is still in its infancy internationally. The authors of this article conducted an exploratory qualitative study that invited registered social workers to respond to a set of questions about their views on abortion, transgender rights and assisted dying. In all

three topics, there had been significant recent legislative change, and we were interested in social workers’ views and understandings of these changes. This article shares findings related specifically to social workers’ perspectives on assisted dying, focusing on their experiences, knowledge, and roles within this sensitive practice area. We begin by presenting the context for assisted dying in Aotearoa New Zealand, followed by a synthesis of the evidence on the social worker’s role in the practice. Then, the authors present and discuss findings from the study on how social workers perceive their role in supporting clients, the ethical challenges they face, and the training and systemic barriers that impact their capacity to engage in assisted dying cases.

### **The process for assisted death in Aotearoa New Zealand**

The process of accessing an assisted death takes time and involves interacting with multiple people (Fuscaldo et al., 2021). The person must formally request an assisted death from a medical professional who has a range of responsibilities, including informing the person of their prognosis in writing and the processes are outlined in government policy (NZ Government, 2019; Ministry of Health, 2021). In an attempt to safeguard potentially vulnerable people, Section 10 of the Act requires the individual to initiate a discussion about assisted death before it can be discussed by the doctor (Casey & Macleod, 2021). However, if the person is unsure of whom to make a formal request to, for instance, if they are uncomfortable asking their primary physician, Support and Consultation for End of Life New Zealand (SCENZ) can be contacted through phone or email (Ministry of Health, 2021; Te Whatu Ora, 2024). Two professionals must then sign off on the person’s wish for an assisted death: the attending medical practitioner and an independent medical practitioner). They do this by assessing the person, which involves speaking to other health professionals involved in the person’s care (Ministry of

Health, 2021). If either practitioner is unsure of the person's competence, a psychiatrist must perform their own assessment. Casey and Macleod (2021) discussed the importance of attributing competence, which includes assessing any potential masking of mental deficits and recognising any external social or emotional pressures. If these two or three professionals believe that the person requesting an assisted death is appropriately entitled and competent to make the decision, they will grant them eligibility. The person can then choose the date and time they wish to die, and they must also select which method they would prefer: to self-ingest or trigger an intravenous delivery or for a medical practitioner to trigger ingestion of the medication through a tube or administer an injection. At any time, the person can withdraw consent for the medication or postpone the administration by up to six months. The process will also immediately stop if the person's eligibility changes or if it is thought that they are under any external pressure (Ministry of Health, 2021; Te Whatu Ora, 2024).

### **Assisted dying and Te Tiriti o Waitangi**

In the context of Aotearoa New Zealand, it is notable that the legislation does not refer to te Tiriti o Waitangi (hereafter te Tiriti). In an article published in 2020, Lee (2020) argued that for Māori, there are major concerns, notably that the Act (2019) is not compliant with te Tiriti: "It contains no clause expressly providing for te Tiriti concerns, let alone any mention of te Tiriti. Secondly, the Act does not even comply with Treaty principles, which set lower standards than te Tiriti itself" (p. 147). Furthermore, Lee noted many concerns that the Act is "inconsistent with tikanga Māori and the value that Māori place on the collective" (2020, p. 147). Lee set out the argument that Te Tiriti would require consideration of such matters as health inequalities and the disproportionate burden of ill-health amongst Māori. By excluding reference to Te Tiriti, the legislation fails

to ensure the responsibility of the Crown to reduce such inequalities. Lee also cited Malpas et al. (2017) regarding major concerns about the concept of assisted dying raised by those making submissions during the parliamentary process: "death and the processes surrounding death are tapu, one of the most sacred concepts in tikanga Māori" (Lee, 2020, p. 153) as death is influenced by connections to whānau, ancestors and the relationship with the whenua. In reporting a qualitative study with kaumātua, Malpas et al. sum up their core concerns:

... the dying process is imbued with cultural significance that draws centrally on an understanding of wairua and connections with the spiritual world, the protective cloak of whānau in supporting members at the end of life and sharing in the decision-making and the importance of customs and of practice to provide security and safety for everyone involved during the dying process. (2017, p. 451)

While it is early days for the legislation, it is under review at the time of writing, and we anticipate further research that will clarify what major te Tiriti and cultural issues will be faced in future in relation to assisted dying. A recently published study protocol published by Young et al. (2024) reported a plan to undertake qualitative research to explore the experiences of stakeholders in Aotearoa New Zealand, including potential service users, families, providers and those who object to assisted dying, health service leaders, and Māori community members. This study will bring insights for future research on outcomes for Māori.

### **How social workers can help with assisted dying**

In the medical world, social worker's scope of practice enables them to move beyond the medical environment and centre the holistic lives of their patients (Bravo et al., 2023; Foster & Beddoe, 2012; Giles, 2016; Pockett & Beddoe, 2015; Pockett et al., 2010). Social

workers bring an essential perspective to medical settings, with the ability to assess a patient's emotional and social wellbeing. Pockett and Beddoe (2015) explained how social workers use psychosocial assessments to understand the context of a patient's admission and support them and "their families as they traverse the inpatient pathway" (p. 38). Psychosocial assessments lay the groundwork for comprehensive, patient-centred care by entrusting them to provide an accurate account of their lives and establish goals of care (Antifaef, 2019; Head et al., 2019). The unique positioning of social work in the medical environment, as addressing physical health and broader psychosocial needs, is widely depicted in literature (Bravo et al., 2023; Norton & Miller, 2012; Pockett & Beddoe, 2015). Bravo et al. (2023) shared the moral navigating that social workers facilitate with patients, giving examples of social workers assisting people in making decisions informed by medical knowledge and balanced by their values. This effort to gain an understanding of the patient's personal beliefs and values ultimately promotes a more collaborative decision-making process surrounding their medical care (Wang et al., 2017), and thus, social work can make a meaningful contribution to care in services such as assisted dying.

The role of a social worker can be challenging to define due to the breadth of the work and their use of unseen emotionally holistic care coupled with more recognisable task-based focused practice (Cootes et al., 2022; Head et al., 2019). Social workers in medicalised settings often find themselves balancing the hierarchical standing of medical practice within the context of the person's life, making space for the patient's values, social supports, and circumstances (Antifaef, 2019; Bravo et al., 2023; Cootes et al., 2022; Head et al., 2019; Pockett et al., 2010). Beresford et al. (2008) captured this in the words of a patient they interviewed about their experiences with social work: "The thing about any medical intervention . . . is it's something

[that] is done to you . . . If you are going through a process of counselling, it's done with you . . . that's the difference" (p. 1397). This distinction emphasises the collaborative nature of social work, which seeks to empower patients and engage them as active participants in their care.

The profession of social work has long been an advocate for patient-centred holistic care, as shown by social workers' ability to fluidly step in to support a person at any stage of their medical journey (Giles, 2016). Research highlights the scope of social workers' practice, showing their ability to adapt across different phases of patient care and displaying the ability to address ongoing or sudden emotional and social concerns. For example, social workers are frequently introduced near the end of a patient's admission for discharge planning, ensuring the individual can maintain their physical health in their home environment (Foster & Beddoe, 2012; Giles, 2016; Pockett et al., 2010; Wang et al., 2017). The importance of social work involvement from early on in a patient's admission can be argued, as earlier integration of social work in patient care allows practitioners to address psychosocial factors that could affect a patient's treatment and recovery, ultimately creating a more personal care plan (Giles, 2016). Social workers are often the "glue" (Cootes et al., 2022, p. 264), connecting the members of the multidisciplinary teams.

In a 3-year qualitative study conducted in England by Beresford et al. (2008) exploring people's experiences with social workers in an end-of-life situation ( $n = 111$ ), the researchers uncovered valuable insight into the impact social workers have on end-of-life care by interviewing people who were dying ( $n = 52$ ) and people who had lost friends and family ( $n = 61$ ). Interviewees spoke of their social worker doing what they felt was above and beyond for them, with one person stating that "my children regard [the social worker] as being one of the family. That might not be an entirely



professional way to regard her, but none the less that's the kind of impact it's had" (Beresford et al., 2008, p. 1934). Antifaeff (2019) recounted a similar connection to a patient, but from a social work perspective, when they spoke of their professional experience working with a woman and her family as she underwent an assisted death, describing how they supported Jackie and her family as they navigated Jackie's assisted death, providing a safe, nonjudgemental space to talk. Researchers stress the importance of the social worker's rapport-building skills in end-of-life care, as death is emotionally challenging for patients and families (Antifaeff, 2019; Beresford et al., 2008; Foster & Beddoe, 2012). Beresford et al. (2008) also signified that social workers can comfort their patients by breaking through the barrier of taboo or sensitive subjects while maintaining professional distance. Interviewees also valued the social worker as someone they could confide in and who could help them navigate the medical setting (Beresford et al., 2008; Head et al., 2019).

Researchers have raised concerns about the potential blurred boundaries between patients and their social workers due to the nature of their relationship (Beresford et al., 2008; Bravo et al., 2023). From an outside perspective, social workers balance on a fine line between professional and friend due to the emotional support they provide; however, literature affirms that these relationships should be carefully maintained through a professional framework of social work codes and boundaries (Antifaeff, 2019; Beresford et al., 2008; Head et al., 2019). From the patient's and their family's viewpoint, Beresford et al. (2008) quelled these concerns, stating that their interviewees knew the limits of their relationship with their social worker and understood the professional barriers.

Understanding social workers' perspectives on navigating relationships within the context of assisted death is complex, mainly due to the lack of literature that focuses on their real-life experiences in this area. In a

Canadian study of social workers involved in assisted death ( $n = 141$ ), Bravo et al. (2023) found that the majority reported experiencing medium ( $n = 60$ ) to high ( $n = 58$ ) emotional intensity following an assisted death. This raises the question of whether the impact of a patient's death on social workers stems from their personal feelings about death, the depth of their relationship with the patient, or the nature of the event itself. A review of the literature highlights the importance of acknowledging the emotional labour a social worker invests and the toll that their patient's medically assisted death can take as a part of the natural grieving process (Bravo et al., 2023). In a study carried out by Digby et al. (2022) of clinical staff in Australia ( $n = 382$ ), a large majority of respondents were worried about the emotional toll that they would face if they were to be involved in an assisted-dying case. In fact, 88 respondents in Bravo et al.'s (2023) study who had experienced an assisted death agreed with the statement that they felt like they needed to take a break after the death of their patient.

Interestingly, the study found a correlation between practitioners who rated themselves as more competent and those who felt they needed time off after a patient's death. Bravo et al. (2023) hypothesised that this may be because these practitioners have greater emotional awareness or a more informed understanding of the impact of death. It is also worth considering whether having a higher level of competence allows for more genuine self-reflection, leading these practitioners to recognise the need to address their grief.

The relationships social workers build extend beyond patients to include the families and support networks of those seeking an assisted death (Antifaeff, 2019; Wang et al., 2017). According to research by Antifaeff (2019) and Head et al. (2019), a social worker's role with families can range from providing practical information to creating a space to hold emotions. Developing



connections with patients' loved ones is recognised by researchers (Bravo et al., 2023; Feigin, 2019; Head et al., 2019) as a standard part of the social work role, with academics acknowledging the impact a patient's support system has on their holistic health. Furthermore, Antifaef (2019) asserted that an essential aspect of the psychosocial assessment process is considering how the patient's family and friends will be impacted by the patient pursuing an assisted death. Social workers frequently participate in family meetings, discussing the patient's wishes and needs, allowing the family to explore how best to support the patient and themselves (Antifaef, 2019; Bravo et al., 2023). Providing patient's families with space to navigate emotional distress due to grief is a crucial part of the social work role (Digby et al., 2022).

The scope of social work practice ensures practitioners reflect on micro and macro levels of a person's experiences, considering not only their present needs but also the impact broader societal complexities have on their situation (Csikai, 1999; Lilley & Reid, 2023; Manson, 2021). This holistic approach equips social workers to assess

how systemic factors shape individual, family, and community challenges. Lilley and Reid (2023) explained how social workers often have to "consider how inequity issues, and the ability for a person, family, whānau or community to cope and adapt during adversity, is impacted by societal systems that either detrimentally affect, or positively empower, autonomy and choice" (pp. 49–50). In relation to detrimental impacts on a person's life, these can look like services neglecting cultural needs, organisational and government policies being unrepresentative of the population, and scarce resources or funding issues (Csikai, 1999; Lilley & Reid, 2023). Research points out the challenges marginalised groups face, citing it as an equity issue (Lilley & Reid, 2023; Manson, 2021). Regarding the need for services to be culturally responsive, Lilley and Reid (2023) articulated how "despite the universality of death, it does not necessarily provoke the same responses and accompanying expressions across both individuals and cultures" (p. 18), underscoring the need for services to be equitable and responsive to people's unique circumstances and the nuances of providing care.

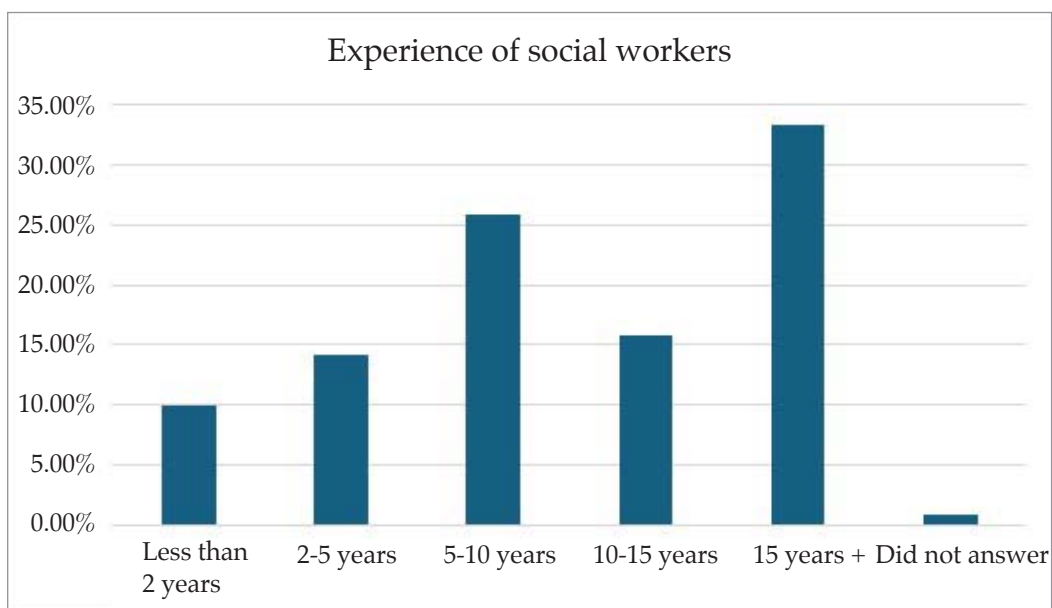


Figure 1. Participants Years of Experience as a Social Worker

## Method

### Study design

This study used an exploratory, descriptive, qualitative approach, using an online qualitative questionnaire (Braun et al., 2021) to capture the perspectives of social workers nationwide on their responses to assisted dying. Braun et al. (2021) discussed the advantages of using qualitative surveys with open-ended questions to elicit responses in the participant's own words, describing what is important to them. It is also noted that the anonymity offered by an online survey is useful in sensitive research topics where "issues of 'face' and social desirability might strongly impact face-to-face data collection" (Braun et al., 2021, p. 645). While our participants were not invited to provide personal history, some chose to do so, and others reacted to the topic in ways that they might not have in a face-to-face interview with a social work researcher.

### Participants

We recruited participants via a distributed online advertisement placed within a regular e-newsletter of the professional social work association Aotearoa New Zealand Association of Social Workers (ANZASW) and via private, professional social media groups. The survey was live for 3 months, from September to December 2023. The qualitative survey consisted of open-ended questions designed to capture participants' views on ethical challenges, knowledge, training, and professional roles in assisted dying.

A total of 120 social workers responded to the survey. Age and years of experience were collected via ranged buckets.

Figure 1 shows the distribution of social work experience among the respondents in years. The data suggest that a substantial portion of participants have long-term social work experience.

Gender and ethnicity demographic data were also self-described and, therefore, had to be aggregated by the researchers. The study's gender distribution is predominantly female (90.8%) compared to 85% in the workforce (Social Workers Registration Board, 2023). Male participants comprise only (8.3%) of the study compared to 15% in the workforce (0.9% did not disclose their gender). This imbalance could reflect survey participation and social media use biases.

The study has a lower percentage of Māori (11.7%) and Pasifika (1.6%) participants than their representation in the workforce (23% for Māori and 11% for Pasifika) (see Table 3). This underrepresentation may limit the study's cultural diversity and the extent to which it reflects the experiences of these ethnic groups.

### Data collection

The survey was created on Qualtrics gathering limited demographic information and included ten open-ended questions covering the following areas:

- Knowledge of assisted dying legislation
- Personal beliefs about assisted dying

Table 1. Age Demographics of Survey Participants

Range (years)	Study (%)	New Zealand Social Work Workforce (%)
20 – 29	12.5	7
30 – 39	30.0	19
40 – 49	20.8	24
50 – 59	21.7	27
60+	15.0	23

Table 3. Aggregated Ethnicity Data of Survey Participants

Ethnicity	Study (%)	New Zealand Social Work Workforce (%)
Pākehā/New Zealand European	78.1	67
Māori	11.7	23
Pasifika	1.6	11
Asian	3.9	9
MELAA (Middle Eastern, Latin American, African)	2.3	2
Other Ethnicity	2.3	2

- Role in supporting clients
- Ethical challenges
- Experience with training
- Need for further training
- Perception of coercion
- Navigation of personal vs. professional boundaries
- Client autonomy
- Systemic issues

multiple rounds of coding and refinement—shared initial themes and then reached a consensus on naming final themes, choice of quotes and agreement on the overall analytic narrative. Ethics approval was obtained from the University of Auckland Human Participants Ethics Committee, ensuring adherence to ethical standards, including participant anonymity and informed consent.

### Analysis

A hybrid thematic analysis was conducted following Proudfoot's (2023) inductive–deductive coding strategy, which emphasises researcher subjectivity, active engagement with the data, and an iterative coding process using both inductive (where researchers use participants' words to construct themes from the data) and deductive (applying pre-existing theories and concepts reflecting a critical perspective on power dynamics and systemic issues affecting social workers' roles in assisted dying contexts to organise and interpret the data) coding approaches. This approach involved a discussion of the researcher's positions on assisted dying, familiarisation with the data, generating codes, constructing initial themes, reviewing and refining themes, defining themes clearly, and producing the final analysis. Before looking at the data, the reflexive discussions revealed that all researchers were aware and supportive of the existing legislation; the lead author also had a personal experience, having gone through the assisted dying process with her father in Canada. All researchers read the data—engaging in

### Findings and discussion

Proudfoot's (2023) inductive–deductive coding strategy was chosen to allow predefined ethical concepts (e.g., autonomy, harm) to guide the analysis while still permitting unanticipated themes about social workers' experiences to surface. As such, our reporting of themes is linked to relevant existing literature.

#### ***“Some semblance of choice”: Navigating client autonomy***

Autonomy was central to social workers' accounts, reflecting a broader commitment to client-centred care. While participants primarily supported autonomy in end-of-life decisions, there was an undercurrent of frustration and being overwhelmed with systemic barriers and regulatory frameworks that still restrict genuine choice and autonomy with “lots of hoops to jump”. Such responses echo Frey and Balmer's (2021) assertion that legal processes, while intended to ensure safe and voluntary decisions, can inadvertently complicate access. While the Act (NZ Government, 2019) aims to

protect patient choice, many participants thought its procedural requirements could restrict access, especially for those with limited resources or facing complex health conditions. Several participants suggested that the process was not only complicated but also constrained by broader structural issues, such as limited healthcare resources and policy restrictions that shape who can access assisted dying. One participant commented, “I am not confident [however] that there is adequate infrastructure”, demonstrating a tension between the promise of the legislation and the practical realities shaped by systemic factors, such as inequitable access to healthcare and information, which may further marginalise certain groups. This was a particular concern recognised by one participant who expressed concern that there was not enough consultation with Māori during the legislation development.

