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TE KŪPENGA HAUORA MĀORI & DEPARTMENT OF GENERAL PRACTICE AND PRIMARY HEALTH CARE

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Technical Report to Ngā Pae o te Māramatanga-July 2011

Kaumātua: Taonga Aroha Project

Principal Investigator: Dr Lorna Dyall

Project Manager & Research Fellow: Dr Mere Kēpa

Life and Living in Advanced Age:

A Cohort Study in New Zealand (LiLACS NZ)

Principal Investigator: Professor Ngaire Kerse

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LEADERSHIP TEAM

Professor Ngaire Kerse, Dr Lorna Dyall, Dr Mere Kēpa, Karen Hayman

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1. EXECUTIVE SUMMARY

The project, *Kaumātua: Taonga Aroha*, partners with the Health Research Council of New Zealand (HRC) funded programme grant project, *Life and Living in Advanced Age; A Cohort Study in New Zealand, Te Puāwaitanga o Ngā Tapuwae Kia Ora Tonu*; hereafter, referred to as LILACS NZ. LILACS NZ is now in the third year of operation and the first 'Wave' of data collection has been completed. The Research Team developed and strengthened tikanga, principles of conducting research with *Māori* people in society, *Rūnanga*, and Primary Health Organisations (Tables 1, 2 & 3). In the report, the *tikanga* drawn upon by the contractors, coordinators, interviewers, and nurses in the *Māori* researched sites is presented, as well as, the Preliminary Findings. Within the Preliminary Findings are the quantitative analyses examining *Te reo Māori me ngā tikanga*, *Māori* language and culture in the research area of Advanced Ageing.

The Kaumātua: Taonga Aroha Study and LiLACS NZ were preceded by the 'Feasibility Study' funded by the HRC. Creating sincere relationships is fundamental in collaborative research between *Māori* and non*Māori*; hence, the *RōpūKaitiaki o Ngā Tikanga Māori*, Protectors of Principles of Conduct in *Māori* Research was involved in designing and implementing the study. The results were discussed with the Māori participants and the key Māori stakeholders to respect their standpoint. Although, the *Kaumātua: Taonga Aroha* Study is not a representative sample, the key results indicated to the Research team that, although, the participants may have experienced many changes throughout their life, almost all live life positively and were keen to contribute their knowledge to future generations. For the participants, growing old is a positive experience. Of the 33 *Māori* participants involved in the Feasibility *study*, 97% had *mokupuna*, grandchildren, 71% tuarua mokopuna, great grandchildren, and over two thirds of them were actively engaged in pleasant and pleasing activities, daily. Just over one in five (1/5) were involved in paid employment, and two thirds)2/3) were involved in *Aroha māhi*, working for love.

2. OBJECTIVES & AIMS

Overall, the objectives of the *Kaumātua: Taonga Aroha* study are:

- 1. To establish the role of intergenerational access to customary lands and environments in successful ageing of older *Māori:* a longitudinal cohort study;
- 2. To engage with *Māori* service providers in the Bay of Plenty and the Lakes Districts District Health Board areas, namely, *Tauranga, Rotorua, Whakatāne, Ōpotiki*, and *Taupo*;
- 3. To enrol Māori participants through the Māori service providers;
- 4. To discuss cultural practices, health, economic, environmental, and social issues; and 'successful' ageing;
- 5. To discuss the Findings with all interested groups; and
- 6. To analyse the data gathered from the questionnaire and to publish the Findings.

In the collaborative quantitative research of the oldest old *Māori* people in the Bay of Plenty, the researchers' aim is to quantify how:

- 1. *Kaumātua*, 80 to 90 years old *Māori Kuia* and *Koroua*, are central to supporting the development of healthy communities and environment;
- 2. Their health and wellness radiates out to all and influences the heath of *whānau*, *hapū*, and wider *Māori* society;
- 3. The place and space they occupy within their *whānau* and the demographic profile of the total *Māori* population highlights that *kaumātua* play an important and fundamental role in the transfer and development of cultural and other forms of knowledge across and between generations; and
- 4. The critical relationship between history, politics, economics, laws and health has the potential to impact on the capacity of caring for *Māori* by *Māori*.

3. RATIONALE

The data for Wave 1 of the partnership, *Kaumātua Taonga Aroha* and LiLACS NZ, have been collected and LiLACS NZ is now in the third (3rd) year of operation. In Wave 1, the Research Team recruited, interviewed, and assessed *Māori* people of advanced age, represented by 80-90 years; the age group with a 90% chance of surviving another year:

- 1. To establish the determinants of successful advanced ageing;
- 2. To establish trajectories and pathways in advanced age; and
- 3. To understand the relative importance of determinants; that is, language and culture practised by the oldest old *Māori;* in association, with relevant outcomes of disease states, nutrition, functional status, socio-cultural capital, connectedness, social, economic, and environmental factors.