Whilst expressing support for assisted dying, some participants raised concerns about systemic constraints of the overall health system and articulated worries that people might choose assisted dying in the absence of access to appropriate physical and mental health care. One participant commented, “I see a major problem when someone wants to make this choice due to unmet health and wellbeing needs due to under-resourcing and gaps in the system.” Another participant noted that they would like to ensure that “it’s not our health system letting them down” by not providing “good pain relief”, suggesting that access to good palliative care is currently inadequate, leading to the demand for assisted dying. These responses highlight the strains on our health system and unease about assisted dying being considered a valid option for people who are not able to access adequate healthcare.

Participants frequently described their roles as advocates for clients’ choices and gatekeepers within a legally constrained environment, navigating the balance between client autonomy and control. One participant

succinctly said, “We’re often the link between medical teams and clients”, reflecting Giles’s (2016) observation of the social worker as an intermediary in medical settings. However, the same practitioner also noted that “it’s hard to know where we stand legally” This ambiguity was a recurring challenge, with another social worker observing that “It’s unclear what our role is under the End of Life Choice Act.”

A need for clarity may be especially important when personal beliefs come into play. One respondent stated, “I want to support clients fully, but sometimes my own beliefs make it difficult.” This aligns with the broader professional challenge of managing power relations, as another participant noted, “I wouldn’t disclose my personal views in a professional setting,” reflecting an effort to centre the client while navigating socio-legal constraints. Such social workers felt caught between navigating personal beliefs and professional duties (Norton & Miller, 2012). It is possible that clear guidelines for social workers working in this space may help to reduce uncertainty and serve to protect practitioner wellbeing and reduce personal distress (Cootes et al., 2022; Digby et al., 2022).

### ***“Be careful”: Managing ethics, coercion, and risk***

The ethical dilemmas faced by social workers were closely linked to concerns about coercion and negotiating risk extending beyond individual cases to reflect broader societal anxieties about who is deemed “fit” to die, implying concerns with broader discourses about vulnerable, oppressed communities. This was expressed through the notion of needing to “be careful”. Worries about coercion, particularly within families or in socio-economically disadvantaged contexts, hint at the socio-political forces that influence assisted dying decisions. One participant observed: “I’m concerned about who accesses this and possible coercion from family members, especially in the case of

inheritance and our ageist society". Another participant emphasised the need for robust safeguards and stated, "I wouldn't want my daughter-in-law advocating for me in this respect." These comments raise ethical concerns about individual cases and signal anxieties about structural inequalities, such as financial pressure or familial dynamics, potentially driving decisions. Such comments align with researchers who previously shared concerns for those impacted by such inequalities (Blaschke et al., 2019; Casey & Macleod, 2021). These comments potentially speak to a lack of understanding about the legislative safeguards currently in place. However, participants acknowledged that such assessments are inherently complex, often requiring a nuanced understanding of clients' cultural and familial contexts, echoing Lilley and Reid's (2023) call for culturally responsive care.

Participants worried about any move to extend eligibility to those with disabilities and mental health conditions: "It's a slippery slope . . . for the intellectually disabled and mentally ill." Such concerns reflect a broader debate about the ethical boundaries of assisted dying and are not simply about the process but speak to how power operates in healthcare settings and society more broadly, where vulnerable groups might be more susceptible to overt or subtle pressure (Mathison, 2020; Winnington & MacLeod, 2020; Winnington et al., 2018). These apprehensions centre around the ethical implications of potential vulnerabilities created for intellectually disabled and mentally ill populations. Scholars such as Pullman (2023) and Downie and Schuklenk (2021) critiqued the rapid liberalisation of Canada's Medical Assistance in Dying (MAiD) legislation, highlighting the comparative looseness of Canadian criteria relative to more conservative jurisdictions, such as California in America. They asserted that this liberalisation has led to significantly higher rates of assisted deaths in Canada, prompting concerns about inadequate safeguards for vulnerable individuals.

Fear about the use of assisted dying with such groups was also highlighted by a participant in our study who stated, "I am concerned re the possibility of this being the thin end of the wedge" and another who "would be deeply concerned if people experiencing chronic mental health difficulties could access assisted dying". Such concerns are inherently linked to socio-political discussions about the differential value of some lives over others (Butler, 2020) and whose suffering is deemed worthy of intervention and whose suffering is seen as justifying death. Downie and Schuklenk (2021) underscored ethical tensions within MAiD policies, stressing the critical balance between patient autonomy and social justice. They argued that insufficient social support, inadequate healthcare access, and broader systemic inadequacies, including poverty, might indirectly pressure vulnerable populations toward MAiD as a solution to otherwise preventable social suffering. Winnington and MacLeod (2020) further stressed these ethical concerns by examining societal and healthcare power dynamics, indicating the risk that vulnerable populations may feel implicitly coerced into choosing MAiD. Their analysis complemented Pullman's (2023) observation that legislative and procedural expansions could inadvertently accelerate Canada's descent along the slippery slope.

In the context of our Aotearoa New Zealand-based findings, social workers similarly expressed cautious support for assisted dying in specific contexts, such as terminal illness or degenerative diseases. Statements such as it is "fine [about it] in circumstances of terminal illness" and "I support it [for] a person facing a degenerative disease" all reflect a need to "be careful" to avoid a slippery slope of eligibility to those with mental health challenges and disabilities. Indeed, for some, *care* contrasted with an expressed need for unbearable suffering to be expressed and experienced before assisted dying could be considered: "If a person is absolutely terminal and in



severe pain, then I have no issue with them following this process." Such responses pose questions about what might be considered to be 'enough' pain and perhaps reflect an underlying ethos by some that suffering is almost always worth going through. The findings may also point toward the necessity of precise legislative safeguards and comprehensive social supports tailored to Aotearoa New Zealand's unique cultural and societal landscape to prevent unintended harms and ensure genuinely autonomous decision-making in assisted-dying cases.

### ***"Just my own research": Limited knowledge and training***

Many social workers described limited formal training in assisted dying, often having to rely on self-study: their "own research". These responses suggested that social worker knowledge about assisted dying was very much down to individual interest and engagement and raised concerns about the practitioner's ability to provide support (Frey & Balmer, 2021). One participant remarked, "I've read about it but haven't received formal education," potentially indicating how social workers employ informal education methods to supplement practice. Indeed, one participant shared, "I have no formal education around this. My information is from media and online reading," while another noted, "Some brief training at uni . . . but that's it." One social worker stated this lack of structured education was a common concern: "There's no standardised training, which makes it hard to know what's best practice." While many participants indicate personal resourcefulness this also points to a broader conversation about the knowledge(s) informing social worker practice and potential for mis- and dis-information to inform practice. While less explicit in this data, incorrect assumptions about legislation and practice were something we observed in responses to questions about abortion and transgender rights in the broader research project. Such concerns speak to broader

conversations about a lack of supported ongoing training and education for social workers in Aotearoa New Zealand, past their qualifying degree (Beddoe & Stanfield, 2022) and raise concerns about how practitioners remain current when legislation and policies change.

Participants wanted formal education, with one saying, "I would be interested in receiving training in this area," and another acknowledging, "I have had very little training, education, or supervision on assisted dying." One respondent admitted this gap affected their confidence, stating, "We are expected to guide clients through this, but there's little guidance for us." Another added, "It's something I know little about, so I would need to make that clear to clients." Antifaef's (2019) observation that without comprehensive education, social workers may struggle to offer holistic care that genuinely considers the client's needs seems especially relevant to these practitioner concerns.

A few respondents had some exposure through workplace discussions, webinars, or in-service training, but many reported minimal to no training on the topic. A notable desire among respondents was more comprehensive training, specifically around the legal framework and criteria for assisted dying, ethical considerations, the social work role in supporting clients, and best practices for supporting clients and their families in assisted-dying cases. These responses point to a clear need for more targeted training, as the current lack of formal preparation limits social workers' ability to effectively support clients. Further, this education and training gap could reinforce medical hierarchies and sideline social work perspectives in end-of-life care (Bravo et al., 2023).

### **Strengths and limitations**

This study is the first in social work in Aotearoa to explore social work views on

the recent development of an assisted dying service under the End of Life Act. It provides a useful snapshot, revealing a range of views and illuminating social work concerns with rights and wellbeing.

However, a key limitation of this study is its reliance on self-reported data, which may reflect social desirability bias, as participants could have tailored their responses to align with perceived professional norms despite the anonymity offered by the data-collection tool and the express request for personal views in some questions. Social desirability bias may have influenced participants in our study to align their responses with professional norms or values, potentially leading them to downplay personal beliefs or concerns. Despite assurances of anonymity, participants may have self-censored, especially given the ethically sensitive and professionally regulated nature of assisted dying (Althubaiti, 2016; Larson, 2019). The sample was limited to social workers who chose to participate, potentially skewing the results towards those who are more confident or experienced in discussing assisted dying. This self-selection bias could mean that the findings do not fully capture the perspectives of those less familiar or less comfortable with the topic. Additionally, the qualitative nature of this study, while providing in-depth insights, limits the generalisability of the findings to the broader social work profession in New Zealand. Further research with a larger, more diverse sample (especially including Māori and Pasifika social workers), including quantitative measures, could help verify and expand on these results.

## Conclusion

Participants' uncertainty about their legal and professional role under the Act is a critical finding. Some respondents reported feeling like intermediaries between medical teams and clients yet also expressed confusion about their legal standing. This aspect of role ambiguity

aligns with previous studies about the social work role in healthcare which highlight how the role is underdefined compared to other professions (Giles, 2016; Vungkhanching & Tonsing, 2016). The ANZASW Position Statement on the EoLCA also acknowledges this ambiguity, recognising that while social workers have an important role in advocating for client rights and navigating ethical complexities, their specific responsibilities under the Act require further clarity (ANZASW, 2021). This ambiguity suggests that clearer practice guidelines and policy direction are needed to ensure that social workers feel equipped to support clients while maintaining ethical and legal integrity. A step that may be helpful in addressing this ambiguity may be for professional bodies such as the ANZASW to work alongside policymakers to develop a specific scope of practice for social workers involved in assisted death.

Additionally, the lack of formal training was a recurring concern among participants. With many social workers indicating that much of their knowledge came from personal research, the media or informal discussions, this raises important questions about how social workers remain informed in the context of a rapidly evolving legal and ethical landscape. Such findings align with international calls for standardised education on assisted dying with these studies also highlighting that without this, social workers risk being sidelined in the provision of assisted dying services. (Bravo et al., 2023) The ANZASW Position Statement affirms that ongoing education is critical to ensure social workers fulfil their responsibilities working in this field of practice and emphasises the responsibility employers have in providing access to this (ANZASW, 2021). The development of standardised training programmes which cover topics such as legal obligations, ethical considerations, and cultural factors could be achieved through partnerships between the ANZASW, universities, and healthcare providers ensuring that new graduates and

experienced practitioners receive appropriate education.

Beyond formal education, there is also a need for ongoing professional development and supervision whereby social workers are able to navigate the ethical complexities of assisted dying. This is particularly pertinent when personal views and values conflict with professional and legal obligations. This echoes the call from the ANZASW (2021) which emphasised the responsibility that professional supervisors have in being familiar with the Act and how it operates, as well as the organisational policy for assisted dying for each social worker they supervise.

In practice, social workers should keep a client-centred focus, which respects the client's dignity and right to choose (Bravo et al., 2023). It is essential to create a space where clients and their families feel they can discuss end-of-life decisions without fear of judgment. Social workers hold a dual responsibility: first, to safeguard individual clients' ability to make informed, uncoerced decisions, and second, to address systemic barriers that may restrict marginalised groups' access to assisted dying. This means that, while ensuring each client's choice is fully voluntary and informed, social workers also advocate at a structural level to promote equitable access for all. Social workers' on-the-ground experience offers a valuable perspective that can inform fairer healthcare funding, improved access, and better implementation of the Act. Engaging in policy reform efforts can help ensure assisted dying is applied more equitably across different communities in Aotearoa New Zealand. However, social workers also need opportunities to actively participate in these processes, including platforms for advocacy, collaboration with policymakers, and resources to support their involvement in leading out inclusive practices.

Social workers must navigate a delicate balance between advocating for client autonomy, navigating personal beliefs, and addressing potential risks like coercion, all while working

with limited formal training and ambiguous professional guidelines for assisted dying. Our analysis suggests that social workers may need better training or further exposure to the Act and clearer role definitions to provide consistent support in this ethically contentious area. Enhancing professional development and policy clarity would benefit practitioners and their clients, making end-of-life care more equitable and respectful of both rights and needs. Such professional development would also serve to protect social worker wellbeing in what is considered by many to be a sensitive area of practice. Given the *te Tiriti* concerns briefly outlined earlier in this article, further research is needed to illuminate outcomes for *tangata whenua* and related professional development will need to be ongoing.

These issues are relevant to social workers, policymakers, healthcare organisations, and professional bodies in Aotearoa New Zealand and beyond, where there is still a paucity of research on social workers' responses to the issue of assisted dying. Improving training and policy frameworks would enable social workers to offer more ethical, client-centred care and uphold the intentions of the Act more effectively. The profession and social workers can take these steps to move toward a more just and supportive approach to end-of-life care in Aotearoa New Zealand, ensuring that *te Tiriti* obligations and the rights and needs of vulnerable populations are adequately protected while respecting individual choice.

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# Student strategies for surviving social work education in Aotearoa New Zealand

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## ABSTRACT

**INTRODUCTION:** There is a growing literature reporting on the stressors facing social work students as they move through their social work education. This article reports on part of a study of student hardship that asked Aotearoa New Zealand social work students about the strategies that they utilised to maintain their wellbeing, and to offer their advice to future students.

**METHOD:** A mixed methods study incorporating a survey ( $N = 353$ ) and 31 semi-structured interviews was conducted in Aotearoa New Zealand in 2019. Participants in the study were then current students or new graduates in their first two years of practice at the time the research was conducted.

**FINDINGS:** Student participants reported various strategies used to support their progress through their social work study. The survey results indicated a strong reliance on relational supports with peers, family/whānau and friends. Qualitative themes were developed, including: individual, relational, institutional, cultural and societal supports reported by the students. Participant advice to future students added an intrapersonal attribute of self-knowledge.

**CONCLUSIONS:** While it is important to learn from the students about the strategies and supports that were useful in sustaining them and enhancing their resilience, the importance of considering structural challenges and the need to resist neoliberal policies and conditions are also critical.

**Keywords:** Social work students, wellbeing, resilience, resistance, social work education

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Students in Aotearoa New Zealand tertiary education face increasing challenges, as where once tertiary education was heavily subsidised by the state, neoliberal shifts have reduced government commitment to funding post-secondary education (Roper, 2018). This shift, in concert with rising costs of living, and the widening wealth gap have meant that many students are forced to work to subsidise themselves and their families, while undertaking their studies, with some students engaged in concurrent full-time work, full-time study

and family responsibilities. For students enrolled in professional programmes, such as social work, where a critical component of the learning is done through practicum, students are faced with either not working and suffering significant economic hardship, or in working in addition to their full-time placements (which are usually carried out in a 9am–5pm, Monday–Fridays structure), resulting in no time for themselves and their families, with a major negative impact upon their own wellbeing.

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These conditions have been explored in recent research projects in Aotearoa New Zealand and the impact on students has been reported (Beddoe et al., 2023; Cox et al., 2022; Meadows et al., 2020). This article follows from a recently published article (Beddoe et al., 2024) within the same research project that focused on the challenges to personal, relational, and social wellbeing reported by participants in response to questions about their social wellbeing. Drawing on the same dataset, we used a strengths-based lens to identify what this same group of students identified they had done to maintain their wellbeing while studying. We also considered advice they offered to future social work students.

This article first considers some of the extant literature about student coping, and resilience. The methodology of the study and data analysis will be provided, followed by quantitative results of the research survey, and then a thematic presentation of the qualitative data.

### **Background and literature review**

The hardships of social work students have been documented in detail in Beddoe et al. (2024) as well as others (Bartley et al., 2024; Beddoe et al., 2023; Cox et al., 2022; Hulme-Moir et al., 2022; Meadows et al., 2020). Students, however, have been found to utilise a range of strategies to survive and manage challenging impacts on their social, spiritual, mental and physical wellbeing, and have recommendations for future social work students to prepare for wellbeing stress. We begin by briefly reviewing previous research that reports on strategies utilised to bolster or maintain social work student wellbeing.

### ***Wellbeing and student strategies***

Both adaptive and maladaptive coping strategies used by social work students have been noted in several studies (Collins, 2008; Collins et al., 2010; Yun et al., 2019). Adaptive coping strategies involve both

informal and formal social support and include family, friends, peers and religion or spirituality. Having personal techniques for active coping and positive framing include exercise (Wiese et al., 2018), spirituality (Hope et al., 2014) and managing sleep patterns (Pilcher & Ott, 1998). Butler et al. (2019) considered six domains of self-care (physical, professional, relational, emotional, psychological, and spiritual), arguing that attention to the full range of life domains is required in maintain wellbeing. The Aotearoa New Zealand Whare Tapa Whā wellbeing model developed by Durie (1998), described wellbeing as a house requiring balance between the domains depicted as walls, founded on connection to the whenua/land, and also supports the importance of consideration of a holistic perspective in maintain wellbeing and is commonly used in Aotearoa.

Formal support includes supervision, assistance from line management, lecturers, tutors, and student peers and counselling, although many students have also reported not engaging in formal counselling for fear of being judged (Bartley et al., 2024). Some behavioural and mental disengagement strategies were identified as unhelpful or dysfunctional and could reduce efforts to deal with a stressor, increase helplessness, including excessive drinking, drug taking, wishful thinking, and inappropriate sleeping, self-distraction, denial, venting and self-blame (Collins, 2008; Yun et al., 2019).

### ***Curriculum to strengthen student protective mechanisms and wellbeing***

A common theme in the literature is the consideration of developing wellbeing-enhancement strategies within social work education curriculum. Developing self-care strategies and building protective mechanisms are all important in helping to cope with the stress and hardship of being a social work student and to maintaining wellbeing and a healthy professional quality of life (Grant, 2014; Grant et al., 2015). Grant et al. (2015) identified a wide

range of innovative teaching, learning and support initiatives to build student resilience. These included intra-personal skills development through techniques such as improving self-awareness, managing emotions and enhancing reflective skills, time management, personal organisation, mindfulness and cognitive behavioural strategies. They also advocated seeking / receiving support from a range of sources including peers, educators, supervision, and the teaching organisation.

Strategies recommended in other studies include managing empathy, mindfulness (Shannon et al., 2014), emotional literacy, time management, peer coaching, mentoring, reflective writing (Lohner & Aprea, 2021), reflective supervision, strengthening sources of support to moderate the effects of stress, and pursuing work–life balance (Adamson et al., 2014; Anleu-Hernández & Puig-Cruells, 2024; Collins et al., 2010; Grant et al., 2015; Hitchcock et al., 2024; Meadows et al., 2020; Wilks & Spivey, 2010).

Resonating with these international studies, an Aotearoa New Zealand study found that social work students utilised a broad range of strategies to address challenges and demands of their social work programme (Meadows et al., 2020). These included focusing on key milestones and the endgame of their studies; relaxing the expectations they held about how they should perform in their studies and in other aspects of their life; assembling a toolkit of strategies for managing their self-care and wellbeing; and accessing support and mentorship. Meadows et al. (2020) identified systems of support at micro, meso and macro levels including family and whānau; wider community and peer networks; the social work programme and its staff; practicum educators and the practicum team; professional supervisors and broader support from the institution where they were studying and government (re financial support). Many students felt that they “needed a layered system of support to sustain and enhance their wellbeing” including both whānau and wider community (Meadows et al., 2020, p. 56).

In Beddoe et al. (2024), we outlined the impacts of study on social wellbeing. The focus of this article is to identify the strategies and resources that the participants in this research drew upon to survive the challenges to their wellbeing while studying, and their recommendations for future students. The data were drawn from the quantitative survey data, the qualitative responses to the relevant open-ended questions in the survey, as well as from qualitative interviews. This research received ethical approval from the Auckland University Human Participant Ethics Committee.

### Study design

The original research that this article is based on sought to answer the question: “What are the financial and social impacts of study on the wellbeing of social work students in qualifying programmes in Aotearoa New Zealand?” The 2019 study utilised a mixed methods approach of an anonymous online survey and semi-structured individual interviews. Participation in the research was open to all undergraduate and postgraduate students studying in Aotearoa New Zealand qualifying social work programmes, as well as students who had graduated within the past 2 years.

The Council for Social Work Education (CSWEANZ), agreed to forward the survey invitation to schools of social work with a request to those institutions to then forward the invitation to their current students. The Aotearoa New Zealand Association of Social Workers (ANZASW) promoted the research along with posts on professional social media pages such as Facebook and LinkedIn that enabled us to reach recent graduates.

The survey included a range of topics relating to demographics and student study modes, caring responsibilities, financial matters and various aspects of health and wellbeing. The questions most relevant to this article canvassed student views on their use of a range of supports available to them,

using a Likert scale response, as well as an open-ended question that asked respondents to explain what strategies they employed to get through their degree. We also asked them to offer advice to future social work students about how to maintain or enhance wellbeing while studying. These questions produced 3,000 words in text response to augment the interview data.

The online Qualtrics survey was conducted for 3 months in 2019. In total, 353 social work students or recent graduates completed the survey questionnaire. The survey included a question asking if the respondent was interested in participating in a further individual interview. From responses to that question, 31 phone or online, semi-structured

interviews were conducted. These interviews were all transcribed for analysis.

## Findings

This section first outlines the study sample of both the survey and the interviews and then explores the themes developed out of the research. Recommendations from the participants offered to future students are also explored.

To enhance readability and ensure clarity of meaning, the participant transcripts have, at times, been reduced with ellipses or paraphrasing and this is noted with square brackets [xxx]. Meaning of participants' words have not been intentionally altered

Table 1. Survey Participant Demographics

	n	%
Age		
Under 20	6	1.7
20 to 24	111	31.4
25 to 34	110	31.2
35 to 44	68	19.3
45 to 54	52	14.7
55 to 64	5	1.4
65 or over	1	0.3
Gender		
Female	323	91.5
Male	28	7.9
Gender diverse	2	0.6
Current Student/Recent Graduate		
Current Student	267	75.6%
Recent Graduate	86	24.4%
Currently studying Full-time / Part-time (current students)		
Full-time	216	80.9%
Part-time	49	18.4%
Not Ascertained	2	0.7%
Spent most time studying Full-time / Part-time (recent graduates)		
Full-time	72	83.7
Part-time	14	16.3

in any way. Pseudonyms for the qualitative interview participants are utilised. All other quotes that are not attributed to pseudonyms, are drawn from the open-ended questions in the survey.

### **The survey sample**

All participants were either enrolled in completing a social work qualification or had recently graduated. More women than men responded to the survey (93%) which is consistent with the demographic profile of social work. Not all participants provided their qualifying degree but of those who did, 82.7% ( $n = 282$ ) were undertaking an undergraduate degree while and 17.3% ( $n = 59$ ) a postgraduate social work qualification. In total, 82% ( $n = 288$ ) were (or had been) studying full-time and 18% ( $n = 63$ ) were (or had been) studying part-time. Nearly two-thirds of the participants (64.3%) were aged under 35, while six participants identified as being 55 or older. Demographic results from the survey are presented in Tables 1 (age, gender and study status) and 2 (ethnicity).

Respondents were able to choose more than one ethnicity, and their answers were prioritised according to the government guidelines (Te Whatu Ora, 2024). These results are presented in Table 2.

### **Qualitative interview sample**

Among the 31 interview participants, 28 identified as female and three as male. The majority (25) primarily identified as Pākehā, while four identified as Māori, one as Cook Island Māori, and one as Samoan/Pākehā. Age distribution showed that 11 participants

were between 45 and 54 years old, six were aged 35–44, seven were 25–34, and another seven were 24 years old or younger. The participants represented 12 different tertiary institutions, with 14 attending university schools of social work, and 17 enrolled in other programmes. Most (25) were full-time students, while six were studying part-time.

Selected quantitative results from the survey are presented first to provide background, followed by the information provided through open-ended questions in the survey as well as through the individual interviews. These qualitative data were combined in NVivo. Braun and Clarke's (2022) six-stage model of thematic analysis was used to develop the themes described. These themes aligned with the research on student wellbeing discussed above and can be described as a constant balancing act of three dimensions: personal, relational and societal.

### **Survey quantitative results**

Survey participants ( $n = 353$ ) were asked to what degree they utilised 12 separate, positive strategies to help cope with the impact of studying. These strategies were support from peers, friends, family/whānau, university and placement staff, supervision, sport and exercise, involvement with marae and other cultural activities, political activism and volunteering and religious or spiritual practices<sup>1</sup>.

Peer, friendships and family/whānau support was considered, always, often or sometimes helpful by a majority of the survey participants. Around 58% of survey participants found peer support always or

*Table 2. Prioritised Ethnicity*

Ethnicity	Frequency	M	SD
NZ/European	218	25.4	8.5
Māori	67	30.65	9.26
Pacific	28	28.59	10.68
Asian	19	21.79	7.62
Middle Eastern/Latin American/African	8	25	11.64



Table 3. Areas of Support for Students

Positive strategies	Never (%)	Seldom (%)	Sometimes (%)	Often (%)	Always (%)
1. Peer support ( <i>n</i> = 326)	7.1	11.7	23.0	22.1	36.2
2. Friends outside university ( <i>n</i> = 327)	7.0	11.0	20.8	27.5	33.6
3. Family/whānau support ( <i>n</i> = 331)	3.3	11.2	16.6	21.1	47.7
4. Support from lecturers/ placement staff ( <i>n</i> = 326)	15.0	23.0	27.9	22.7	11.3
5. Supervision on placement ( <i>n</i> = 307)	23.8	13.0	26.1	22.5	14.7
6. Other supervision ( <i>n</i> = 299)	56.2	13.0	10.7	13.4	6.7
7. Sport / Exercise ( <i>n</i> = 320)	20.9	24.1	27.5	17.2	10.3
8. Involvement with marae, hāpori, hapu/iwi ( <i>n</i> = 300)	82.0	9.0	5.7	2.0	1.3
9. Other cultural activities – music, arts, groups ( <i>n</i> = 313)	52.1	19.8	14.4	10.5	3.2
10. Political activism ( <i>n</i> = 46)	100	0	0	0	0
11. Religious or spiritual practice ( <i>n</i> = 317)	53.0	7.9	11.7	12.9	14.5
12. Volunteering ( <i>n</i> = 319)	42.0	12.9	21.0	16.0	8.2

Note: <sup>1</sup>Valid percentages have been utilised for the quantitative survey data.

often helpful, and a further 22% found it sometimes helpful, while just under 19% found it seldom or never helpful. Well over half of the participants felt friends outside of university were always or often helpful (61%), with a further 21% finding them sometimes helpful. Family / whānau support was similarly very important in terms of social wellbeing with almost half (48%) of participants finding this support always helpful and a further 21% stating it was often helpful.

Programme lecturers and placement staff were viewed as providing less support than peers, friends and family / whānau for wellbeing with only 34% finding them always or often supportive, and around 28% finding them sometimes useful, while about 38% found them seldom or never useful.

Supervision while on placement provided support to varying levels to over 63% of students but provided no or little support to around 37% of the students, however some students may have not yet undertaken their first placement. Around 20% of participants

always or often received support from other supervision while nearly 70% seldom or never found or received support from this, although most students would not be engaged in other forms of supervision.

Sport and exercise provided benefits often or always to nearly 28% of the participants with a further 28% sometimes finding it a helpful coping strategy. Forty-five percent of participants never or seldom utilised sport or exercise as a coping strategy.

Other strategies including involvement with cultural activities including marae, other cultural activities; political activism and volunteering; and religious or spiritual practice had much lower uptake as coping strategies by participants. Over 90% of participants never or seldom utilised involvement with marae, hāpori, hapu / iwi as a coping strategy (67 of the 346 respondents identified as Māori). Further, 72% never or seldom found other cultural activities including music and arts helpful coping strategies, but around 25% sometimes or often did find them useful.

None of the survey participants found political activism helpful as a coping strategy, but 45% did find volunteering was sometimes, often or always helpful. Finally, over 60% found religious or spiritual practices never or seldom helpful, but around 40% utilised these sometimes, often or always to support their wellbeing. In Beddoe et al. (2024) we reported that study demands often curtailed student participation in social activism and volunteering activities.

### Qualitative data results

In Beddoe et al. (2024), we reported the range of deleterious impacts of financial hardship and workload stresses for social work students. In this article we explore in greater depth the strategies utilised by the participants to enhance their wellbeing. These strategies have been described through personal, relational, institutional, cultural and societal themes.

#### *Personal: Star charts and healthy habits*

The participants maintained or enhanced their social wellbeing by seeking balance in their lives through utilising different techniques for selfcare such as mindfulness, relaxation exercises, self-awareness and acceptance, self-affirmation and development, and valuing their own world view. One survey participant commented on the particular significance of self-care for social work students as they began to understand the complexities of the profession:

Being a student is challenging, being a social work student has a unique range of challenges, combined with everything else that is happening in life. .... I have become really aware of the importance of self-care. Sometimes self-care means stuffing your face with chocolate, going for a walk or just recovering enough [so that] you can face the next day.

Other self-care techniques mentioned included meditation, reflection and mindfulness:

Regularly checking-in with myself and where I am at, so I could make some changes to help support myself better, a meditation app has been a godsend.

I found reflection invaluable to make sense of the impact of competing demands and feelings of guilt that I carried.

Mindfulness-gratitude. Knowing this is temporary, reading novels not textbooks, focusing on [my] positive future, combatting negative/unhelpful thinking patterns.

Time-out and systems of rewarding oneself were utilised although students acknowledged that it was not always easy to prioritise this:

Getting sun on my face, breathing fresh air, taking time to go to schedule intentional 'nothing' days to give my brain space are all very useful ... I also have a star chart where I give myself a star every day that I did what I intended.

Physical wellbeing is connected to self-care and different ways to enhance physical wellbeing were discussed, including sleeping and eating well, drinking appropriately, taking breaks and undertaking exercise and other physical activity. "A big one for me was cooking and eating healthy meals". Two participants acknowledged the role of drug and alcohol consumption with Bella stating that she maintained, "Healthy habits: I don't drink, I don't do drugs, you know that kind of stuff". Maria commented on the flip side, "Don't drink every night. I saw a lot of classmates do that. Definitely not a good idea".

While exercise was important to many participants, study was often prioritised over exercise:

My issue was not about the cost of activities/sport, but more about the lack of time. I exercised less while studying due to shorter hours in winter/autumn and the pressure of study/assessments. I consciously chose to put more hours in reading and researching than exercising as I wanted to have the best grades I could.

Jade did not separate her physical self-care strategies from study, commenting that:

I think the strategy was changing my mind-set. Realising that this is a part of study and it helps me be more productive by taking an hour out and going for a walk or for a run.

Other activities and hobbies were also discussed as stress-management strategies including making time to listen to music and having daily positive experiences. Janet spoke about:

The self-care side of things for me is probably more going and doing stuff. I am a creative sort of person so going and making things or painting or cooking or baking.

### ***Planning and prioritising***

Participants reflected on the personal effort and hard work required to keep studying. They described skills of organisation which included establishing and keeping routines and time management as well as needing to define what was most important at any given time.

Recognising when you can't take any more on at the moment and being able to weigh up the value of a lecture versus the pay of a shift at work helps me to structure my week and minimise my stress.

Linda saw time management as "prevention rather than cure. Make sure that I'm working to a deadline instead of getting extensions

for assignments and then stressing out." Practical tips such as the following were recommended for wellbeing:

I'm quite structured, so I have made a plan of what I want to achieve during those days. I've just altered my gym schedule and things like that to suit. I've made a planner of weekends and times that I'm free, so that I can make sure that I try and see people or family especially as much as I can. (Natalie)

Participants described making conscious decisions about where to focus in order to achieve their goals and enhance wellbeing. Sometimes this involved giving up on non-study activities, "I often have to prioritise study commitments over socialising, but I do see this as a necessary sacrifice to reach my end goal."

Saria utilised her organisational skills through multi-tasking and prioritising assignments:

I feel like I am well organised. Although I worked full time, one of the jobs I had was working night shift, so when it was quiet, I could actually do some study.

Participants described their determination and managing the impact on their wellbeing from study requirements by reducing study and other commitments, resetting their academic expectations and focusing on their qualification end-goal. "There was a time when I did think about taking a year-long hiatus from my studies [but] I decided not to, because I just wanted to get my degree done" (Saria).

In relation to assignments, Joce described that she now focused on "getting them done as opposed to getting them done to the best of my ability". Sam had also reduced his expectations and stated, "[I'm] reducing the amount of energy I'm putting into the study. I've been an A student, ... but I'm realising that there's a cost to that. Maybe I can just back down a little bit."

Almost all participants in this study had paid work commitments while studying, and most reduced paid work at pressure-point times:

I'm starting to reduce my involvement in certain things ... I'm part of a consulting group, they're ringing me with offers but I'm saying "nah I'm good". (Sam)

Participants described what maintained some of their determination to keep studying. Sandra recounted that her passion for social work outweighed stresses from being a student because she viewed social work as a vocation "I think that my education journey has given me more than just my student loan, you know, it has changed my life".

Remembering the why was also a strategy utilised by Doreen:

It's a profession focused degree and I passionately want to be a social worker. That will get me out of bed on the hard days, when I'm up studying till 2 am for an exam the next day.

### ***Relational: You can't do this alone.***

Quality relationships with others were important for maintaining and enhancing the wellbeing of participants. A range of personal relational supports including those with whānau, family, pets, friends, and church were described by the students.

Sally received weekly support from her parents:

My parents have my son on Friday nights after school, so Friday night is like my night, I get to look after me. I get to eat pizza, I get to go home and sleep or go out with people from work, or go out with friends, or go to the movies.

Esme (and others) emphasised the importance of being honest with themselves and those supportive of them in order to obtain the help required:

When I was in a really low place, I tend to give up all of those good things that are actually quite helpful, so just getting back into some self-care has been really important, and trying to balance life a wee bit more, and communicate more openly with my whānau about what I need.

The participants detailed formal (such as study groups and tutorials) and informal support from student peers, which helped with social wellbeing and academic performance. This support was both face-to-face and on-line. Participants, including Jack, commented on the usefulness of weekly tutorials in forming supportive friendships:

... it is really nice to have the same group of people to meet with every week and we can talk about assignments [which is] quite helpful and I really enjoy it.

Study groups, both formal and informal, were invaluable to many participants academically and enhanced social connection:

[Our] mature students group formed a study group and before exams we would do regular study groups together and split up the workload ... We were always messaging each other about stress and things. (Saria)

Specific student services including Māori and Pasifika support services, learning services, disability support, tertiary scholarships, and student advocates were important and utilised by participants:

I highly recommended the [Pacific support service] which was first introduced last year when we started. We formed a strong peer support group which helped me tremendously throughout.

The campus I studied at was a whānau environment with great student support services. They at times, fed me, provided

second hand clothes, financial emergency support, part time work.

One other thing that I found really helpful. ... learning services ... you can take an assignment and they will read it over and give you feedback. (Jack)

Positive, constructive relationships and communication with any of the lecturers, tutors and placement staff were also reported as being helpful to manage stress and navigate academic life:

My tutors have been very supportive around self-care and show a lot of empathy, understanding and grace in regard to managing study, stress and normal life. The cool thing is actually I find my lecturers to be incredibly supportive. (Kate)

Health services including therapy and counselling, available through the Tertiary Education Institute (TEI) or privately, were accessed by participants for managing the impact of study and to enhance their wellbeing.

Regular contact with mental health professionals [is] important for myself, so without weekly psychotherapy I don't know if I'd still be enrolled in the course.

It is estimated that around one third of social work students come into social work predominantly as previous or current social service users (Humphrey, 2011). Participants who fitted this pathway spoke of needing to be vigilant about their wellness:

I came into study with three years recovery from alcohol addiction, so I maintained my recovery throughout and sought help as needed

Others, including Maria, reflected on the impact of the content of the social work programme and the value of counselling for her:

There were definitely bits of the degree that pinpointed bits of trauma that I'd experienced and triggered me. [I] went and got a psychologist and had that every week for the rest of study. I started that probably six months into the degree.

Seeking balance in order to enhance wellbeing was pursued in a variety of ways by the participants. Cherie noted that engaging in te reo Māori language classes was one of her many enriching activities which she utilised to ensure she did not over fixate on her study:

I've got a million and one things on. I'm studying te reo Māori, and I volunteer for a charity and I run a couple of sports teams, so I'm full to the brim. But I've done that with the knowledge that I've also got to keep my study under control as well.

While some of the interview participants reported that they reduced or ceased their involvement with social justice work due to time-pressure (see Beddoe et al., 2024), some participants utilised volunteering as a method to enhance balance and social wellbeing.

My biggest love is social justice and helping people. So, for a lot of my university life, I was involved with organisations like World Vision ... They had a programme if you raised a certain amount of money some would get put into your development fund and then you could use that for opportunities like paying for flights to go on a self-development course. That was a huge opportunity for me. (Callie)

Volunteering also had the added benefit of being a conduit for relational supports as well building a sense of hopefulness as described by Janet:

I do things like volunteer tree planting ... It always makes me feel good and then I'm with people who like the same



thing, and those sorts of things put a lot more spring in my step when everything is getting a bit much, just having a day off and going and planting trees ... is beautiful.

### ***Advice to future social work students***

In the interviews we asked participants:

“What advice would you give to a

student of your age and life circumstances when starting a social work degree?”

Recommendations included the importance of knowing oneself but also expecting their values and beliefs to be challenged, getting prepared for the financial cost of studying with less time to earn money, as well as the need for robust personal self-care plans and routines. Participants also suggested the need for having good personal organisation and planning skills, developing realistic academic goals, seeking support and finally remembering their passion for entering social work.

While there were many practical suggestions, participants also talked about the centrality of social work students understanding and knowing themselves while also expecting self-perceptions to be challenged:

One [piece of advice] would be for that person to examine themselves and to really think about why they are going into [social work], and secondly to expect that the degree itself will influence you in unpredictable ways which are unforeseen because it is so broad and you learn so many different things about yourself that it can be really challenging. (Ben)

Being self-aware included acknowledging and seeking support for past trauma, while at the same time valuing their past:

They need to make sure they are going to have enough support to deal with their own trauma. But also, they need to be really careful that they are looking through a strength perspective as well to see that can actually be an asset to

someone in that they can understand and relate to a person in a way that perhaps someone else might not be able to.