In *Aotearoa*, New Zealand, many *Māori* who reach 75 years of age may have multiple health problems, and owing to *whānau* migrating from rural to urban areas, close members of the extended family group may not be available to care for and protect their oldest old adults. Few *Māori*, though, reach advanced age. In 2001, according to the Census, < 0.2% of *Māori* men and women reached the age of 85 years. Further, a large disparity exists in longevity and disability levels between the Cohort of *Māori* and non *Māori*. Finally, demographic projections suggest increasing life expectancy for *Māori* and that the population of the oldest old *Māori* will expand, potentially accentuating the disparities.

Longitudinal studies have provided insight into Epidemiological factors contributing to 'successful' ageing, internationally (Marmot, 2003; Andrews, 2001; Schaie, 2001). LiLACS NZ has been designed to complement other projects in progress in New Zealand; for example, the *Enhancing Wellbeing in an Ageing Society* funded by the Foundation for Research, Science, and Technology (Waldegrave, 2005).

In LiLACS NZ, the researchers have investigated factors related to *Māori* people ageing, therefore, intergenerational dissemination of their:

- Roles within *whānau*, *hapū*, *and iwi*;
- Knowledge of linguistic and cultural practices, as well as;
- Disease states, nutrition;
- Functional status;
- Socio-cultural capital;
- Connectedness;
- Socioeconomic; and
- Environmental factors is vital.

Early life experiences that may have a profound effect on the way life is lived, and conditions up to age 15 years have been enquired about, too. Further, in a personal communication between one of the Principal Investigators and Rudi Westendorp of the 'Leiden 85+ Study', patterns of resilience, optimism, and coping that may promote and constrain successful living were identified as a 'gap', or a difference, in current longitudinal studies. Hence, an important focus has been the *Māori* participants' engagement in cultural practices and caring for others, as well as, knowledge of *whakapapa*, moral and collective responsibility.

From 2009-2011, the non *Māori* and the *Māori* Researchers and the *RōpuKaitiaki o Ngā Tikanga Māori* in the university; and the contractors, coordinators, nurses, and the interviewers in the Researched sites have conducted themselves with increasing respect and courtesy, and growing understanding of each others' languages and cultures. Dr Dyall, Dr *Kēpa*, and the *RōpūKaitiaki* have contributed to and participated in:

- Contributing ideas and innovations to the research;
- Designing and translating questions from English language to te reo Māori me ngā tikanga;
- Leading the Research Team's acts of community engagement;
- Promoting LiLACS NZ on *Iwi* Radio, Radio RHEMA, in the University of Auckland's newsletters, local and national Press, in myriad whānau and community networks;
- Clearing up issues on Ethics and Blood and the emerging LiLACS NZ researchers raised by *Māori* participants in a Conference at *Tauranga*;
- Three presentations at the 9th Asia / Oceania Congress of Geriatrics and Gerontology in Melbourne, Australia from October 23-27, 2011 funded by the Ngā Pae o te Māramatanga Conference Attendance Grant, Te Puni Kōkiri, and the Sir John Logan Campbell Trust; and
- Training, Review, and Dissemination Hui (Tables 1 & 2).

From 27 September to 30 September 2011, the *Hui* to disseminate the Preliminary Findings have been organised in each of the researched sites. In the *Hui*, the knowledge drawn from the quantitative study will be presented by Professor Ngaire Kerse and discussed with the participants, in groups. Finally, the notes recorded in the group discussions will be represented to the panel of Professor Ngaire, Kerse, Dr Lorna Dyall, Dr Mere *Kēpa*, Associate Investigators, and the RōpūKaitiaki for comment and validation. The knowledge will be disseminated in lectures and publications.

DISSEMINATION HUI FOR THE PARTICIPANTS

26th to 30 September 2011

- 1. Hui at Maungatapu marae, Tauranga, Tuesday, 6 September, 10 a.m to 2 p.m.
- 2. Hui at Sir Tristan Lounge, Tauranga Race Course, Tuesday, 13 September, 10 a.m to 2 p.m.
- 3. Hui at the Rotorua Arts Village, 1240 Hinemaru Street, Tuesday 27 September, 10 a.m to 2 p.m.
- 4. Hui at Whakatāne Health Services, Wednesday 28 September, 10 a.m to 2 p.m.
- 5. Hui at Te Kaha Resort Hotel, Thursday 29th September, 11 a.m to 3 p.m.
- 6. Hui at the Opotiki RSA, Friday 30th September, 11 a.m to 3 p.m.