(Callie)

Advice for school leavers was often more specific and focused on really knowing themselves “ko wai au – who am I?”, while also valuing their stage in life:

Probably I would say take a gap year. It is sort of something I kind of wished I had done and I just take that time for yourself and just learn a bit more about yourself. (Stella)

Don't let people [push you] down because you are young or you look a certain way because you might seem young or like you haven't had a lot of life experience, you have something to offer. (Callie)

Similar advice to mature students was also around valuing who you are:

Being a mature student is a great asset to academia in general, the wealth of experience and knowledge outside of textbooks into the classroom. (Saria)

Participant advice included the importance of having excellent personal and relational supports and self-care plans in place:

Finding that something that really helps you be able to stay calm and centres you and keeps you grounded whether that is spending time with friends or family or doing some kind of physical activity I think is super, super important. And not neglecting that, even if you don't feel like doing it so much that day. (Joce)

Their advice centred around being organised and establishing best locations for study:

I would say keep on top of the reading, because it really helps to prioritise that. And in terms of practical things ... draw up a table and start summarising your readings as you go, in order to have the

time to do your essays at the end, because they all come at once. (Delia)

The participants encouraged future students to be open about their needs and seek support from their cultural contacts, personal relationships, student peers, staff and student services, and remembering the concept of *short term pain for long term gain*:

For a Māori student I would say draw on your culture as a support. I would also say choose an institution to study at that really supports Māori students and has a whānau kaupapa. (Ellen)

The first thing you need to do is when you go on the first noho or get together ... is get your own Facebook page, get that support going as soon as possible, make connections because they are the people that are going to get you through. (Erica)

Just to make sure that you're not too whakamā about approaching your whānau and just anybody for help, any kind of support person, lecturers, just ask. (Linda)

Preparation for future loss of income was strongly recommended, particularly when on placements as reported in Bartley et al. (2024).

I guess to prepare as best as you can, and in the times when you may get offered a weekend's work or something buy your staples [and] don't go out for lunch. Spend that money on topping up your tinned tomatoes. (Jill)

Finally, they were hopeful, and encouraged future students to focus on the end-goal of qualifying and holding onto their passion for social work:

I think when you're a tertiary student, the thing is, life happens. You just have to go with it sometimes. ... [Remember] "Cs get degrees." ... If you get time, you can go back and pick up your reviewer's

marks and comments and you can learn from there. Pick your battles, don't sweat the small stuff. (Natalie)

Expect the unexpected. You have to be prepared to be adaptable and have tenacity and focus to get this degree. Constantly remind yourself the reasons that you're doing [it] and that it's your passion to do it that keeps you going. (Doreen)

I would encourage them that time in a sense actually really does go fast. It seems like yesterday that I started and every time there were challenges and times where I thought my goodness I don't know if I am going to make this, ... something would happen that would encourage me to keep going. I would remember about what I am trying to achieve, where I am going, the people I am going to be able to help, the job security, the better life I can provide for me and my daughter. All the money I had invested so far and I don't really want to waste that. (Millie)

## Discussion

In line with the literature on wellbeing explored above, the student participants developed and attended to a range of personal internal strategies to maintain and enhance their wellbeing and resilience (for example, Coffey et al., 2014; Collins et al., 2010). They identified what worked for them in terms of self-care including regular exercise, rest, and time out from academic demands. Having paid employment and caring responsibilities however, meant that self-care was often sidelined, but participants attempted to compartmentalise this and promised themselves they would attend to self-care once a period of high demand had finished. Students engaged in planning and considering their priorities, and maintaining a vision of achieving their qualifications for motivation.

It was clear that individual coping strategies at personal levels were not enough and interconnected systems of support, including relational and social strategies, were required to ensure wellbeing aligning with earlier studies (Collins et al., 2010; Gair & Baglow, 2018; Grant et al., 2015; Koo et al., 2016; Meadows et al., 2020). Relational supports were the most widely supported strategies emerging from the survey data, and the interview participants cited support from whānau / family, friends, church, cultural groups and time with pets, being instrumental to their wellbeing.

This research highlights challenges for social work educators to support student wellbeing. The TEIs provided or supported a range of supports including peer groups, tutorials, student services, health services, teaching and placement staff mentorship and supervision but this was variable. Literature clearly demonstrated the necessity for TEIs to provide an emotional curriculum and a range of tools to support students to cope with the stress of their study (for example, Grant & Kinman, 2014; Lawrence, 2021; Lohner & Aprea, 2021; Moore et al., 2011). While the findings in this article largely focus on students' personal coping strategies, it is clear also that addressing systemic or structural issues, such as lack of financial support, could be enacted to improve student wellbeing (see for example, Bartley et al., 2024).

There is also a deeper engagement with critique required. We enlist the concept of resistance, in counterpoint to traditional arguments for resilience, in order to explore some of the complex dynamics in the space of maintaining and promoting student wellbeing. In a recent scoping review, Cherry and Leotti (2024) have explored the concepts of resilience and resistance within either strengths-based perspectives or within the dynamics of neoliberalism. Cherry and Leotti (2024) described the process where an internalisation of a neoliberal discourse where acts of individual risk/resilience may in fact serve to promote the neoliberalist status quo: "Our findings demonstrate how

acts of resilience can harbor elements of resistance, subtly challenging the status quo even within the act of adaptation" (p. 18). Critical reflection suggests that as educators we should push against promulgating the status quo by overly focusing on individual resilience resting within the person. Resilience requires interconnected systems of support at individual, team, institutional, organisational (placement) and societal levels. Social work educators and supervisors need to encourage ongoing critical reflection to fight against the internalised neoliberalist agenda that may encourage us to engage in resilience that is counterproductive and limits opportunities for collective action. This also requires links to be made to issues of structure, beyond the everyday sphere of practice.

In Aotearoa New Zealand, Penehira et al. (2014) explored the resilience/resistance dynamic in a similar vein, with the view that resilience discourses for Indigenous people risk assuming "an acceptance of responsibility for our position as disadvantaged individuals" (p. 96) and negating the state's responsibility of colonisation. They encourage questions such as "Who benefits from this re-naming, reframing and re-positioning?" (p. 97). A study with high-achieving Māori and Pacific students identified three broad social factor themes that contribute to Indigenous students' educational success (Mayeda et al., 2014). These were: family and university role modelling and support; Indigenous teaching and learning practices; and resilient abilities to cope with everyday colonialism and racism.

It is important to place social work education and the profession of social work in its macro context and recognise the wider negative influences of structural reforms and funding decisions for the tertiary sector (Beddoe et al., 2023; Staniforth et al., 2022) and the intersecting goals of key players including professional associations and regulators (Gair & Baglow, 2018; Meadows et al., 2020). Campbell et al. (2024) have discussed the importance of critically analysing concepts of resilience to avoid simplistic, individualistic explanations

and to include ecological approaches that embrace social as well as individual coping systems used by social work students. At a societal level, responsibility for the impact of policy decisions on student wellbeing also sits with professional bodies and academic or government councils, TEIs and those responsible for recognising qualifications as well as funders of education and education policy makers.

While students engaged in numerous acts of resilience, it is important to not lose sight of the role of resistance in maintaining wellbeing. Educators sometimes label student resistance as the students lacking in motivation or being “problematic”. It may be better to listen to the feedback of their students in regard to assessments, inflexibility of placement arrangement and other institutional pressures (Campbell et al., 2024) in order to support wellbeing.

## Conclusions

This article has explored data from a mixed methods study from 2019, with a particular emphasis on exploring strategies used by students in Aotearoa New Zealand to attempt to maintain wellbeing throughout their social work studies. A similar study has been conducted in 2023 which reveals conditions for students throughout the Covid 19 pandemic.

The students in this research project revealed the many strategies they used at individual, relational and cultural and societal levels. While there is important learning to be taken from these experiences, it is perhaps even more important to shift our focus away from placing all of the responsibilities on students, and recognising the institutional responsibilities of tertiary education providers, and the structural responsibilities of governments to provide adequate resources for students.

*Poipoia te kakano, kia puāwai. Nurture the seed and it will blossom.*

(Source unknown) (Moorhouse, 2020 p. 49)

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## Note

<sup>1</sup>Valid percentages have been utilised for the quantitative survey data.

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# Enablers and barriers to women's empowerment through self-help groups

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## ABSTRACT

**INTRODUCTION:** Women's empowerment is one of the priority areas in line with sustainable development goals and is thus becoming ubiquitous in every development agenda across nations. This study explores the enablers and barriers to women's empowerment in self-help groups (SHGs), focusing on the women-led community-based social enterprises (CBSEs) in the Southern Philippines.

**METHODS:** Data were collected from 66 women members of seven purposefully selected SHGs using a qualitative approach. We conducted seven focus group discussions with 8–15 participants each. We used a general inductive approach for the thematic analysis to identify the key themes.

**FINDINGS:** The study reveals that multiple interrelated factors, such as personal motivation, group incentive properties, supportive intra-familial processes, solidarity among women, and community support and recognition, enable women's empowerment. Furthermore, factors such as low family economic status, competing multiple social obligations and expectations, geographical disparities, and tokenism of support services have emerged as barriers to women's empowerment.

**CONCLUSION:** This study's findings suggest that the enabling factors have played a critical role in promoting women's empowerment in SHGs, as evidenced by their improved access to resources, decision-making, and sense of achievement. These factors bring individual and collective outcomes contributing to women's empowerment experiences. However, emerging barriers that disempower women are structurally rooted in deep-seated gender norms. Women's empowerment through SHGs is insufficient, thus calling for sustained efforts at multiple levels of society.

**KEYWORDS:** Women empowerment, enablers, barriers, self-help groups

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The formation of self-help groups (SHGs) is a potent mechanism by government and non-government organisations in poverty alleviation efforts in the Southern Philippines. A significant portion of this part of the country is conflict-affected by a decade of armed conflict between Muslim rebel groups such as the Moro Islamic

Liberation Front (MILF) and government armed forces. This has affected over 60% of Mindanao's cities and municipalities (World Bank, 2018). The conflict-affected areas of Mindanao Island, Southern Philippines, have the highest poverty levels and suffer from uneven growth and development (Senate of the Philippines (SoP) 2014). The Bangsamoro

Organic Law was passed in 2018 to establish the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM) and provide a new government structure for the Bangsamoro (native inhabitants of Mindanao). With the new government, new leadership, and the block grant received by the new regional office, massive social, economic, and infrastructure development programmes were explicitly implemented in the conflict-affected areas of the region, where poverty incidence is high. As one of the poorest sectors in the Philippines, women face limited access to social protection, engage in unpaid labor, and predominantly inhabit the informal sector (Philippine Institute for Development Studies, 2020). The poverty incidence among women in BARMM in 2018 was 63.1% (Philippine Statistics Authority, 2025). Considering this, development organisations, including international non-government organisations, design and implement programmes that focus on forming and facilitating SHGs in the form of community-based social enterprises (CBSE). For consistency, we will use SHGs throughout the article to represent participants' community-based social enterprises (CBSEs).

### Women empowerment

Empowerment is ubiquitous and one of human development initiatives' most relevant working frameworks. It is defined as an active, multidimensional process that enables women to recognise their entire identity and power in all spheres of life, to make strategic life choices in a context where this ability was previously denied to them, and to develop their capacity to act successfully within the existing system (Kabeer, 2001; Sharma & Varma, 2008). Furthermore, Young (1997) defined empowerment as a process in which relatively powerless individuals participate in dialogue to understand the social sources of their powerlessness and recognise the potential for collective action to change their social environment. While these definitions are still useful, the term *empowerment*

implies that someone else is granting power to another person, as if the person being empowered cannot make their own decisions without the help of others. Several authors have challenged this term, asserting that no one is entirely powerless (Lennie, 2001) and that there is a hidden paternalism in using the term (Ferguson, 1996). The notion of placing someone "into power" implies that power originates externally, which contradicts the concept of empowerment that highlights its inherent nature (Vojtek, 2021). Despite the challenges associated with the term, Parpart (1995) and Ferguson (1996) advocated for its continuing usefulness in the context of feminist research and community development projects.

Although empowerment applies to both sexes, Malhotra and Schuler (2005) argued that women's disempowerment across class and social distinctions is more pervasive and complicated because household and intra-familial relationships constitute a significant source of women's powerlessness. Empowerment of women is an essential pre-condition for eliminating poverty (Sahu & Singh, 2012) and has evolved as the safest way to ensure that the development process is not unjust and incomplete and challenges the existing norms and culture to promote women's wellbeing (Nithyanandhana & Mansor, 2015; Sowjanya et al., 2015). Women are considered empowered when valued and have access to opportunities without restriction, limitation, or interference with their personal lives, education, profession, or movement, among many other things (Kabeer, 2020). This underscores the idea that, more than access, women's empowerment is liberation, or, in the words of Sen (2014, 1999), "Development as Freedom" from the systems that limit and restrict their ability to realise their full potential. A vast body of literature and empirical studies explore women's empowerment. However, understanding the context in which empowerment efforts occur is essential, as previous authors argued that empowerment is highly contextual (Brody et al., 2015). The current study explores

the enablers and barriers to women's empowerment in SHGs in the Southern Philippines.

### SHGs and women empowerment

SHGs are among the most important means of empowering poor women in almost all developing countries (Minimol & Makesh, 2012; Saluja et al., 2023). Members gather to share mutual experiences, eventually creating an opportunity to mobilise resources to pursue needs and interests (Katz, 1981). Previous studies demonstrate that group participation yields economic benefits (Samama & Bidad, 2023), regarded as a prerequisite for empowerment. SHGs serve as a venue for the members' personal development, collective problem-solving, and addressing individual concerns (Samama & Bidad, 2023).

SHGs are increasingly serving as a vehicle for social, political, and economic empowerment and a platform for service delivery (Kumar et al., 2019). The formation of groups is believed to be one way to deal with such imbalances in power relations and bring better outcomes collectively or individually (Alemu et al., 2018). Furthermore, participation in SHGs reduces poverty and social isolation among marginalised women, provides access to low-cost financial services, enables them to become independent, and provides spaces for open discussions and sensitisation of the larger society, including men (Atteraya et al., 2016; de Almagro, 2018; Shetty & Hans, 2018). Though most of the studies highlight the social and economic independence of women in SHGs, some studies emphasise women's freedom from exploitation and domestic violence, leading to increased self-confidence and improved social status (Radhakrishnan, 2013; Shetty & Hans, 2018; Shirwadkar, 2015).

Moreover, the empowerment experiences of women in SHGs depend on the factors that may facilitate or hinder their empowerment journey. Previous

studies highlighted the facilitating role of socioeconomic status, demographic factors, culture, and geographical location in women's empowerment in SHGs (Nayak & Panigrahi, 2020; Rehman et al., 2015). Similarly, Atteraya et al. (2016) found that women with higher capabilities (e.g., employment opportunities, asset ownership, educational opportunities, and household decision-making autonomy) serve as pre-conditions for women to participate in SHGs.

While it is important to consider the enablers of women's empowerment in SHGs, defining, challenging, and overcoming barriers and all kinds of constraints in a woman's life increases her ability to shape her life and environment (Jakimow & Kiby, 2006; Sharma & Varma, 2008) and serves as a pre-condition for the realisation of women's empowerment. These constraints include internal, institutional, and socio-cultural factors that diminish women's ability to pursue their interests (Jakimow & Kiby, 2006). Furthermore, Brody et al. (2015) argued that empowering an individual or a small group alone might invoke adverse reactions when familial, community, and structural factors have not yet adjusted to women's changing roles. The literature consistently assumes that external systems critically influence women's empowerment. Efforts to engage in initiatives that empower women should always consider working with the macro- and meso-level system to ensure an environment that reinforces empowering women.

This article adds to the body of research on women's empowerment in SHGs by exploring the enablers and barriers women members of SHGs are experiencing in the Southern Philippines. This is in response to previous authors who have called for more research across different geographical boundaries (Rai & Shrivastava, 2021). The participants' views and experiences detailed the enablers and barriers to women's empowerment in SHGs.

## Methods

This study used a generic qualitative approach (Caelli et al., 2003; Kahlke, 2014; Smith et al., 2011). This approach is not underpinned by a specific philosophical stance (Patton, 2002). Instead, it is concerned with ensuring that the data-collection methods and analytical strategies best suit the research questions and/or objectives of the study (Patton, 2002; Ritchie & Lewis, 2003; Richards & Morse, 2002). Using this approach, the researcher seeks to explore how people interpret, construct, or make meaning from their world and their experiences (Merriam, 2002), which enhances the credibility of a study's findings because the researcher is more likely to be concerned with accurately describing participants' experiences, staying close to the data, and ensuring their interpretations are transparent (Sandelowski, 2000). This approach allowed the participants to share their knowledge, ideas, and experiences (Richards & Morse, 2012) of enablers and barriers to empowerment as members of SHGs. Furthermore, this approach is suitable for this study because it is not within the limits of an established methodology such as phenomenology, ethnography, and grounded theory, but rather, it enables the researcher to modify and adapt the study structure that is suited to the needs of the research conducted (Caelli et al., 2003).

## Participants and sampling

At the initial stage of the study, we requested a list of SHGs from the Cooperative and Social Enterprise Authority. From the list, we purposefully selected SHGs based on the following inclusion criteria: SHGs should be women-led, engaged in community-based social enterprises, operational for at least 5 years, and geographically located in rural, conflict-affected areas of Maguindanao del Sur, Maguindanao del Norte, and North Cotabato. Women in rural areas are less empowered and still suffer socially, economically, and psychologically in their day-to-day lives (Zafar, 2019). Additionally,

we used the convenience sampling technique to reach out to the SHGs via social networks. We contacted the presidents of each SHG and conducted coordination meetings from October to November 2023 with seven SHGs who agreed to be part of the study. The participant SHGs produce, process, and market agricultural products such as peanuts, rice, calamansi, chili powder, and local-based products like handicrafts and native delicacies.

Seven focus group discussions (FGDs) were conducted with 8–15 participants. Overall, 66 women members of SHGs have participated in the FGD. To recruit participants with rich information (Patton, 2002), we purposefully selected women who had been active members for at least 3 years and were willing to participate in the study. Women who have been members for less than 3 years and are inactive were not considered to be participants because they have limited experience and shorter exposure to SHG's activities. The Ethics Review and Regulatory Board of Cotabato State University approved the conduct of this study.

## Data collection and analysis

The FGDs took place from December 2023 to March 2024. The discussions took place in the participant groups' working areas. The interview was between 45 and 90 minutes long. The researcher is a social worker with a background in research and community extension programmes in rural and conflict-affected areas of Southern Philippines, focusing on capacitating community-based organisations of marginalised sectors such as women, farmers, and fisherfolk, and this informed the research questions. The researcher used an interview guide that contained open-ended questions on three topic themes: participants' empowerment perceptions and experiences, the enablers, and the barriers to women's empowerment in SHGs. Moreover, participants were also allowed to share experiences beyond the questions asked. We explained the objectives and mechanics of the FGD to the participants

before conducting the actual discussion. We audio-recorded all FGDs with the participants' consent.

We transcribed and thematically analysed the gathered data using a general inductive approach (Thomas, 2006). Specifically, the coding steps described by Thomas (2006) are as follows: We read the transcribed data several times to identify the text segments related to the objective of the study (to identify the enablers and barriers to women's empowerment), we then developed the coding frame, labeled text segments, and similar codes were combined to develop categories. Emerging categories were refined, and the main categories were identified and conceptualised to develop the major themes. The themes were identified and decided upon when no new themes emerged at the end of the study (Marshall, 1999). Though the data analysis was guided by the research objectives specifying the topics investigated, this kind of analysis is advocated by Thomas (2006) as an inductive approach since the study's findings emerged, not from a priori expectations, but directly from the analysis and interpretation of the raw data.

## Findings

### Enablers of women's empowerment

Based on thematic analysis, (1) personal motivation; (2) incentive properties of the group; (3) supportive intra-familial processes; (4) solidarity among women; and (5) community support and recognition have emerged as the enablers of women's empowerment in SHGs. Participants' quotes illustrate the findings.

#### *Personal motivation*

Participants across all the groups acknowledged that empowerment should start within themselves. Most of the participants perceived that personal motivation facilitates their empowerment experience. As identified by the women,

personal motivation pertains to determination for self-improvement, yearning for financial independence, and desire to inspire others as an expression of faith in God. As one of the participants shared, "When you do not dare to try and are always in doubt, you will go nowhere" (FGD3, P2). Personal motivation is evident in the members' interest and determination to participate in every opportunity in and outside the SHG. Most participants agree that livelihood activities are only beneficial if members are willing to maximise their benefits.

Some of the participants view their membership in the group as a means of achieving financial independence. They claim that mothers know their children's needs better and carry the family's financial burden, as most of their husband's income does not adequately sustain the family's basic daily expenses. This situation challenged and motivated women to improve by joining SHGs to earn income, fulfill their children's needs, and become financially independent.

Most of the members of the SHGs belong to Muslim tribes and claim that their participation in SHGs stems from their desire to inspire other women as an expression of worship to God. It emerged during the discussion that their strong faith pushes them, not only to participate in the SHG for personal improvement, but also to inspire other women to join and help themselves to improve. This is based on their belief that the group is not only a source of livelihood but also a venue for them to spread the word of God to the other members and eventually to the whole community.

#### *Incentive properties of the group*

There is a consensus among the participants that the incentive properties of the SHGs serve as enablers that facilitate their empowerment experience. These properties include holding group leadership positions, skills development opportunities, and access



to the group's support and services. Some participants express a sense of fulfillment and pressure over having the opportunity to lead their group. One of the participants shared: "My fellow members look up to me. They'd also say that I should be the one to represent our group because I can speak and express myself" (P2, FGD3).

The SHG has served as a medium to facilitate members' access to skills development opportunities. Several participants concurred that the series of livelihood training and values transformations provided the participants with not only the opportunity to improve their livelihood skills, such as production and marketing, but also their ability to establish connections and networks with other women groups from other municipalities. This has led them to increase access to various services and livelihood assistance from various organisations. Participants also expressed how their membership in SHG has improved their mobility. One of the participants stated: "I got a chance to travel to different municipalities to attend training" (P5, FGD2).

Moreover, most participants reported that the group's interactional properties serve as a medium for women to express their feelings, develop realistic self-appraisals, and receive support from the group. Interactional properties refer to the group bond that develops among group members. The participants acknowledged how their group has served as a venue for the members to discuss their life conditions. Given that the members share similar life circumstances, women often expressed their emotions within the group, such as disappointment, fear, and anger. One participant unveiled: "I had a chance to learn from members; they taught me about religion and how to deal with my problems with patience" (FGD2, P6).

### **Supportive intra-familial processes**

The women participants come from families with various characteristics. Supportive intra-familial processes have emerged as one

of the enablers of women's empowerment. This includes spousal support, shared household responsibilities, and trust in women's financial decision-making. The participants highlighted that the support of their spouse (e.g., taking charge of household chores) played a vital role in enabling them to participate in SHGs' activities. Furthermore, several participants reported that, aside from the spousal support, having extended family who helped them with household chores and childcare duties allowed them to improve themselves through SHGs. Moreover, family size and the age of children also play a role in enabling women to experience empowerment. Some participants said they could join SHGs because they have no children, while others said their children are grown and have their own families, freeing them from domestic chores.

Several women also revealed that they felt respected and important since their partners trusted them in decision-making. One of the interviewees cited, "Most males focus on concerns outside the home; they tend to let the women handle the household's financial decisions. My husband also seeks my advice when he plans something, and I am proud of myself" (P4, FGD4). While most participants indicated that their decision-making centres around households, a few also disclosed that they receive consultations on non-household-related issues.

### **Solidarity among women**

Women participants expressed how solidarity through mutual support, skill-sharing, and having the common desire to contribute to solving community issues has facilitated their access to different programmes and services of both government and non-government organisations. They refer to this as *Kapangenggataya*, where fellow women extend invitations to each other whenever opportunities arise in the community. A participant from an SHG involved in weaving shared: "It's like we are responsible for each other's access to services, especially concerning

livelihood opportunities" (FGD3, P2). In addition to receiving benefits, women believed that joining the group allowed them to share their skills with other women. A participant who is an internally displaced person proudly shared: "My membership in our group allows me to help and impart my [weaving] skills with my fellow women." (P2, FGD3).

Moreover, mutual support is further observed through how women express their empathy towards fellow women, whom they perceive as enablers facilitating their empowerment experiences. Women express empathy by understanding the challenging life circumstances of their peers and validating the emotions shared. Sharing and expressing challenges prompted women to act and address the shared concern to improve and ensure the survival of their peers. One participant, the president of an SHG located in the conflict-affected community, shared: "I want every woman in this community to have children who finished schooling" (P1, FGD1).

Some participants, especially those in leadership positions, shared their experiences and views about their motivation to contribute to resolving community development issues. A participant serving as the president of a SHG in Maguindanao's heavily conflict-affected areas expressed: "We established this group not just to generate income, but also to assert our voice and gain recognition, particularly in matters of peace and order" (P2, FGD1). The participants assert that their organised group has received invitations to various community forums and consultative meetings. The participants' awareness and experiences with community issues have motivated them to organise their group to earn an income and as agents to influence community decision-making.

### ***Community support and recognition***

Support and recognition from the community have become important factors in empowering women. This can be seen

in how the community accepted the SHG, gave it public platforms for visibility, and acknowledged its contributions to community development, which provided participants with a sense of empowerment. The president of an SHG from Maguindanao del Sur discussed her experiences representing her group in transactions with government and non-government organisations. She stated, "They perceive me as an individual with authority" (P1, FGD1). The community's acceptance is further evident in the patronage of the products and services offered by the SHGs. A member of the SHG involved in food production and processing stated, "Nearly all individuals in our community, including those from neighboring barangays, patronize our milling services" (P7, FGD6).

The local government supports SHGs by providing platforms that increase their visibility. One participant stated, "Our municipality consistently invites us to conduct a demonstration and product display. Despite our initial lack of confidence in the product last year, we ultimately emerged victorious" (P1, FGD6). The participants indicated that this opportunity provides a sense of accomplishment. The recognition they receive for their achievements inspires them to strive for excellence. The president of the women's group, which focuses on processing and marketing agricultural products, expressed surprise at the visit from an international organisation, stating, "They informed us that we are one of the leading associations because of our processing area." His statements motivated me. I remarked, 'Really, sir? It was flattering!'" (P1, FGD6). The support and recognition afforded to certain participant groups seem to enhance their sense of achievement and collective self-worth. Multiple participants indicated that the recognition and support they are receiving serve as an enabling factor for enhancing and broadening their livelihood activities, which they aspire to contribute to both their group and overall community development.

## Barriers to women's empowerment

The participants view positive experiences as enablers of their empowerment process, but four themes emerge as barriers. These barriers include low economic status, competing social obligations and expectations, geographical disparities, and the tokenism of support services.

### *Low family economic status*

Numerous studies have shown how economic status affects women's empowerment rate. Financial instability, poverty-driven priorities, and an inability to pursue opportunities are perceived outcomes of having a low family economic status. Most participants expressed that their financial status hinders their participation in SHGs. Traveling to group meetings requires money because their homes are far apart. Women also need to ensure that their children have something to eat and a school allowance. The participants should ensure they have all these necessities to participate in the group's activities. One of the participants revealed: "We have difficult livelihood conditions. My spouse is unemployed. He cannot go fishing or farming because of the drought" (FGD3, P2). Instead of actively participating in group activities, several participants said they needed to prioritise earning outside the group's entrepreneurial activities. This suggests that women facing the burden of family provision have limited opportunities to enhance and empower themselves.

### *Competing multiple social obligations and expectations*

Most participants expressed competing social obligations and expectations, highlighting domestic household work, family responsibilities, and attending social obligations as barriers to women's empowerment. Although women are permitted to attend and participate in their group's activities, the interviews revealed that they felt compelled to complete household chores either before leaving home

or after returning because family welfare and childcare are expected to be their primary responsibilities. One of the participants shared, "The decision of how I spend my time rests entirely with me, provided that the house is tidy when he [husband] returns home" (P4, FGD6). This suggests that the freedom to participate in the group's activities is conditional. The participants still bear the brunt of the housework.

Furthermore, several women feel burdened by domestic household chores and the expectation that the family's welfare is their responsibility. As one of the participants put it, "Attending the group's activities is quite challenging for me since my husband is frequently away on trips. He is a member of the Tablighi Jamaat. I need to take care of my children by myself. I sometimes must address issues within my husband's family" (P3, FGD4). The discussion revealed that the community still expects women to attend their husbands' family gatherings. Performing multiple roles limits women's time for self-development.

Several participants reported that they are perceived as problem solvers and are expected to represent their families at various social gatherings as part of their social obligations. The community expects them to be present at social gatherings, compounding their multiple domestic activities. One participant disclosed, "Men are becoming more irresponsible about family problems, especially when they see that women can do it alone. They always see us as problem solvers because we can always find a way" (P2, FGD4). This situation causes physical exhaustion for the women and affects their emotional wellbeing. This limits their ability to attend the group's activities, resulting in some members withdrawing their membership.

### *Geographical disparities*

Several SHGs operate in conflict-affected, geographically isolated, and disadvantaged communities. It emerged in the discussions

that scarce community resources and limited access to opportunities hinder women's experience of empowerment. Several participants expressed that attendance at the capacity-building events is sometimes limited to those financially capable members and those SHGs located adjacent to the town. As a result, poorer women members have limited access to these capacity-building events because they cannot afford transportation expenses. The sponsoring agencies conduct training and other capacity-building activities in the town areas, which are significantly distant from the areas where the SHGs operate. The lack of financial resources among women hinders them from accessing opportunities that could contribute to their empowerment.

Similarly, there are SHGs geographically located in remote and conflict-affected areas with scarce livelihood resources. One participant revealed, "We continue to live in an evacuation center. Armed conflict and family feuds persist in our community. My family cannot find a sustainable source of income" (P3, FGD1). SHG members residing in these communities face more complex barriers than other communities. Furthermore, limited access does not only refer to the geographical location; it is also compounded by the structural barriers experienced by women, which include government policies and standards that are difficult to comply with, especially for small SHGs. One participant shared:

We frequently receive excellent feedback on our food products. However, due to the Bureau of Food and Drugs' lack of certification, we cannot promote our items in malls, significantly limiting our market reach. We cannot apply because we lack a standard processing area. (P1, FGD6)

The women perceive this situation as a barrier to their empowerment, resulting in disparities in economic opportunities among groups.

### ***Tokenism of support services***

The participants' narratives suggest surface-level engagement, irrelevant support services, and a lack of infrastructure support from the development agencies providing support services to the SHGs. Though participant SHGs receive support services, several members expressed disappointment in the quality, relevance, and responsiveness of the production and processing equipment they have availed. For example, a participant explained: "The item provided is a thread intended for a small sewing machine, which differs from the machine we utilize for *Inawol* production. This is truly an unnecessary expenditure; we have no use for them!" (P2, FGD3). The same participant remarked, "If I were to rate the usefulness and relevance of the equipment given to us, it would only be 25% out of 100%." They believe that the provision of those support services overlooked their needs. The participants also revealed that they had a consultation meeting with the agency and took photos of their sewing machine and equipment. However, the equipment they received significantly differed from what they had requested.

Similarly, some groups have expressed concern about the lack of infrastructure support services. One participant stated, "Despite receiving production machines and equipment, we do not have the necessary space or structure to house them" (P2, FGD6). Participants believed that their participation in the provision of support services was superficial and merely compliance with the agencies' bureaucratic procedures.

### **Discussion**

The study's findings concur with previous empirical studies highlighting the enablers and barriers to women's empowerment in SHG. The participants' narratives across groups demonstrated a degree of homogeneity in their perceptions and experiences of empowerment. Several



interrelated and multi-level factors have emerged to enable women's empowerment in SHGs. The study participants considered personal motivation, group incentive properties, supportive intra-familial processes, solidarity among women, and community support and recognition as enablers of their empowerment experience. The women's motivation stems from their religious belief that joining groups contributing to self-improvement and community development is part of faith. According to Chaudhry and Nosheen (2009), a resilient Islamic point of view (religious opinion) could support helping empower Muslim women.

According to Brody et al. (2015), incentives could encourage the poorest individuals to participate in SHGs. The participants' narratives reflected this, suggesting that group membership is a medium for women to access resources and opportunities. The participants' meagre income from entrepreneurial activities, livelihood skills training, seminars, the opportunity to travel for training, and exposure to various activities significantly enhanced their self-confidence and interpersonal skills. Furthermore, the participants reported a sense of achievement from their entrepreneurial activities, which not only provided them with the opportunity to earn income to support their family's daily survival needs but also enabled them to assist their fellow female members by sharing their livelihood skills and religious teachings, particularly relevant for the Muslim majority. This sense of achievement by helping fellow members resonates with Mendoza's (2015) "helper therapy" principle, wherein group members receive psychological rewards from the experience of helping others. This supports previous studies showing that women's ability to influence the direction of social change may create a more just social and economic order and is considered by the United Nations as one of the significant components of empowerment (Brody et al., 2015).

Women who belong to supportive familial processes have more confidence and self-esteem and play a more productive role in their personal, familial, and social lives (Afzal et al., 2024). The supportive intra-familial relationship, identified by women participants as support from their spouse and extended family members who share some of their domestic and household chores, has facilitated their participation in their group. Although not all participants have this kind of family characteristic, women from extended families highlighted how having an extended family lightens their burden.

The study participants described how their solidarity has allowed their fellow women to access various resources within and outside their group. The solidarity stems from the women's empathy for their fellow women. Women recognise how their organised group has helped to give them a voice and to be visible in the community. According to Saluja et al. (2023), SHGs enable women to become part of the value chain, and the familiarity and trust of vulnerable women in such organisations give them a comparative advantage over other formal institutions. Furthermore, the community's support and recognition have given the women a sense of achievement, pushing them to strive harder. This further concurred with the United Nations Research Institute for Social Development's [UNRISD] (2017) solidarity economy based on the principle of cooperation that often prioritises social and environmental objectives more than profit motives that foster transformative change.

Participants across the groups have demonstrated consensus on the barriers that limit their empowerment experiences. Women's narratives show how their low economic status, multiple and competing social obligations, geographical location, and the tokenism of support services have hindered them from getting the most out of their time in SHGs. The results of



low economic status, having many social obligations at once, and differences in location agreed with those of Nichols (2020), Samman et al. (2016), and Brody et al. (2017). These studies suggest that poorer women with young children experience increased barriers to participation in SHGs, affecting their desire and motivation and that childcare contributes significantly to women's poverty by preventing them from engaging in economically productive activities. Brody et al. (2017) observed that the poorest of the poor women were barred from participation in SHG programmes due to limited funds, geographic location, and language. Conversely, the tokenism of support services is one of the most common constraints experienced by the participants, similar to the findings of Tanusia et al. (2016), who found that a lack of business support and networks are among the top barriers to economic empowerment among women entrepreneurs.

## Conclusion

This study aimed to explore the enablers and barriers to women's empowerment in SHGs in the Southern Philippines. Multiple intersecting personal, familial, community, and structural factors have emerged as barriers and enablers of women's empowerment in SHGs. The enabling factors have played a critical role in promoting women's empowerment, as evidenced by their improved access to resources, decision-making, and sense of achievement. These factors bring individual and collective outcomes that contribute to the empowerment experiences of women. However, emerging barriers that disempower women are structurally rooted in deep-seated gender norms reinforced by the country's highly patriarchal society. Thus, using SHGs alone as an instrument for women's empowerment may not be sufficient. Transformative change, like women's empowerment, calls for multi-level and sustained efforts at society's micro, meso, and macro levels.

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# Does spiritual coping help families of international migrants thrive? A qualitative study of social work practices in Kerala

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## ABSTRACT

**INTRODUCTION:** Spiritual coping strategies have been increasingly recognised for supporting emotional wellbeing among families of migrants experiencing prolonged separation. This study investigates the role of spiritual coping mechanisms implemented by professional social workers to help families of international migrants in Kerala, focusing on their effectiveness and associated challenges.

**METHODS:** The study involved two groups of participants: 12 social workers with at least 2 years of experience supporting families of international migrants and 10 individual members of families of international migrants who had received social work interventions incorporating spiritual coping strategies over a minimum period of 6 months. Data were collected through in-depth interviews with social workers and families, focusing on their lived experiences and the integration of spiritual coping practices. Thematic analysis was used to identify core themes and insights.

**FINDINGS:** Three key themes emerged: (1) spiritual coping and resilience, where spiritual practices regulate emotions and provide reassurance; (2) challenges in integrating spirituality, involving ethical dilemmas and balancing professional boundaries; and (3) outcomes of spiritual coping, where shared faith strengthened bonds and offered long-term stress relief.

**CONCLUSIONS:** Spirituality is a practical support tool for such families. However, overreliance and ethical concerns highlight the need for a balanced integration into social work practice.

**Keywords:** Spiritual coping, social work interventions, emotional wellbeing, cultural continuity

The global migration crisis presents immense challenges for both migrants and the professionals who support them (Asadzadeh et al., 2022). As families endure prolonged separation, psychological strain becomes significant (Liddell et al., 2022). Families of international migrants face distress, including anxiety, depression, and isolation, which affects their wellbeing (Ermansons et al., 2023; Hasan et al., 2021). Social

workers play a crucial role in addressing these challenges, yet their strategies remain underexplored (Taha et al., 2024).

This study examines the intersection of spiritual coping and social work in Kerala. Families often use prayer and meditation to manage distress, yet their integration into social work is insufficiently studied (Banerjee et al., 2021). Social workers recognise

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spirituality as vital in fostering resilience, using it as a tool to support migrant families (Ciaramella et al., 2021; Olcese et al., 2023). However, tensions arise between spiritual strategies and conventional secular approaches in social work (Aggarwal et al., 2023). To address this gap, this study advocates including spiritual coping as a legitimate social work component, challenging the stigma around alternative mental health approaches (Ahad et al., 2023; World Health Organization [WHO], 2023).

The role of spirituality in Kerala parallels Māori cultural practices in Aotearoa New Zealand, where both emphasise holistic wellbeing. Kerala's spiritual institutions and Māori communal spaces offer spiritual and social support, fostering belonging (Williams et al., 2018; Wilson et al., 2021). Rituals like Kerala's prayer sessions and Māori karakia reinforce cultural identity and provide emotional stability (Greaves et al., 2023; Taute et al., 2023). Both frameworks empower individuals by drawing strength from traditions, highlighting spirituality's relevance in global social work (Drisko & Grady, 2019; Lockhart et al., 2019).

### **Spirituality, power dynamics, and ethical considerations in social work**

Spirituality in Kerala plays a vital role in the emotional wellbeing of migrant families, offering coping mechanisms during separation. While religion provides communal support, spirituality extends beyond religious boundaries, serving as a personal resource for meaning, purpose, and resilience (Andrade et al., 2023; Coope et al., 2020). Meditation, prayer, and mindfulness help regulate stress and anxiety (Kienzler et al., 2024; Sari et al., 2021). Although personal, and not always tied to spiritual institutions, these practices enable families to navigate emotional struggles (Alkholy et al., 2022). However, integrating spirituality into social work requires careful navigation of power dynamics to prevent the imposition of belief

systems on vulnerable individuals. Social workers must remain sensitive to diverse spiritual beliefs, ensuring that spirituality is a tool for resilience, not indoctrination (Francoeur et al., 2016).