PROGRAMME

- Pōhiri, Whakatau, Welcome.
- Presentation by Professor Ngaire Kerse.
- Group discussions.
- Feedback from the Group discussions to the Panel Prof Ngaire Kerse, Dr Lorna Dyall, Ms Karen Hayman, Dr Mere Kēpa, Associated Investigators and the RopūKaitiaki.
- Closing Prayer.

In the next section, the philosophy of community engagement practised by the *Māori* researchers and the *RōpūKaitiaki* is reported. Following the discussion, the Preliminary Findings for oldest old *Māori* from the collaborative study are documented.

4. RESEARCH METHODOLOGY & JUSTIFICATION OF METHODLOGY

Mātauranga Whakaaro, Māori Philosophy

In the pre-contact era, *Māori* lived as interconnecting groups of people-*whānau* and *hapū*-within functioning cultural, social, political, and economic relations that supported population survival and growth (Salmond 1991, Metge 1995, Durie 2004, Reid et al, 2005; Kēpa et al, 2006a & b). The estimated average life expectancy of Māori, at birth, was similar to Europeans, and this was approximately 28 to 30 years (Pool 1991: 57). During this era, *Māori* tribal society organised conditions for being healthy and happy, as a whole, through many relationships reflecting wise Public Health principles; significantly, a relationship with nature maintaining a clean water supply, preserving and storing food, enabling proper hygiene and waste disposal, keeping the ill and dead separate, and drawing upon extensive mātauranga, local knowledge to produce medicines and remedies (Durie 2005:14). Therefore, Mātauranga Whakaaro, Māori philosophy accounts for Māori people as living long, healthy, and happy lives in relationship with each other in a wholesome environment, before contact with modern society (*Kepa* et al, 2006). In short, *Māori* philosophy is a very large and rich tradition of *Māori* living in harmony with nature, but discontinued flourishing as the British including the Scots and Irish mercenaries, the French, the Portuguese, the American missionaries, whalers, sealers, and traders, among other groups of people commenced colonising Aotearoa, New Zealand. In the 21st century, *Māori* continue losing knowledge of the major traditions of *Māori* philosophical thinking, assimilating into Christian, Capitalist, and Democratic culture with varied success. Concurrently, *Māori* researchers are at work from the university to the *marae*, tribal gathering place; from the *marae* to parliament

revitalising *te reo Māori me ngā tikanga* and *Mātauranga Whakaaro* to be able to pass on to *Māori*, together with love, principles of living purposeful, healthy, and happy lives.

In the ancient tradition of *whanaungatanga*, kinship, the *RopūKaitiaki o Ngā Tikanga Māori*, the Protectors of Principles of Conduct in *Māori* Research has been created to ensure that *Māori* people, *Māori* language and culture, and *Mātauranga Māori* are not offended by impoliteness, ignorance, and arrogance. The *kanohi kitea*, the *Māori* people who are involved in *Hui*, political, and social organisations are:

- Paea Smith, Ngāti Apa and Ngāti Kahungunu;
- Leianna Reynolds, Ngāti Rehia and Ngāti Tūwharetoa;
- Hone Kameta, Whakatōhea, Ngāi Tūhoe, and Te Arawa;
- Florence Kameta, Ngāi Tai and Ngāti Porou; and
- Betty McPherson, Te Rārawa.

The five well-known *kaumātua*, drawn from *iwi*, tribes from across *Aotearoa*, New Zealand inform the research team on customs to approach potential *Māori* participants; taking into account the history of the tribes and tribal relations; important families and leaders of *mana*, mystery and authority with whom to communicate. Together, the *RōpūKaitiaki* brings a total of 200 years of knowledge and wisdom of *Māori* society and Christian culture to LiLACS NZ. All of their wise advice has led to engagement with local contractors to undertake the longitudinal project. Thus, a trustworthy working relationship was begun between the LILACS NZ Researchers in the university and the local contractors, coordinators, interviewers, and nurses at:

- Western Bay of Plenty Primary Health Organisation (WBoPPHO), Tauranga;
- Ngā Matāpuna Oranga Kaupapa Māori Primary Health Organisation (NMO) Tauranga;

- Rotorua Area Primary Health Services (RAPHS), Rotorua;
- Te Rūnanga o Ngāti Pikiao & Te Korowai Aroha Health Services, (Joint Contractors), Rotorua;
- Te Rūnanga o Ngāti Awa, Whakatāne; and
- Te Rūnanga o Ngāti Irapuia, Ōpotiki.

A *Māor*i and a non *Māori* Principal Investigator have been appointed, as well as a *Māori* (Table 2) and a non *Māori* Project Manager to administer the seven researched sites. In support of educating the Māori Candidates, an Intellectual Advisory Group composed of:

- Dr Pip Pehi, Te Whare Wānanga o Awanuiārangi, Whakatāne;
- Dr Marama Muru Lanning;
- Dr Pam Bennett;
- Dr Robyn Manuel;
- Dr Jane McKendrick; and
- Lisa Chant of the University of Auckland;
- Dr Anna Rolleston of Tauranga and
- Dr Melissa Taitimu from Brisbane has been established.