In Kerala's multicultural setting, collaboration with spiritual institutions must balance cultural sensitivity with ethical practice. While offering emotional and social support, these institutions can create power imbalances if not approached carefully (Andersen et al., 2021; Jones, 1986). This risk is particularly significant in rural areas, where families may have limited resources to question spiritual guidance (Bjørlykhaug et al., 2021). Social workers must ensure that spiritual support remains voluntary, respecting family beliefs while maintaining professional boundaries (Tavares et al., 2022; Willemse et al., 2020). Collaboration with spiritual leaders should prioritise family autonomy, offering support without coercion and ensuring that spirituality remains a beneficial and ethical resource in social work (Appiah et al., 2024; Tabor et al., 2019; Willemse et al., 2020).

### **Integrating spiritual coping in social work: a holistic approach**

In Kerala's rural villages, challenges such as limited mental health resources and prolonged separation-related stress are common. Families rely on spiritual traditions for comfort, managing stressors like economic instability and emotional isolation (Firdaus, 2017; Omelchenko et al., 2018). Social workers recognise that effective intervention requires more than secular support—it must incorporate community spiritual values. By integrating spiritual coping, social workers create a holistic support system aligned with cultural norms while addressing mental health needs (Kumar & Pramod, 2016; Rajan, 2023).

This approach involves assessing families' emotional, psychological, and spiritual needs and recognising their multifaceted



experiences. Social workers design interventions to meet each family's religious and spiritual background, ensuring that coping mechanisms resonate with cultural values. Collaboration with religious leaders helps integrate rituals such as prayer, meditation, and spiritual counselling alongside traditional therapeutic techniques (Mandelkowitz et al., 2021; Yantzi et al., 2023). This culturally sensitive model enhances intervention effectiveness by strengthening families' spiritual foundations (De Haene & Rousseau, 2020; Matlin et al., 2018).

A key feature of this approach is empowerment—social workers encourage families to draw strength from spirituality rather than imposing a singular practice. This strategy fosters resilience, reinforcing cultural identity and agency. Community engagement plays a crucial role, with spiritual institutions facilitating emotional support through communal activities that reduce isolation. Social workers promote emotional relief and social cohesion by providing access to these resources. This holistic model strengthens cultural and spiritual identities, contributing to more resilient communities (UNESCO, 2021; Gümüşay et al., 2019).

Through strategic integration, spiritual coping mechanisms offer an effective solution to the emotional challenges faced by migrant families, promoting a culturally responsive social work practice (Iyer et al., 2023; Matlin et al., 2018).

## Methods

### *Terminologies used for participants*

In this study, the phrase “international migrants from Kerala” refers to individuals who have migrated from Kerala to other countries, mainly for blue-collar jobs in sectors such as construction, hospitality, and domestic work, particularly in Gulf Cooperation Council (GCC) countries (Bahrain, Kuwait, Oman, Qatar, Saudi

Arabia, and the United Arab Emirates). “Families of international migrants in Kerala” refers to the left-behind family members—spouses, children, parents, and kin—residing in Kerala while their relatives work abroad. Notably, this term does not refer to migrants living in Kerala.

## Participants

Participants were recruited through personal networks and professional social work forums, including a migrant worker support group with over 15,000 members. Purposive sampling was used to select professional social workers in Kerala who worked with families of international migrants experiencing prolonged separation and who integrated spiritual coping mechanisms into their interventions. This included social workers and families, allowing for a comprehensive understanding of the intervention's effectiveness.

Spiritual coping includes spiritual practices such as prayer, scripture study, and non-religious (but spiritually significant) activities like community support, meditation, and connection to nature. Participants self-reported these mechanisms, reflecting diverse personal and cultural interpretations of spirituality.

The study involved two groups:

1. Social workers with at least 2 years of experience working with migrant families facing emotional distress.
2. Families of international migrants who had received social work support for at least 6 months and engaged in spiritual coping strategies.

The families represented diverse demographic backgrounds, including rural Kerala, and varied in education, economic status, and migration history. Participants included parents, spouses, siblings, and extended family members in joint family systems. Children were excluded.

Twelve social workers (ages 30–55,  $M = 42$ ) with 2–25 years of experience participated. The 10 families (35 individuals) came from rural areas, with migration-induced separation lasting from months to years. Economic and social factors influenced their experiences. Families practised various spiritual coping strategies, including daily prayer, yoga, meditation, and community rituals. Some followed specific religious traditions (Hinduism, Christianity, Islam), while others engaged in secular spiritual coping. This sample aligns with qualitative research standards, providing a diverse dataset for an in-depth analysis of spiritual coping in social work.

### Procedures

Following ethical standards, participants were fully informed about the study, their rights, and voluntary participation. Ethical approval was obtained from the university as part of the PhD process, and informed consent was secured before data collection.

### Data collection

Semi-structured, confidential, one-on-one interviews were conducted, allowing open discussions. The interview guide, reviewed by a mental health social worker, focused on spiritual coping mechanisms. Open-ended questions avoided pre-set themes, encouraging participants to share freely. Interviews were audio-recorded, transcribed, anonymised, and analysed using thematic analysis.

### Reflexivity

The researcher's social work background informed the study while maintaining neutrality. Personal spiritual practices were not disclosed to minimise bias. Reflexivity was ensured throughout, with attention to explicit and implicit biases to maintain objectivity.

### Analysis approach

The thematic analysis provided a systematic yet flexible framework for identifying key

themes. This inductive, data-driven approach ensured findings reflected participants' lived experiences within Kerala's socio-cultural context. The study explored how spiritual coping shaped emotional resilience among families of international migrants. A literature review identified a research gap: While spirituality is acknowledged as a coping tool, its systematic application in social work interventions for migrant families remains underexplored.

### Limitations

This study has several limitations. Self-reported data may be influenced by social desirability bias. Findings are specific to Kerala and may not be generalised to other contexts. Children's perspectives were excluded, focusing solely on adult family members and social workers. While consistent with qualitative research standards, the sample size may not capture the full diversity of experiences.

Despite these limitations, the study provides valuable insights into the role of spiritual coping in supporting the emotional wellbeing of families of international migrants in Kerala.

### Results

The role of spiritual coping mechanisms in supporting the emotional wellbeing of families of international migrants in Kerala emerges as a profound and multi-faceted theme. Spirituality, in various forms, has been reported as a critical resource that helps families navigate the psychological challenges associated with prolonged separation.

### Key themes and insights

#### *Theme 1: The role of spiritual coping in emotional stability*

Spiritual practices, including prayer, meditation, and mindfulness, are crucial for

helping families of international migrants manage the emotional stress caused by separation. These practices offer both immediate relief and long-term emotional stability.

**Subtheme 1.1: Spiritual practices for emotional regulation and clarity in social work.**

Spiritual practices such as meditation and reflection help families regain emotional balance. Social worker 4 noted, "Families engage in quiet meditation to calm down and regain focus." Similarly, Family 3 (Parent) shared, "Reflecting on my emotions daily helped me understand myself better." These practices assist families in processing emotions and maintaining resilience in stressful situations. Family 5 (Parent) added, "Meditation was my way of connecting with a deeper sense of peace."

**Subtheme 1.2: Spirituality as a coping mechanism for anxiety and depression.**

Spiritual practices provide relief from anxiety and depression. Family 6 (Parent) said, "Deep breathing helped me let go of worry and find clarity." Family 7 (Parent) emphasised reflecting on purpose: "It made me feel more grounded and less fearful." These practices help families navigate stress and maintain hope despite challenges. Family 3 (Parent) added, "Focusing on the good things I still had helped me reset my mind."

***Inferences and analysis of theme 1.***

Spiritual coping through practices like prayer and meditation plays a significant role in managing emotional stress, reducing anxiety, and offering hope. Social workers recognise the value of these practices in fostering emotional resilience, helping families process grief, and maintaining emotional wellbeing during difficult times.

***Theme 2: The cultural and religious underpinnings of spiritual coping***

The cultural and religious contexts in which families of international migrants live shape their spiritual coping mechanisms. Family rituals, prayers, and the guidance of religious leaders play key roles in navigating emotional and social challenges related to migration. These spiritual practices offer emotional stability and foster a sense of connection despite physical separation.

**Subtheme 2.1: Cultural significance of spirituality in family life.**

Spirituality is deeply embedded in family life, with practices like collective prayers and rituals promoting emotional cohesion. Social worker 5 observed, "The whole family participates in spiritual practices, helping them stay connected emotionally despite being apart." Family 9 shared, "My mother taught me how to pray, and I continue that tradition with my children." These practices, passed down through generations, provide emotional stability, especially during tough times. Family 4 (Parent) emphasised, "We include my husband in our prayers even though he's far away, bringing us peace." Rituals like lighting a lamp before important events offer a sense of purpose and continuity. Social workers recognise these practices as vital in maintaining familial bonds and emotional resilience.

**Subtheme 2.2: Role of spiritual leaders in facilitating coping.**

Spiritual leaders provide essential emotional support to families of international migrants. Social worker 7 noted, "Families often visit the temple for blessings and prayers, which give them peace and reassurance." Family 1 (Parent) shared, "The local temple offers a support group for families of the blue-collar international migrant, where we feel connected." Spiritual leaders provide comfort through prayer and personal counsel, helping families manage anxieties. Family 3 (Parent)

emphasised, “The priest prays for us and checks in on our well-being, which is very comforting.” Social workers encourage families to engage with spiritual leaders to strengthen their emotional support systems.

#### *Inferences and analysis of theme 2.*

Cultural and spiritual practices deeply influence spiritual coping, which helps families stay emotionally connected despite separation. Shared rituals (such as family prayers), provide comfort and unity, while spiritual leaders offer reassurance and support. These practices give families a sense of stability and continuity, fostering emotional resilience. Social workers recognise the importance of these practices and incorporate them into their support strategies.

### ***Theme 3: The integration of spiritual practices into social work***

This theme examines how spiritual practices are integrated into social work, enhancing the emotional wellbeing of families of international migrants. Spiritual coping is a complementary tool, offering emotional stability and resilience. However, challenges arise in balancing spiritual practices with social work’s professional boundaries and secular nature.

**Subtheme 3.1: Social workers’ views on spiritual coping as a complementary tool.** Social workers recognise the value of integrating spiritual practices with traditional evidence-based methods to enhance emotional support for families of blue-collar international migrants. Spirituality is seen as a tool that provides comfort, peace, and stability during difficult times. Social worker 2 stated, “Integrating spiritual practices enhances emotional wellbeing.” Social worker 3 added, “Spirituality complements evidence-based methods by offering peace and grounding.” Spirituality also helps families reconnect with their cultural roots, providing hope

and resilience. Social worker 5 noted, “Spiritual coping fills in the gaps when traditional methods fall short,” underscoring the role of spirituality in addressing emotional needs that conventional approaches may not meet.

**Subtheme 3.2: Challenges in integrating spiritual practices.** Integrating spirituality into social work presents challenges, particularly in maintaining professional boundaries and navigating the secular nature of the profession. Social workers must avoid imposing beliefs while offering spiritual support. Social worker 4 emphasised, “We encourage families to connect with their faith, but we don’t impose it.” However, as Social worker 9 noted, “It’s a fine line between offering spiritual support and crossing into personal space.” Maintaining this balance is essential to avoid overstepping boundaries, as highlighted by Social worker 6: “Spiritual practices are personal, and we must not become over-involved.” Social workers view themselves as facilitators, guiding clients without taking on the role of spiritual leaders.

#### *Inferences and analysis of theme 3.*

Spiritual coping is a valuable complement to traditional social work methods, offering emotional support for families of blue-collar international migrants. However, social workers face challenges in maintaining professional boundaries while integrating spiritual practices. Spiritual support should be provided, and clients’ autonomy and beliefs should be respected. Despite these challenges, social workers acknowledge the importance of spirituality in fostering resilience and maintaining hope during difficult times.

### ***Theme 4: Resilience through spiritual coping***

This theme examines how spiritual coping mechanisms contribute to the emotional

resilience of families of blue-collar international migrants. Spiritual practices provide stability, fostering strength and hope in the face of migration-related stress. Faith and shared rituals become essential for emotional grounding during separation and uncertainty.

**Subtheme 4.1: Strengthening emotional resilience in families.**

Spiritual beliefs serve as long-term sources of resilience, enabling families to endure the ongoing stress of migration. The Family 4 Respondent shared, "My faith has been my anchor. Even though my husband is far away, we will overcome these challenges together." Spiritual coping also acts as a protective barrier against prolonged stress. Social worker 9 explained, "Spiritual coping provides a sense of continuity and protection, especially when families are separated for long periods." Family 2 (Parent) added, "My faith keeps me strong. It helps me overcome the tough days when I miss my family." Spirituality offers families stability in uncertain times, reinforcing their resilience and sense of hope.

**Subtheme 4.2: Family bonding through shared faith.** Shared spiritual practices are key in strengthening family connections, even across physical distances. Family 5 (Parent) noted, "We pray together every evening. This practice has made us feel united despite the physical separation." This ritual provides a sense of emotional closeness. Family 3 (Parent) shared, "Even though we're apart, praying together brings us closer." For some families, spirituality fosters a sense of belonging and helps them stay connected to their cultural roots. "When we pray together, it reminds us of our family member who lives abroad and keeps our family united," explained Family 1 (Parent).

***Inferences and analysis of theme 4.***

Spiritual coping is integral to the

emotional resilience of blue-collar international migrant families. Families find the strength to cope with their loved ones' migration challenges through shared faith and individual beliefs. Spirituality provides emotional grounding and strengthens family bonds, creating a sense of unity and continuity in difficult times.

***Theme 5: Spiritual coping and psychological well-being***

This theme explores the role of spiritual coping in maintaining psychological wellbeing, especially in the context of loss and uncertainty. Spiritual practices help families of international migrants heal emotionally, providing comfort and stability during times of grief and stress.

**Subtheme 5.1: Coping with loss and separation.** Spirituality plays a crucial role in helping families deal with the emotional impact of losing loved ones due to migration. Social worker 3 explained, "For many, the absence of a family member was seen as a loss. Spiritual practices like rituals and prayers provided comfort and healing." Rituals offer a space for mourning, and prayers help families process grief. Family 6 (Parent) shared, "Whenever I felt uncertain about my husband's safety, I prayed for his wellbeing. It gave me peace of mind." Spirituality also helps families navigate the emotional strain of prolonged separation. "I find solace in my faith," said Family 2 (Parent). "When I feel lonely, praying gives me a sense of connection with my loved ones, even if they're far away."

Spiritual practices ease the pain of loss and offer protection during uncertain times. Family 3 (Parent) noted, "When I worry about my child's safety, I pray. It's like a shield that calms my fears." This highlights how spirituality helps mitigate anxiety and brings emotional stability during moments of vulnerability.



*Inferences and analysis of theme 5.*

Spiritual coping serves as a powerful tool for emotional healing and psychological wellbeing, especially for families of international migrants facing loss and uncertainty. Spiritual practices offer comfort, providing a sense of connection, healing, and emotional stability during challenging times of separation and grief.

**Theme 6: The limitations and drawbacks of spiritual coping**

This theme examines the potential limitations and disadvantages of spiritual coping, focusing on the risks of over-reliance on spirituality and the need for a balanced approach that includes practical solutions. While spirituality provides valuable emotional support, its overuse can sometimes hinder practical problem-solving and lead to emotional exhaustion.

**Subtheme 6.1: Over-reliance on spiritual practices.** Some social workers raised concerns about families depending too heavily on spiritual practices while neglecting practical solutions. Social worker 10 remarked, “While spirituality is helpful, it cannot replace practical steps like legal support, education, or healthcare. Families must also address these practical aspects.” This highlights the importance of balancing spiritual practices with actionable, real-world solutions to address migration-related challenges.

In certain instances, families became emotionally exhausted from relying solely on faith to resolve their difficulties. Family 2 (Parent) shared, “I always prayed, but sometimes I felt like it wasn’t enough. I realised I needed to take more action, not just pray.” This reflects the potential for frustration and burnout when spirituality is seen as the sole solution to complex issues. Similarly, Family 4 (Parent) expressed, “There were moments when I felt like I was losing

hope as if prayer alone wasn’t helping. I had to focus on finding practical ways to move forward.”

Social workers also noted the risk of families avoiding necessary action in favour of spiritual reliance. Social worker 8 reported, “Sometimes, families get caught up hoping for divine intervention instead of actively seeking help. It’s important to remind them that spirituality should complement practical efforts, not replace them.” This underlines the importance of integrating spiritual and practical coping mechanisms to address the full scope of challenges faced by families of international migrants.

*Inferences and analysis of theme 6.* While spiritual coping can offer vital emotional support, an overreliance on it may hinder families from seeking practical solutions and lead to emotional exhaustion. Social workers emphasise the need for a balanced approach, where spirituality complements, rather than replaces, practical actions to address migration-related challenges.

**Theme 7: Social workers’ perceptions of spiritual coping**

This theme explores how social workers perceive the role of spiritual coping in supporting the families of international migrants, recognising its value while maintaining a professional approach. Social workers acknowledge the positive impact of spiritual practices and highlight their ethical responsibility to ensure neutrality and respect for clients’ beliefs.

**Subtheme 7.1: Acknowledging the value of spiritual practices.** Social workers widely acknowledge the positive role of spiritual coping in enhancing the emotional wellbeing of families of international migrants. Social worker 12 stated, “I’ve seen families thrive with the help of their faith. It provides them with

a framework for coping with challenges that we, as social workers, can't always address." Spiritual practices are seen as an essential resource for families facing the emotional toll of migration, helping them build resilience in difficult circumstances.

However, social workers also emphasised the importance of maintaining a professional stance while acknowledging the value of spirituality. Social worker 11 remarked, "It's essential to encourage spirituality but also to remain neutral and professional in our approach to ensure families don't feel pressured." This reflects the need for a delicate balance between offering spiritual support and respecting the client's autonomy, ensuring that spirituality is introduced as an option, not an imposition.

Social worker 14 explained, "Spiritual coping is a powerful tool, but we must ensure we don't cross professional boundaries. It's about supporting families in ways that respect their personal beliefs." This reinforces the idea that social workers should facilitate spiritual coping while maintaining professional ethics, ensuring that spiritual practices do not overshadow the primary goals of social work.

Social worker 9 added, "When we respect their spiritual beliefs, it creates a sense of trust and emotional security. But we must always be mindful of not overstepping, as our role is to support, not to guide their spiritual journey." This highlights the importance of fostering trust and emotional safety while upholding professional integrity in spiritual coping.

#### *Inferences and analysis of theme 7.*

Social workers recognise the significant role of spiritual coping in supporting the families of international migrants but are equally aware of the need to balance this with professional ethics. They emphasise the importance of

offering spiritual practices as an optional resource, ensuring that their support does not infringe on the personal beliefs or autonomy of the families they assist.

## **Discussion**

The study examines how spiritual coping helps families of international migrants manage emotional challenges, particularly stress, anxiety, and grief. Prayer, meditation, and mindfulness provide immediate relief and long-term emotional stability (Shen, 2023). These practices help individuals regulate emotions, gain clarity, and maintain resilience (Sterle et al., 2018). Families describe spirituality as a source of strength and comfort, particularly during times of uncertainty. Social workers recognise the value of these coping mechanisms in supporting emotional wellbeing (Ellis et al., 2022).

Cultural and religious influences shape how families use spiritual coping. Family rituals, prayers, and guidance from spiritual leaders strengthen emotional bonds and provide stability. Many families continue long-standing traditions of worship and religious practices, which help them feel connected despite physical separation. Social workers encourage families to engage with faith-based support systems to enhance emotional wellbeing. Spiritual leaders play an important role by offering reassurance, guidance, and a sense of belonging (Duplantier & Williamson, 2023).

Integrating spirituality into social work has benefits but also challenges. Social workers see spiritual practices complementing evidence-based approaches, providing families with peace and continuity (Celano et al., 2021). However, they must also respect professional boundaries and the secular nature of their work. While encouraging families to draw on their faith, they remain mindful of not imposing beliefs and finding the right balance between supporting spiritual coping and maintaining professional neutrality.

Spiritual coping contributes to resilience, helping families cope with the difficulties of migration. Faith and shared practices provide emotional stability and hope, allowing families to endure long periods of separation. Many describe their faith as an anchor, strengthening them during difficult times. Rituals and prayers reinforce emotional endurance and foster a sense of unity, even when family members are apart. Social workers observe that spirituality gives families a sense of purpose and emotional grounding, helping them manage migration-related stress (Lusk et al., 2019).

The findings align with psychological theories of coping and resilience. Mindfulness-based acceptance and commitment therapy (ACT) highlights self-awareness and acceptance as key to managing stress (Hayes, 2004; McLean & Follette, 2016). Lazarus and Folkman's (1984) transactional model of stress and coping explained how individuals assess stress and choose responses, with spirituality as a resource for reframing difficulties. Bronfenbrenner's (1979) ecological systems theory illustrates how family, social workers, and religious communities influence coping strategies. Frankl's (1946) logotherapy emphasises finding meaning in suffering, which many migrant families do through their faith. Resilience theory further supports that spiritual coping strengthens emotional endurance during hardship.

Despite its benefits, spiritual coping has limitations. Some social workers express concern that families may rely too heavily on faith, neglecting practical solutions. While spirituality offers comfort, it cannot replace essential resources such as healthcare, legal support, and education. Over-reliance on prayer or meditation without taking action can lead to frustration and emotional exhaustion. A balanced approach, combining spiritual coping with practical problem-solving, is necessary for long-term wellbeing.

Social workers acknowledge the positive impact of spiritual coping but remain aware

of their ethical responsibility to maintain professional boundaries. Many believe spiritual practices are key in supporting families but stress the importance of respecting individual beliefs. They aim to foster trust and emotional security while ensuring spirituality is introduced as an option rather than an obligation. Social workers can provide meaningful support by maintaining neutrality and professionalism without overstepping ethical guidelines.

Overall, spiritual coping is an essential source of emotional support for families of international migrants. It provides stability, comfort, and resilience, helping families manage separation challenges. However, it should complement, rather than replace, practical efforts to address migration-related difficulties. Social workers play a vital role in assisting families to find this balance, ensuring that spirituality remains a supportive resource rather than a sole solution.

### **Professional social work practice, role of social workers, and contribution to social work practice and intervention**

#### ***The context: social work in migrant support***

The context of this study lies in the challenges faced by families of blue-collar international migrants in Kerala, where social workers play a pivotal role in facilitating support mechanisms that address the emotional, social, and psychological needs of families affected by prolonged separation. In this study, the social workers were tasked with integrating spiritual coping strategies into their interventions to support families experiencing the stress of migration. Multifaceted stressors, including economic instability, family separation, and cultural adaptation, mark the migrant context. Social workers in this context serve as key facilitators of resilience, utilising spiritual coping mechanisms to provide emotional

and psychological support to families navigating these challenges.

Social work practice in such settings is deeply influenced by the complexity of migration dynamics, which often involve trauma, dislocation, and the need for ongoing emotional and psychological care. It is widely acknowledged that supporting migrant populations involves addressing their material needs and psychological and emotional well-being. This study builds on that foundation by exploring how social workers in Kerala use spiritual coping to mediate these challenges. The role of spirituality, particularly as it pertains to migrant support, reflects a growing recognition in social work that spiritual practices are not only integral to personal wellbeing but also play a significant role in professional practice, especially in contexts where clients experience considerable stress and trauma.

### ***The primary outcome: spiritual coping as a mechanism of resilience***

One of the central findings of this study is the positive role that spiritual coping mechanisms play in fostering resilience among both social workers and families of blue-collar international migrants. Social workers reported that spiritual practices such as prayer, meditation, and mindfulness provided a grounding force that allowed them to remain calm and focused amidst the chaos and trauma that often characterise the lives of families of blue-collar international migrants. This aligns with the broader body of research that supports the idea that spirituality can act as a protective factor against stress and burnout, enhancing resilience in high-pressure environments.

In social work, resilience is often seen as a critical factor in successful interventions, especially when dealing with vulnerable populations like migrants. Social workers who integrate spiritual coping into their practice report an increased ability to

manage their emotional responses, leading to more effective client interactions. This study supports the argument that spiritual coping is not just a personal tool for social workers but a professional one, contributing to the broader goals of social work interventions by enhancing emotional stability and the capacity to respond to client needs compassionately and effectively.

### ***The secondary outcome: challenges and limitations of spiritual coping***

While the benefits of spiritual coping were evident, the study also revealed the limitations and challenges associated with its integration into professional practice. Some social workers reported feelings of ostracism or discomfort when discussing their spiritual practices with colleagues, suggesting that there remains a stigma around spirituality within the social work profession. This is consistent with findings from other research that suggest spiritual practices can sometimes be seen as incompatible with the secular nature of social work. The tension between personal beliefs and professional boundaries is a challenge that many social workers face, mainly when working in multicultural and diverse settings where spiritual practices may differ significantly from those of their colleagues or clients.

Despite these challenges, the study indicates that when spiritual coping mechanisms are respected and integrated thoughtfully, they can enhance the overall effectiveness of social work interventions. This highlights the need for professional development and training in integrating spiritual coping into social work practice and creating a more inclusive environment of diverse spiritual beliefs. Social work practice should not shy away from addressing the spiritual dimensions of client care, as spirituality is often a significant aspect of individuals' coping mechanisms and resilience. As such, social workers must be equipped with the tools to navigate these complexities while focusing on client-centred care.

***The role of social workers: facilitators of spiritual coping***

Social workers in this study functioned as service providers and facilitators of spiritual coping strategies for families of blue-collar international migrants. They helped clients draw on their spiritual resources, guiding them to engage with their faith in ways that would help them cope with the stressors of migration. This reflects a growing recognition of social workers' role in promoting clients' holistic wellbeing, incorporating psychological and social interventions and spiritual support.

In practice, social workers must adopt a flexible, client-centred approach that recognises the importance of spiritual beliefs in the lives of families of blue-collar international migrants. This is particularly important in Kerala, where a significant portion of the population adheres to spiritual practices that may offer comfort and strength during times of adversity. Social workers can enhance their practice by learning to assess and integrate spiritual coping mechanisms into their interventions, thus providing more comprehensive support to families of blue-collar international migrants.

Furthermore, the study suggests that social workers can play a critical role in facilitating community support networks, both within migrant communities and across broader societal contexts. Helping clients build connections with others who share similar spiritual beliefs or practices enables social workers to create a sense of belonging and support, both essential for resilience. This community support can buffer migration stress's adverse effects, offering emotional and practical resources to help clients navigate their challenges.

***Contribution to social work practice and intervention***

Integrating spiritual coping into social work practice has significant implications for

the field, particularly in contexts involving families of blue-collar international migrants and other vulnerable populations. First, it highlights the importance of adopting a holistic approach to social work that recognises the interconnection between wellbeing's psychological, social, and spiritual dimensions. By incorporating spiritual coping mechanisms into interventions, social workers can enhance their ability to support clients comprehensively, addressing their immediate material needs and emotional and spiritual wellbeing.

Second, this study contributes to the ongoing conversation about the role of spirituality in social work, challenging the traditional secular approach that has often excluded spiritual practices from professional interventions. The findings suggest that spirituality is not only a personal resource but also a professional one, enhancing the capacity of social workers to manage stress and remain effective in their practice. As such, there is a growing need for social work education and training programmes to incorporate spiritual competence, enabling practitioners to support better clients who rely on spiritual coping mechanisms.

Lastly, the study calls for a broader recognition of the importance of spiritual coping in social work interventions, particularly in multicultural and diverse settings. Social workers must be prepared to engage with clients' spiritual beliefs in a respectful and supportive manner, integrating these beliefs into their practice to promote holistic healing and wellbeing. By doing so, social workers can ensure that their interventions are effective, culturally sensitive, and responsive to their clients' needs.

**Conclusion**

This study contributes to understanding how social workers can integrate spiritual coping strategies into their practice to



enhance the wellbeing of families of international migrants in Kerala. The findings suggest that spiritual coping mechanisms foster resilience, manage stress, and facilitate community support. While there are challenges in integrating spirituality into professional practice, the potential benefits for social workers and clients are significant. Embracing a holistic approach that incorporates spiritual dimensions allows social workers to offer more effective and culturally sensitive interventions, strengthening their support for families of international migrants as they face migration-related challenges. Social work practice must evolve to recognise and respect the spiritual needs of clients, and practitioners must be equipped with the knowledge and skills to integrate spiritual coping into their interventions.

## Statements & declaration

### **Acknowledgement: academic and spiritual positioning of the authors**

This study acknowledges how our academic and spiritual backgrounds shape our perspectives. As researchers, we adopt observational and participatory roles, engaging with participants to understand their experiences and beliefs. We approach the research with awareness of our biases and the diversity of spiritual fields in our study population, balancing academic rigor with personal reflection to ensure our findings are informed by scholarly inquiry and participants' lived experiences.

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## Competing interests

The authors declare no competing interests related to this research.

## Author contributions

Both authors contributed equally to conceiving the research idea, conducting the literature review, and writing the manuscript. They also contributed to data analysis and interpretation and reviewed and approved the final version of the manuscript.

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# I just graduated—now what? A wero to social work education’s settler colonialism and White supremacy

Ranginui Belk (Ngāti Tūwharetoa, Rereahu, Ngāti Hine), Lana Petrovic and Eileen Joy, University of Auckland | Waipapa Taumata Rau

## ABSTRACT

**This** article examines settler colonialism and White supremacy within social work education and practice in Aotearoa New Zealand through two social work graduates’ perspectives; Māori and Pākehā respectively. Despite the profession’s stated commitment to Te Tiriti o Waitangi, biculturalism and Pūao-te-Āta-tū (The Māori Perspective Advisory Committee, 1988), settler-colonial structures persistently shape and constrain it. For example, Pākehā frameworks are favoured over mātauranga (Māori knowledges), tikanga (customs) are settler colonial, cherry-picked, financial barriers limit minoritised social worker efforts and supposedly colour-blind health approaches conceal institutionally racist harms. Our wero to social work educators and regulators demands they choose between modern, colonial, tokenistic acknowledgement of mātauranga and non-Pākehā frameworks, or rejecting White supremacy and embodying biculturalism. We posit decolonisation demands not curriculum tweaks but biculturally advised reimagining and restructuring of how power operates within the social work profession. The future of ethical social work practice demands unflinching collective resistance to systems that perpetuate settler colonialism, uphold White supremacist ideologies, and continue to marginalise racialised communities.

**Keywords:** Settler colonialism, White supremacy, social work

We are two graduates of social work education, and one researcher and lecturer, from different cultural backgrounds, but united in our concern for social work’s education and direction. We offer both personal testimony and critique of the current landscape. Our distinct experiences converge on a shared understanding: meaningful change within the profession requires honest confrontation with White supremacy’s and settler colonialism’s ongoing influence in the field, and the dismantling of systems that perpetuate settler-colonial dominance under the guise of professional practice.

We are placing a wero in the way that Smith et al. (2022) described in their critique of higher education’s White fragility and institutional racism. To *wero* is to challenge visitors via casting a small spear or dart (taki) to the ground before them (Smith et al., 2022). The manner in which someone picks up the taki reveals their intent for visiting: taking it by the handle suggests confrontational intent, while carefully lifting by the blade demonstrates humility and openness to dialogue (Smith et al., 2022). We cast our wero at the feet of those involved in Aotearoa New Zealand social work, inviting reflection on their deeds, where their alliances lie and refocusing (much as Hone

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Heke and Te Ruki Kawiti of Ngāti Hine did during early Crown–Māori conflicts) their efforts on snuffing out settler-colonialism and White supremacy over any individual privileges (Webber & O'Connor, 2022). Heke obtained chief Kawiti's assistance in resisting settler-colonial attacks after he gifted Kawiti a greenstone pounamu smeared with tutae (human excrement), which—without words—symbolised the British Crown dishonouring Māori nationwide (Webber & O'Connor, 2022). Token acknowledgements of mātauranga and karakia are not sufficient to address this wero; rather, what is required is an enduringly motivated workforce and educators that meaningfully equip upcoming and existing (and particularly non-Pākehā) social workers to reject institutional racism and White supremacy. Further, an honest commitment to biculturalism is necessary to address the severe inequities our nation experiences.

Ko Ranginui Logan Belk ahau, he uri nō Ngāti Tūwharetoa, Rereahu, Ngāti Hine. I am Ranginui, a descendant of Ngāti Tūwharetoa, Rereahu and Ngāti Hine. Despite now being permitted to practise as a bicultural social worker with my BSW Honours qualification, I believe I will struggle to achieve social work's professed ethical aims under Te Tiriti as informed by the Aotearoa New Zealand Association of Social Work (ANZASW) without being (intentionally and unintentionally) mistreated by my employer because the values of the state and association are opposed (2019). This opposition can be most powerfully seen in almost two centuries of state misrepresentation and misrecognition of Te Tiriti o Waitangi (Te Tiriti) (Boulton et al., 2020). After my first year of undergraduate study, I grew to understand that Aotearoa New Zealand social work aspires to practise biculturally (in a Te Tiriti-led fashion), but rarely does. Concerningly, I felt that there were few Aotearoa New Zealand social workers intending to do so. Despite constant reminders in social work settings of negative statistics across the

social drivers of health for Māori (and no concomitant examination and questioning of Pākehā as over-represented in positive statistics), te reo (Māori language) acquisition and promotion of non-Western social work frameworks remains underfunded and scant amongst the profession (Haydon & Ruwhiu, 2024). Acknowledging this deficit, I supplemented my social work education with 3 years of full immersion te reo courses and whānau/iwi (extended family/Māori tribe) based wānanga (learning).

I am Allanah Petrovic, a Pākehā woman with Serbian and Scottish heritage, born and raised in Tāmaki Makaurau. My recent completion of a Master of Social Work (Professional) catalysed a shift in my Pākehā-dominated worldview, deepening my appreciation for He Whakaputanga (1835) and Te Tiriti (1840)—both as someone living on colonised land and as an equity advocate working in communities. Throughout my academic journey, I encountered a troubling reality: social work education fails to adequately centre the transformative social justice work necessary to tear down, or even merely question, the institutional systems perpetuating Māori oppression in Aotearoa New Zealand. This critical oversight means that the profession often continues to uphold colonial power structures and White supremacist ideologies while attempting to profess alliance to te Tiriti-based biculturalism.

I am Eileen Joy, a Pākehā woman whose English working-class ancestors settled in Taranaki in 1842. My journey as a social worker, educator and researcher has meant a critical examination of my ancestral heritage and Whiteness alongside a deepening appreciation and understanding of my role as Tangata Tiriti. My teaching role allows me to walk alongside, encourage, unsettle and even be *unsettled* by students such as Ranginui and Lana.

Our writing therefore presents a wero to social work educators and to others in



the field. This challenge has taken on a newfound urgency in light of recent political developments. The controversial Treaty Principles Bill (2024) as proposed by the ACT party exemplifies the very settler-colonial mindset that we have identified within social work settings. The ACT party asserts that the bill's intent is to offer the same rights and duties for all New Zealanders but has instead emboldened White supremacist anti-Māori rhetoric to alarming degrees across multiple media and social media sites (Hattotuwa, 2024). Despite the profession's stated ethical commitments to Te Tiriti and bicultural practice (ANZASW, 2019; Social Workers Registration Board, 2014), the field remains deeply entrenched in settler colonial structures that privilege Western knowledge systems and methodologies (Haydon & Ruwhiu, 2024; Hollis-English, 2012). We posit that settler-colonial outputs and norms can, and are, deterring Te Tiriti-centric social work graduates from joining the profession and increase and perpetuate burnout experiences of existing practitioners.

### **Defining settler colonialism and White supremacy in New Zealand**

Local institutional racism may be invisible to Pākehā (Crawford, 2016). To best explain this racism, we invite readers to consider Aotearoa New Zealand through the lens of settler colonialism and White supremacy that necessitates our wero.

Settler colonialism can be defined as the actions of an immigrant group displacing, impoverishing, marginalising and assimilating an Indigenous group through land conquest, historic amnesia, myth-making and imperialism (Wolfe, 2006). Indigenous cultures (Māori) have suffered and continue to suffer under such regimes (Mutu, 2019; Walker, 2004; Wolfe, 2006). In this supplanting of Indigenous culture, foreign oppressive systems are imported, further erasing Indigenous epistemologies. For example, patriarchy informs gender roles, working in tandem with settler

colonialism such that Pākehā women are worse off than in traditional Māori society (Glenn, 2015; Mikaere, 2013). The “worthlessness” of women under settler-colonialism layers oppression for wāhine Māori, i.e., racial sexism, and sexed racism (Mikaere, 2013).

In the Aotearoa New Zealand context, intergenerational privilege and nepotism for Pākehā families has ensured Māori and other racialised groups remain comparatively and intergenerationally disadvantaged (Borell et al., 2018). Māori lead consistently across statistics of negative social determinants of health, and have done so for generations (Borell et al., 2018). Perhaps the chief determinant of settler colonial *success* is the extent to which the coloniser believes in their cause: for it is almost impossible to defame, hide and deliberately plan for later generations to forget multiple sites of mass murder due to settler-colonial war by leaving them unmarked and even building roads over them without believing their cause was justified (Belich, 1997; O'Malley & Kidman, 2018). Pākehā histories position themselves as master, implicitly and explicitly privileging their bloodlines over Māori, rendering Māori as savage, sanctioning genocide, torching their homes, and profiting from stolen lands (Borell et al., 2018). Colonial violence is painted as honourable—as something to celebrate (Belich, 1997; Borell et al., 2018). The settler-colonial belief that Māori need to be managed continues to permeate successive governments who disable and break down Māori efforts to preserve and uphold tino rangatiratanga (absolute sovereignty) (Eketone, 2024; Haydon & Ruwhiu, 2024).

Due to the falsely translated English version of the Treaty of Waitangi (1840) that successive settler governments have mythologised to legitimacy, Māori were cheated (and are being cheated) out of exercising their tino rangatiratanga (Mutu, 2019). Governments have done so while accepting international praise given to

Aotearoa New Zealand based on being the epitome of cultural relations between two distinct peoples (Belich, 1997; O'Malley & Kidman, 2018; Tecun et al., 2022; Walker, 2004). The continuance of the Te Tiriti mistranslation serves to maintain illegitimate power and protect White fragility (DiAngelo, 2018; Tecun et al., 2022; Walker, 2004). Deeper still, rather than acknowledging distinct, nuanced and myriad Māori iwi (tribal) structures, the Pākehā–Māori binary has been enforced to better maintain their settler-colonial hoax (Belich, 1997; Tecun et al., 2022). Despite the violence of colonisation, Pākehā New Zealand often refuses to meaningfully acknowledge racial disparities. We believe this is because of White fragility (DiAngelo, 2018; Smith et al., 2022), making Pākehā afraid to acknowledge and reflect on White privilege for fear they may forfeit said privilege, have their expertise questioned, or, at a minimum, experience guilt and shame. Aotearoa New Zealand's history of settler-colonialism and the contrasting hesitance (and often refusal) of Pākehā to bear discussing or accepting the inhumanity of their historic (and ongoing) crimes has created a nation that struggles to understand its own identity (Eketone, 2024; DiAngelo, 2018; Tecun et al., 2022).