The Māori and non Māori coordinators, interviewers and nurses in the *Rūnanga* and Primary Health Organisations (PHOs) have been involved in recruiting, enrolling, and remain interviewing, and assessing the oldest old *Māori* and non *Māori* participants in 'Wave' 2. Thus, at the heart of the relationship between the *Māori* researchers, the *RōpūKaitiaki*, and the non *Māori* Researchers in the university and the Research Team in the Researched sites is *whakapapa*, whanaungatanga, *kōrero Māori*; history, culture, and community networks.

WHAKAPAPA, WHANAUTANGA & KŌRERO MĀORI

Māori aged between 80 and 90 years in 2010; those born between January 1st 1920 and December 31st 1930 and living in the defined area of the boundaries of the Bay of Plenty and Lakes District Health Boards were identified using overlapping strategies the:

- 'New Zealand Electoral' Roll;
- Lists held by the Primary Health Organisations and the General Medical Practices;
- 'Māori Electoral Roll';
- Lists held by the Rūnanga; and
- Whakapapa, Whanaungatanga and Körero Māori; that is, Whānau and Community networks.

In LiLACS NZ, ascertaining Ethnicity is by self-identification. The Primary Health Organisations' databases contain information about people's Ethnicity according to self identification. Enrolees, on the '*Māori* Electoral Roll', state whether people are *Māori*. The final evidence of Ethnicity was by self-identification in the LiLACS NZ Interview that contained questions from the '2001 NZ Census'. Thus, the cultural and technical practice of self-identification is in tension with *Whakapapa, Whanaungatanga* and *Kōrero Māori*.

In the programme held at Te Whare Wānanga o Awanuiārangi in Whakatāne, the interviewers and the nurses were provided 'standardised' training in:

- Eligibility requirements;
- Recruiting; and
- Collecting data.

Each interviewer was given a jacket with the LiLACS NZ logo and personnel identification to wear in the community. The coordinators, interviewers, and nurses were directed to cross check potential participants' names to ensure that all the eligible people were invited to participate and that people were not invited twice. The potential participants whose names did not appear on a recognised list or database, and were known to the coordinators, interviewers, nurses, family, *whānau* and community networks in the area were invited too. In this diverse and complex approach to research, the local contractors developed different networks and relationships to engage with their communities; in turn, to recruit, enrol, interview, and assess the *Māori* and non *Māori* participants.

In *Tauranga*, the two contracted providers, Western Bay of Plenty Primary Health Organisation (WBoPPHO) and *Ngā Mataapua Oranga Kaupapa Māori* Primary Health Organisation (NMO), worked together; each having their own area of focus, ways of promoting relationships with potential participants, and engaging with their local networks. Building and maintaining the relationship between the providers and the General Practitioners in the researched sites is important. After the GPs were informed of LiLACS NZ, letters were sent by the LiLACS NZ WBoPHO's Research Team to inform potential participants about the project; as well as, the names of the people to contact if the prospective participants were interested. In support of WBoPPHO's 'Strategic Vision' and LiLACS NZ, a Research Centre was established by the provider, not far from the Central Business District.

In Rotorua, the Joint Contractors, *Te Rūnanga o Ngāti Pikiao* and *Te Korowai Aroha* Health Services, worked together, drawing on the '*Māori* Electoral Roll', *whakapapa*, *whanaungatanga*, and *kōrero Māori* in recruiting, potential *Māori* participants. In the early stage of the recruiting, a team of older *Māori* men and women were

appointed by the two providers as the interviewers; in the belief that the interviewers would be better able to relate to, enrol, and interview the oldest old Māori participants. In practice, the belief was not entirely successful; hence, the group was reorganised and people from a range of ages were employed to complete Wave 1.

The third contracted provider, *Rotorua* Primary Area Health Services (RAPHS), drew on the 'New Zealand Electoral Roll', as well as the Research Team's knowledge of a number of potential participants, and through contact with the General Practitioners in the provider's area. All three of the contractors, in *Rotorua*, worked together ensuring that potential participants were not contacted by the several providers; thereby upsetting the oldest old adults. As a strategy, areas of recruitment were organised among the providers.

In Whakatāne, Te Rūnanga o Ngāti Awa, representing the Mana whenua, the home people of the area, was contracted to recruit both Māori and non Māori participants. The decision recognised that the tribe, Ngāti Awa alongside Te Wānanga o Awanuiārangi has had a major role in working and enhancing the people's lives and living in the different communities in the Whakatāne area. To support the Research Team, the Māori project manager promoted LiLACS NZ among whānau, whanaunga, and community networks, and introduced one of the interviewers to a few potential participants. The contractor promoted LiLACS NZ through the local newspaper and the Iwi Radio station. Finally, a letter, from the University of Auckland, was despatched to the potential participants who were uncertain of participating and of the contribution they might make.

In rural communities, Health services and Rūnanga are important community networks for research. *Te Rūnanga o Ngāti Irapuia* was selected as the contractor to locate both *Māori* and non *Māori* participants in the areas of *Ōpotiki* and *Te Kaha*. The nurse/coordinator promoted LiLACS NZ and the Chair called upon the local media to assist in the task. The participants were invited and given Information Sheets describing the research and the

time involved in the interviews and assessments. In fact to face discussions, important points were highlighted and the procedures for dealing with adverse events were discussed face to face.

Overall, recruiting participants into research related to ageing is challenging, requiring the development of strategies that incorporate:

- Caring about and protecting sensitivities within family and whanau relationships;
- Caring about and protecting the support from the local General Practitioners;
- Supporting and enhancing family, whānau, and community networks;
- Communicating with local media and community leaders to promote the research effectively.

While many of the non *Māori* participants understood their role in LiLACS NZ, as an honour and the duty of a citzen of New Zealand; *Māori* were less forthcoming to participate for the same reasons. Nevertheless, a significant number of the oldest old *Māori* women and men agreed to participate in the research. Following the participant's or the Proxy's consideration of the interviewer's explanation of the Ethical Requirements laid out by the University of Auckland, *all* the *Māori* participants agreed to consent to Full or Partial participation; including, their intention to continue the interviews and assessments, annually; until the death of the last member of the LiLACS NZ cohort. Finally, the partnership, *Kaumātua: Taonga Aroha* and LiLACS NZ completed the study in budget.

5. PRELIMINARY FINDINGS

	born M	lāori	raised Māori			
	Frequency	Percent	Frequency	Percent		
0	6	2.2%	55	20.2%		
1	13	4.7%	15	5.5%		
2	55	20.0%	33	12.1%		
3	54	19.6%	40	14.7%		
4	23	8.4%	14	5.1%		
5	39	14.2%	32	11.7%		
6	85	30.9%	84	30.8%		

Number of parents/grandparents...

	How important is your well	•	How important is your iwi to your wellbeing		How importar language and cu wellbei	lture to your
	Frequency	Percent	Frequency	Percent	Frequency	Percent
Not at all	55	13.9%	45	11.3%	16	5.8%
A little	49	12.4%	47	11.8%	16	5.8%
Moderately	68	17.2%	71	17.9%	46	16.6%
Very	151	38.2%	165	41.6%	131	47.3%
Extremely	72	18.2%	69	17.4%	66	23.8%

How well do you understand your tikanga

	Frequency	Percent
Not at all	43	10.9%
A little	60	15.2%
Moderately	92	23.3%
Very	119	30.1%
Extremely	81	20.5%

Been the victim of an ethnically motivated attack in New Zealand Verbal in the last						
year	4/261	1.5%				
Verbal previously 22/266 8.3%						
Physical in the last						
year	3/261	1.1%				
Physical previously	10/266	3.8%				

Been treated unfairly because of your ethnicity in New
Zealandby a health professional in the last
year5/2651.9%by a health professional previously10/2653.8%by a service agency in the last year4/2631.5%by a service agency previously7/2622.7%

How much has colonisation affected the way you live your life today?					
	Frequency	Percent			
Not at all	157	64.3%			
A little	24	9.8%			
Moderately	31	12.7%			
Very	19	7.8%			
Extremely	8	3.3%			
Don't Know	2	0.8%			
Refused	3	1.2%			