White supremacy and settler-colonialism are interconnected systems. Love (2022) described White supremacy as the societal and systemic expression of White people's superiority, allowing them to assert control over other races, both in social interactions and within systems. These repeated assertions range from passive acts, such as claims that Māori are *disconnected* from their culture (without naming the disconnect) to acts of violence such as the continued overrepresentation of whānau (Māori families) in child removal statistics (Hyslop, 2017; Keddell & Hyslop, 2019), and contribute to the maintenance and upholding of White supremacy (Love, 2022). White supremacist stigmatisation and othering has led to existing as colonisers (presenting as Pākehā in Pākehā-oriented Aotearoa New Zealand)

being easier than existing as your ethnic self (Tecun et al., 2022).

### **How settler colonialism and White supremacy manifest within social work in Aotearoa New Zealand**

Social work in Aotearoa New Zealand is built on Western values related to settler colonialism (Beddoe, 2018). Our wero is perhaps difficult to palate for social work because the profession itself is colonial; there was no equivalent for Māori pre-colonisation (Beddoe, 2018). While Māori worked socially together for prosperity, that is substantively different to formalised social work. Effectively, Aotearoa New Zealand facilitates a social work workforce that welcomes Pākehā, minoritises others and leaves bicultural, anti-discriminatory, intersectionality-aware practice to the exceptional, often racialised, overworked social worker (Moyle, 2014; Nayak, 2022). Racialised social workers continually navigate oppression in Pākehā (settler-colonial) society (Nayak, 2022). While Pākehā social workers can choose when to practise biculturally, the racialised social worker (particularly Māori social workers) always walk between both worlds to secure the best results for their racialised clients (Moyle, 2014; Nayak, 2022). Unceasingly walking in both worlds produces an underappreciated-by-colonisers worldview and remains a key reason for high Māori practitioner turnover and the scarcity of Māori social workers (Haydon & Ruwhiu, 2024; Moyle, 2014).

*Cultural competence* is often presented as a solution to Pākehā ignorance; however, such competence can be misleading (Tascon & Gatwiri, 2020). The implied classifying and categorising of whole ethnic value systems via cultural competence as things the social worker can master constructs an oppressive confidence within even well-meaning Pākehā (Crawford, 2016; Nayak, 2022; Tascon & Gatwiri, 2020). Pākehā social workers can practise biculturally, but it is continually

challenging to overcome and wrestle with the shame and guilt associated with historic Pākehā decisions to marginalise the peoples they now serve (Crawford, 2016). The mental burden of Pākehā colonial history (*and* the present) can be heavy, and some practitioners may dwell in their own feelings rather than mature towards humility (Borell et al., 2018; Crawford, 2016).

Settler-colonial attitudes stain Aotearoa New Zealand child protection such that they often perpetuate whānau harms (Haydon & Ruwhiu, 2024). These are reflected in Oranga Tamariki's higher risk assessments of whānau Māori than Pākehā, and that child protection decisions are made more often for Māori than Pākehā (Keddell & Hyslop, 2019). This disparity suggests the need for social workers (especially Pākehā) to be conscious of bias; to reflect on and resist the oppression their Whiteness perpetuates; to pick up the taki by the blade (Crawford, 2016).

Aotearoa New Zealand's settler colonial legacy and current machinations position social work as the servant of institutionally racist governments built upon confiscated land and the trauma of the once thriving and abundant Māori (Borell et al., 2018; The Māori Perspective Advisory Committee, 1986). The current state of deficits for minoritised groups and the complexities they present demands a plethora of social services that can competently serve their needs; services which the current government actively works against (Hattotuwa, 2024; Haydon & Ruwhiu, 2024). For example, there is a clear need for age- and ethnicity-differentiated access to bowel cancer screening—however, the present government chose to ignore official advice and apply a 'colour-blind' rule, thereby privileging Pākehā and oppressing Māori (Ellingham, 2025). The need for culturally sensitive services was expressed in Pūao-te-Āta-tū (Māori Perspective Advisory Committee, 1988), an enduringly relevant report whose recommendations have never been genuinely enacted (Haydon & Ruwhiu, 2024). After

exposing abundant institutional racism towards Māori and minoritised peoples receiving child protection services, the report recommended actions to decolonise them. Pūao-te-Āta-tū can be considered the mother of our profession's *Code of Ethics* (ANZASW, 2019), both of which hold great unrealised promise. Paradoxically, settler colonialism has generated a society requiring social work to respond to the significant gaps in cultural provisions it has historically enabled. Consequently, our society continually fails Māori and will continue performing so until the institutional racism as identified in Pūao-te-ata-tū is dead (Boulton et al., 2020).

One way that White supremacy manifests in Aotearoa New Zealand social work is through the elevation of Western frameworks (medical and biopsychosocial models) over Indigenous knowledge systems. This privileging of colonial approaches marginalises holistic mātauranga Māori models, particularly in medical settings (Haydon & Ruwhiu, 2024). Such structural privilege reinforces power imbalances, undermines Indigenous knowledge, and ultimately perpetuates the social inequalities that social work ostensibly addresses (Haydon & Ruwhiu, 2024). We can see this in the way that Indigenous frameworks are distorted when forced into Western paradigms, reflecting White supremacist privileging of Pākehā knowledge systems while systematically devaluing and constraining the Indigenous (Tascón & Ife, 2019). For example, this misalignment is evident with concepts like wairuatanga or manaakitanga, which lose their meaning when Westernised, as Māori concepts rarely align with Western epistemology despite surface appearances to the contrary (Magallanes, 2011).

We therefore wonder: how can Aotearoa New Zealand social work graduates exercise the ethical responsibilities of our *Code of Ethics* (ANZASW, 2019) and Pūao-te-Āta-tū? We question the capability of statutory services or those receiving funding from the

government to honour these commitments, and warn practitioners, educators, and policy makers alike against stepping over this wero: we need to meaningfully and effectively embody these principles when structural constraints and colonial legacies continue to shape the environments we practise within.

### **Our journey within social work education and what we believe is not working**

In our experience, clinical, face-to-face social work (mostly child protection) is heavily prioritised in the curriculum, often at the expense of considering macro structures and community work. Because of this, we believe social work students often are not encouraged to explore the tools needed to change the systems that we will work within. Now, more than ever, we need a thorough understanding of how to effect change at structural levels. Most recently, the violent discourse surrounding Treaty Principles Bill (2024) and previously the repeal of 7AA (Cox, 2024) demonstrates the crucial nature of staying informed about political attacks that directly impact social work, and how social workers can actively challenge these macro systems of oppression (Haydon & Ruwhiu, 2024). For this reason, social work education in Aotearoa New Zealand must evolve to equip practitioners with advocacy skills and community organising strategies that address and deconstruct root causes rather than focusing on dealing with the symptoms. Without this macro-level focus, we risk perpetuating the very inequities we aim to resolve through our individual casework.

This issue is worsened by significant equity concerns within social work programmes and as enforced by the Social Workers Registration Board. The rigid requirements and unpaid placements create a system where only those with considerable privilege can survive and thrive enough to graduate without hardship (Beddoe et al., 2024). Students juggling full-time employment, whānau responsibilities, impacted mental health, and financial

constraints face overwhelming barriers, leading to burnout, poverty, or abandonment of their studies altogether (Beddoe et al., 2023). This structurally reinforces inequity within the profession, which contradicts the values the profession claims to uphold (ANZASW, 2019).

Additionally, over the course of study, students encounter troubling contradictions when it comes to Te Tiriti education. For example, in our (Ranginui and Lana) first year, we were taught the oversimplified “partnership, participation, and protection” model of Te Tiriti, only to later discover through more critical courses that this framework does not adequately represent Te Tiriti obligations and relationships (Mikaere, 2013). We believe that social workers need to deeply understand and incorporate Te Tiriti beyond the simplistic principles framework to begin to effectively demolish settler colonialism and White supremacy. The same criticisms can be applied to the inconsistent application of tikanga (customs) Māori throughout study. Students experience varying levels of te reo proficiency and adherence to tikanga amongst staff, with some papers rigorously incorporating practices like karakia and waiata, while others approach tikanga whimsically, only implementing them when prompted by students. Compounded by a lack of representation of Māori academics in tertiary institutions more generally, this inconsistency confuses students and exposes the bogus centrality of biculturalism amongst social work educators in Aotearoa New Zealand and does not reflect professional te Tiriti obligations (Eketone & Walker, 2015; McAllister et al., 2019).

When we examine the financial barriers to social work education that disproportionately impact Māori, Pasifika, and other marginalised students, we can clearly see how colonial exclusion practices continue to shape who can access, and who can succeed within, social work education (Bartley et al., 2024). This perpetuates a predominantly privileged Pākehā workforce that does not



reflect social work service users, who often lack much of the understanding necessary to serve diverse communities, thus leading to sometimes dangerous practice (Crawford, 2016; Tascon & Gatwiri, 2020).

If settler colonialism is not uprooted, if the wero is left on the ground, social work education will continue to produce practitioners who, despite good intentions, graduate and social work as agents who reinforce rather than dismantle the systems of oppression they should ethically address. True decolonisation of social work requires not just a reform in curriculum but a fundamental shift and reconfiguration of what knowledge it values, how social work education is structured, and the power imbalances perpetuated by the requirements of our professional regulator (Beddoe et al., 2024; Haydon & Ruwhiu, 2024).

## Conclusions

*Pātai:wero to social work education—where to next, what can be done better?*

Picking up the taki by the blade is acceptance that Aotearoa New Zealand privileges some ethnicities—primarily Whiteness over others—is necessary before the public and therefore social work, can best navigate cultural difference and progress toward a decolonised Aotearoa (Mutu, 2019). This is an achievable goal that has been blueprinted since Te Tiriti was signed, well before Pūao-te-Ata-tū (Māori Perspective Advisory Committee, 1988) was necessary. The enduring trend, seemingly, in the wake of successive government attacks on Māori (the restructuring of Māori education towards manual labour; removing environmental protections; criminalising Māori health practice) is for White supremacists to mute discourse and defund non-Pākehā experts that detract from the settler-colonial White supremacist regime (Eketone, 2024).

Aotearoa New Zealand social work education issues are direct manifestations of ongoing

settler colonial structures and White supremacist ideologies embedded within our social services systems (Hollis-English, 2012). Ethical social work education and practice demands radical transformation of how future social workers are prepared to practise, specifically in ways that actively challenge settler colonial structures. This transformation must begin in our educational institutions, where practice foundations are laid. Educators must intentionally radicalise students through creating learning environments where students develop the courage and the skills to advocate for structural change within organisations and policies. The transformation of social work education must extend beyond graduation and into practice settings—through ongoing funded professional development where supervision models centre decolonising practices. Ultimately, radical social work education must prepare practitioners who see their role, not just as service providers, but as agents of transformative change who are committed to restoring tino rangatiratanga through collective action and systemic reform. This, therefore, is our wero to social workers, social work educators, and social work regulators: you must reimagine the profession's relationship to power, privilege, and the political dimensions of practice within a society where settler colonialism and White supremacy continue to operate as dominant forces, and through that reimagining, whakamanahia te wero—honour the challenge.

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## Social work and common sense: A critical examination

Paul Michael Garrett

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This new book on common sense by Paul Michael Garrett is a welcome addition to followers of his substantial body of work. My own interest in common sense was piqued when I was writing an article about the ubiquitous and pervasive popularity of trauma discourse in social work practice and education (Beddoe et al., 2019). I was interested by the way concepts such as trauma and its practical application in so-called *trauma-informed practice*, became so deeply embedded in everyday practice (Beddoe et al., 2019) that they become ubiquitous. In exploring the way certain kinds of knowledge became privileged in social work, I was intrigued by the way *common sense* was posed as opposite to *expert knowledge* in social work and, indeed, in policy. I found that Hall and O'Shea's (2013, p. 9) idea that, in political discourse, common sense was positioned as arising in nature intriguing:

[Common sense] is a compendium of well-tried knowledge, customary beliefs, wise sayings, popular nostrums and prejudices, some of which—like “a little of what you fancy does you good”—seem eminently sensible, others wildly inaccurate. Its virtue is that it is obvious. Its watchword is, “Of course!”. It seems to be outside time. Indeed it may be persuasive precisely because we think of it as a product of Nature rather than of history.

At the time, as a political trope it was emerging as a device simplistically employed in arguments against any intellectual approach to social work education.

As I write this review, Aotearoa New Zealand is governed by a right-wing coalition government that actively promotes uninformed opinion (from the ordinary kiwi battler, the man in the street or, most likely, the conservative, racist crony with links to very dodgy think tanks). The latter category includes the scary advisors who often have no desire for real solutions to social problems, only the enrichment of the landlord class, and the dilution or removal of any progressive policies that might foster equity and social justice. But in their echo chamber they support each other's reactionary views as common sense. *Good science* is cherry picked if it affirms their desire, for example, to promote tobacco usage or raise speed limits in cramped city streets and small towns. Or allow force in boot camps in the coalition's authoritarian response to young people in need and at risk. Genuine, properly designed, peer-reviewed research can just be ignored if it doesn't fit the narrative.

In February 2025, Trump called on common sense to justify every one of his reactionary executive orders even when these defied logic, evidence (Cohen, 2025) and the rule of law (Reich 2025), but rather were his opinions and a hat-tip to his wealthy mates.

So I was very pleased to see this new book published and to have the opportunity to engage again with these ideas. In his 2021 book *Dissenting Social Work: Critical Theory, Resistance and Pandemic*, Garrett explored the concept of dissenting social work which he described as practice in which social

AOTEAROA  
NEW ZEALAND SOCIAL  
WORK 37(2), 145–148.

work “interrogates dominant ways of understanding the social world within the discipline” (p. 4). In the introduction to this new book, Garrett begins by arguing that dissent in social work may be stymied by notions of common sense: “the profession is often marinated in a cocktail of ideas, ideologies and toxic forms of reasoning, which may blunt more socially progressive ways of thinking and doing social work” (p. 3). As always in his work, Garrett explores the use of language in order to unpack the kind of thinking that dominates social work. Through a discussion of various topics this book explores the idea of common sense and its employment by politicians in the conceptualisation of social problems and their possible solutions.

Garrett argues (p. 16) that “common sense is not an ideology”; rather it is “derived from ideology, yet paradoxically often founded on a refutation of ideology”. It is so useful to consider this notion while reflecting, for example, on the attacks on critical race theory, so despised and denigrated by those who would want to stifle advances to defeat White supremacy.

While common sense may manifest differently across the globe in hugely different societies, Garrett suggests five common components. The first of these is a shared dominant knowledge base that forms a basis of “modern thinking”. Secondly, the social order associated with the neoliberal capitalist regime creates the stage where social work practice occurs. Citing Fisher (2009, p. 9), this stage is one on which “capitalist realism” constrains social work thinking. The third common component is that of professionalisation where social work is reproduced according to dominant ideas about what good social work is and challenging doxa is problematic. Current organisational dynamics require what Garrett calls “anxious and distracted forms of social work” (p. 8). This fourth element can be linked to wider pressures on public services and the targets and timelines

beloved by neoliberal governance. Finally, Garrett points to the often-discussed friction between the social justice and human liberation aspirations of the international profession and the everyday practice of social work largely within the confines of the state. Notions of common sense as applied to, and within, the profession can be examined against the backdrop of these common elements.

Chapter 2 provides a detailed exploration of the theorisation of common sense. This is an illuminating survey of scholarly grappling with common sense as an idea shaped by dominant views of what is right and natural. Common sense, for example, has historically allowed for a justification of slavery and the oppression of women, grounded in structures of power we would now label as white supremacy and patriarchy but held as a natural order of social relations.

Drawing on the scholarship of Gramsci, Garrett situates common sense in history. The ideas labelled common sense do not just drop from the sky. They are often enduring ideas and emerge (and re-emerge) even when evidence refutes them: “Common sense provides a blurred, hazy and defective lens through which to view the world ... Common sense does not rationally ‘add up’, but it can generate and still sustain tremendously potent (non)sense” (p. 43).

The chapters of the book explore a range of topics which canvass issues of importance for social workers: common sense and its impact in the emergence of a social problem, namely “unmarried mothers” in Ireland; and attachment theory and the crafting of common sense conceptualisations of the maternal.

While there are many useful and engaging chapters in this book, for this review I particularly want to focus on Chapter 6 as an essential reading for the times we live in. This short (yet packed) chapter is a thought-provoking exploration of anger. Garrett

argues that social work discussions on anger “tilt towards the disciplining of anger” (p. 130). He explores the contemporary disapproval as anger in the workplace is seen as being at odds with the prevailing ideas of teamwork and civility. Anyone who has ever surfaced their activism with passion at work is likely to have encountered the tone policing where the subject of the speech is lost in the discomfort about anger.

Garrett draws on Bourdieu’s concept of symbolic violence, the enactment of many forms of oppression and exclusion of minoritised and dominated people and groups that aim to silence and control them. This silencing is also a state of ongoing epistemic injustice (Fricker, 2007) that privileges some knowledge and silences others (see Joy, 2025 for an example of social work scholarship employing this concept). The remainder of the chapter is a detailed discussion of the role of anger as a response to epistemic injustice, the silencing of dominated voices, where he draws heavily on the work of Bailey (2018).

This chapter is an important contribution to the social work literature, although it focuses mainly on the scholarship of sociologists and philosophers. As always, Garrett invites us to read further and deeper, interrogating everyday words for the discourses they speak to. Anger, when considered as a legitimate response to injustice, becomes a powerful tool of resistance, rather than a behaviour to be managed or policed.

Garrett notes the way professional language and behaviours in child protection for example, may represent issues in ways that undermine and exclude the ability of parents to communicate their own knowledge and perspectives.

There is vital thinking for social work to consider also about the silencing of us as social workers. So often I see (and experience) the attempts to silence resistance to political issues. Social workers so often

make pious statements about being calm and respectful and doing dialogue without anger. My reaction is to be even angrier! If we are not reading/seeing/hearing things every day that make us angry then we really aren’t paying attention. We don’t owe abusers and oppressors our calm selves.

As Garrett notes, “dominant affective norms within the profession, undergirded by codes of ethics and systems of registration, can be associated with particular forms of ‘tone management’ ... aiming to quell and dissipate anger” (p. 146). The symbolic violence of everyday practice in which we witness (and contribute to) “petty, daily humiliations and routinised misery” (p. 147) should make us angry. And garner that anger into actions of resistance.

The final chapter sets out some possible pathways for a new common sense for social work.

These are:

- “The common sense of a retrievable ‘golden age’ (or ‘make social work great again’)” (p. 242).
- “The common sense of ‘it is what it is’” (p. 243); the banal maxim of neoliberalism social work.
- “The common sense of endism and abolitionism” (p. 244) where he argues briefly that we must confront the forces controlling the state rather than simply condemning it.
- Finally, Garrett sums up an approach to “The common sense that another social work world is possible” p. 244) arguing for the ongoing struggle and a call for solidarity.

## Conclusions

While this book is a richly intellectual discussion and is likely mostly to be taken up by academics and researchers, Garrett has thoughtfully added a section to each chapter which provides a vignette and some useful



questions for reflection. There is much to explore in this book, and it is an important resource for those teaching critical social work and social policy.

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