				Live in a		
	Speak Māori			neighbourhood		
	No	Yes		No	Yes	
Ngāpuhi	10	3	23%	10	2	17%
Ngāti Pikiao (Te Arawa)	7	9	56%	10	5	33%
Ngāti Rangiteaorere (Te Arawa)	1	0	0%	1	0	0%
Ngāti Rangitihi (Te Arawa)	1	2	67%	2	1	33%
Ngāti Rangiwewehi (Te Arawa)	4	2	33%	5	1	17%
Tapuika (Te Arawa)	0	5	100%	2	3	60%
Tarāwhai (Te Arawa)	0	1	100%	1	0	0%
Tūhourangi (Te Arawa)	8	2	20%	8	2	20%
Uenuku-Kōpako (Te Arawa)	0	1	100%	0	1	100%
Waitaha (Te Arawa)	1	3	75%	2	2	50%
Ngāti Whakaue (Te Arawa)	14	15	52%	21	6	22%
Ngäti Tüwharetoa	3	2	40%	4	1	20%
Ngāti Tahu (Te Arawa)	1	0	0%	1	0	0%
Ngāti Pükenga	2	3	60%	3	2	40%
Ngāiterangi	6	15	71%	13	8	38%
Ngāti Ranginui	1	11	92%	7	5	42%
Ngāti Awa	7	18	72%	11	11	50%
Ngāti Manawa	0	3	100%	2	1	33%
Ngāi Tai	3	7	70%	5	4	44%
Tūhoe	3	18	86%	11	7	39%
Whakatōhea	5	7	58%	7	3	30%
Whānau-Ā-Apanui	3	19	86%	6	16	73%
Ngāti Porou	11	9	45%	16	4	20%
Ngāi Tahu / Kāi Tahu	10	1	9%	9	1	10%
Tai Tokerau Region	14	8	36%	17	4	19%
Tainui	23	11	32%	31	2	6%
TABLE CONTINUED BELOW						

Te Arawa/Taupō Region	33	37	53%	47	19	29%
Tauranga Moana/Mātaatua Region	29	87	75%	57	51	47%
Te Tai Rāwhiti Region	14	11	44%	19	4	17%
Ngāti Kahungunu	5	8	62%	8	5	38%
Taranaki Region	6	6	50%	10	1	9%
Whanganui/Rangitīkei Region	3	1	25%	4	0	0%
Manawatü/Horowhenua/Te Whanganui-ā- Tara Region	4	0	0%	4	0	0%
Te Waipounamu/Wharekauri Region	10	1	9%	9	1	10%
OVERALL	139	138	50%	190	73	28%

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- 14. Kēpa M, Reynolds P, Walker R (2006b). Bring 'me' Beyond Vulnerability. Elderly Care of Māori, by Māori. Kei Hinga Au e,Kei Mate Au E. Te Tiaki Ā te Māori i te Hunga Kaumātua Māori. World Indigenous Nations Higher Education Consortium, WINHEC Journal: <u>http://www.win-hec.org/?q=node/92</u>.
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- 20. Schaie K, Hofer S. Longitudinal Studies of Aging. Birren J, SchaieKW, (editors). San Diego: Academic Press; 2001.
- 21. Simons L, McCallum J, Simons J, Powell I, Ruys J, Heller R, et al. The Dubbo study: an Australian Prospective Community Study of the Elderly. *Australian New Zealand Journal of Medicine*. 1990;20:783-9.
- 22. Simons L, McCallum J, Freidlander Y, Simons J. Predictors of Mortality in the Prospective Dubbo Study of Australian Elderly. Australian and and New Zealand Journal of Medicine. 1996;26(1):40-8.
- 23. Waldegrave C. Enhancing Wellbeing in an Ageing Society. Paper presented to Forum. In press 2005
- 24. Waldon J. Oranga Kaumātua Perceptions of Health in Older Māori People. Social Policy Journal of New Zealand. 2004;23 167-80.

TABLE 1

Activities of the ROPUKAITIAKI O NGA TIKANGA MAORI, Protectors of Principles of Conduct in Maori Research

CONFERENCE PRESENTATION

1] Kēpa, M., Smith, P., Kameta, H., Kameta., F., McPherson, B (2011). Te Reo Māori me Ngā Tikanga. Research Tools in Te Reo Māori: Lost in Translation & Te Reo Māori me Ngā Tikanga. Talking About Principles of Conduct by Māori in a Collaborative and Quantitative Research in LILACS NZ. 9th Asia / Oceania Congress of Geriatrics and Gerontology. Presentations, Melbourne Exhibition Centre 23-27 October

2] Dyall, L., & Kameta, H. (2011). *Empowered elders: are they interested in being involved in research? 9th Asia / Oceania Congress of Geriatrics and Gerontology*. Presentations, Melbourne Exhibition Centre 23-27 October

3] Smith, P. (2010) "Reflections: The Role of 'Elder' in Māori Research". Presentation. International Network for Indigenous Health Knowledge and Development, University of Washington, Seattle. 25 May 2010. Member of the Life and Living in Advanced Age: A Cohort Study in NZ

TRANSLATIONS

4] Kameta, H., Kameta, F., & McPherson, B. (2009, 2010, 2011) Translators Wave 1 and

5] Wave 2 Questionnaires for the Life and Living in Advanced Age: A Cohort Study in NZ, the University of Auckland

ADVISORS to PROMOTION, TRAINING, REVIEW, & DISSEMINATION HUI

6] Kameta, H., Kameta., F., McPherson, B., & Reynolds, L. (2011) Advisors, Life and Living in Advanced Age: A Cohort Study in NZ's Site Visits, Bay of Plenty. 6 September, 13 September, 26 to 30 September
7] Smith, P., Kameta, H., Kameta., F., & Reynolds, L (2011), Advisors, Life and Living in Advanced Age: A Cohort Study in NZ's Site Visits, Bay of Plenty. 21-24 March

8] Smith, P., Kameta, H., Kameta., F., McPherson, B, & Reynolds, L (2010), Advisors, *Life and Living in Advanced Age: A Cohort Study in NZ's* Training for Wave 2 Hui, Meeting, Tāmaki Campus, 8-10 March, 2011

9] Kameta, H., Kameta, F., & McPherson, B, Kēpa, M., Kerse, N., Dyall, L., Pihama, L (2011). Conflict Resolution Meeting. *Life and Living in Advanced Age: A Cohort Study in NZ*. School of Population Health, the University of Auckland. 20 January

10] Kameta, H., Kameta., F., McPherson, B., & Reynolds, L. (2011) *LiLACS NZ Hui* to disseminate the Findings from Wave 1. Bay of Plenty, 6 Sept., 13 Sept., 26 to 30 Sept

11] Smith, P., Kameta, H., Kameta., F., & Reynolds, L (2010) Panel Presentation, *Life and Living in Advanced Age: A Cohort Study in NZ's* Review Hui, Meeting, Tauranga RSA. 20 September 2010

12] Smith, P., Kameta, H., Kameta., F., McPherson, B., & Reynolds, L (2010) Meeting with Professor Merryn Gott-proposed Māori and Dementia research and Associate Investigators, Life and Living in Advanced Age: A Cohort Study in NZ, School of Population Health, Tamaki Campus, the University of Auckland. 18 August 2010

13] Smith, P., Kameta, H., Kameta., F., McPherson, B., & Reynolds, L., Kēpa, M., Kerse, N (2010) Meeting with the Northland DHB's Kaumātua group to discuss Eruera Maxted's research on Māori and Kai. Friday 19 August 2010

14] Smith, P., Kameta, H., Kameta., F., McPherson, B., & Reynolds, L., Kepa, M., Kerse, N., Maxted, E. (2010) Meeting with Alzheimer's Northland and other interested community groups in Whangarei to present LiLACSNZ. Friday 20 August 2010

15] Smith, P., Kameta, H., Kameta., F., McPherson, B., & Reynolds, L (2010). *Life and Living in Advanced Age: A Cohort Study in NZ's* Review Hui, Meeting. Silver Oaks Resort Heritage, 349 Fenton Street, Rotorua. 24 to 25 May, 2010

16] Smith, P., Kameta, H., Kameta., F., McPherson, B., & Reynolds, L (2010). *Life and Living in Advanced Age: A Cohort Study in NZ's* Training Programme, Te Whare Wānanga o Awanuiārangi, Whakatāne. 16 to 19 February, 2010

TABLE 2

Activities of Dr Mere Kepa

PUBLICATIONS

INTERNATIONAL

Journal

1] Kēpa, M. (accepted & forthcoming). "He whānau katoa tātou i roto tēnei mahi"

Telling a story of research excellence. International Journal of Critical Indigenous Studies. Australia Academic Press

2] Peer Reviews

The Arab World English Journal (2011), Malaysia

Title: The Effects of Keyword and Word List Methods on

Immediate Vocabulary Recall of EFL Learners

Authors: Baleghizadeh & Ashoori

3] The Arab World English Journal (2011), Malaysia

Title: Impact of First Language Writing Orientation on the Acquisition of Second Language: An Empirical Study in Oman

Blind Review

4] Letter to the Editor

Citation: J Palliat Care 2010; 26(2): 135

Alison Ramsey

Managing Editor

Journal of Palliative Care (2010)

(514) 340-3540 x4763

Ref: A New Zealand Perspective on Palliative Care for Māori by Wendy Margaret

Muircroft, Judy McKimm, Leeroy William, and Roderick Duncan McLeod, 26: 1/2010; 46–42

5] Book Review

Meaningful inconsistencies: Bicultural nationhood, the free market, and schooling in

Aotearoa/New Zealand, by Doerr, N. M.

Kepa, M. (2011) Journal of Language, Identity, and Education, 10 (4), 1-2

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ISSN: 1534-8458 print / 1532-7701 online

DOI: 10.1080/15348458.2011.598130

Chapter in Book

6] Kēpa, M & Manu'atu, L. Chapter in Book. (accepted & forthcoming) Invitation. Pedagogy, Political Knowledge, Cultural Diversity, Fonua & Fono. *Special Issue on Principles and Innovations in Multilingual Education*. International Review of Education. UNESCO: Germany

Book Review

7] Kēpa, M (in preparation) for the *Journal of Language and Education*, Linguistics Department, University of California, Davis, US. Re-Awakening Languages. Theory and Practice in the Revitalisation of Australia's Indigenous Languages. J.Hobson, K. Lowe, S. Poetch, & M. Walsh (eds) Sydney University Press

NATIONAL

Journal

8] Kēpa, M. (2010) Invitation. Cultural Fragments. Concerning Māori Research Development. *He Pūkenga Korero Journal*. Māori Studies: Te Pūtahi a Toi. Massey University: Te Kunenga ki Purehuroa. Raumati (Summer), 9 (2) pp. 21-28

9] Book Review in the The New Zealand Medical Journal (accepted & forthcoming)

A Eckermann, T Dowd, E Chong, L Nixon, R Bray & S Johnson (accepted & forthcoming). Binan Goonj—Bridging Cultures in Aboriginal Health

Research Reports

10] Citation: Janine Wiles, Kirsty Wild, Ngaire Kerse, **Mere Kēpa**, Carmel Peteru (2011) *Resilient Ageing in Place Project Recommendations*, the University of Auckland, Auckland

11] Citation: Mere Kēpa, Janine Wiles, Kirsty Wild (2011). Resilient Ageing in Place. Older Māori Report & Recommendations, the University of Auckland

12] Kēpa, M (2010) Kaumātua Ngā Kuia: Taonga Aroha. *Annual Report Looking to the Far Horizons Architects of the Future*. Ngā Pae o te Māramatanga, New Zealand's Māori Centre of Research Excellence. P.12

Chapter in Book

13] Kēpa, M. (submitted) Chapter in Book. Invitation. Ageing: Indigenous Māori and Services of Care "He whānau katoa tātou i roto tēnei mahi". Mulholland, M & McIntosh (ends) "Maori and Social Issues". Nag Pea o Te Maramatanga, New Zealand's Maori Centre of Research Excellence hosted by the University of Auckland. March 2010. Submitted: 25 July 2010. Revised March 2011

Book Review:

14] Kidman, J, Māori Education and Neoliberal Citizenship: Beach Crossings in the 21st Century. In P.Whitinui (2011), *Kia Tangi te Titi-Permission to Speak: Successful Schooling for Māori Students in the 21st Century* (pp. 16-25). Wellington: New Zealand Council of Educational Research

COMMISSIONED REPORT

15] Kēpa, M. Whangarei District Council Ruakaka Wastewater Long-Term Consents Project: Companion Volume to the Assessment of Effects on the Environment, November 2010

CONTRIBUTION TO RESEARCH

16] Participant in the Tool kit for Student Carers at The University of Auckland. Equity Office July 2011

17] Conference Coordinating Committee: Critiquing Pasifika Education @ the University. The 3rd Biennial Conference, School of Education, AUT University, 3 to 5 July 2011. Secretary, Conference Coordinating Committee

18] Invitation. AUT University, Auckland. Representative from Stakeholder Organisations to meet with the Audit Panel from New Zealand Universities' Academic Audit Unit (NZUAAU) 16:30 - 17:30 on Wednesday 15 June 2011. City Campus on Wellesley Street East

19] Outcome 23.5.2011: Request from Dr Mel Cheung, PH.D., the UoA, on behalf of *Tu Tama Wahine*, Māori health organization, New Plymouth for the Final Report, *Bring 'Me' Beyond Vulnerability. Elderly Care of Māori, by Māori. Kei hinga au e, kei mate au e. Te Tiaki ā te Māori i te hunga kaumātua Māori* and other publications prepared by **Mere Kēpa**, Corinthia Kēpa, Paul Reynolds, & Ratana Walker for Ngā Pae o te Māramatanga, NZ's Māori Research Centre of Excellence hosted by the University of Auckland

20] Invitation, Ngā Pae o te Māramatanga Research Fellow. 2011 Ngā Pae o te Māramatanga Horizon Seminar Series. Life and Living in Advanced Age: A Cohort Study in New Zealand (LiLACS NZ). A Collaborative Quantitative Longitudinal Research. Waipapa Marae, the University of Auckland. Friday 29 July 2011

21] Invitation, Lee Czerniak, BUPA (British United Provident Association). Community Engagement Workshop Presentation. An Ethic of Community Engagement Between Māori Society and BUPA. BUPA, Newmarket. 15 July 2011

22] Invitation, Ngā Pae o te Māramatanga Research Fellow, International Writing Retreat endorsed by Ngā Pae o te Māramatanga, New Zealand's Māori Centre of Research Excellence. Presentation *Life and Living in Advanced Age: A Cohort Study in New Zealand (LiLACS NZ), Wave 1.* Copthorne Resort, Ōmapere. 6 to 14 July 2011.

23] Invitation, Presenter, 2011 Manu Ao Seminar Series. Te Puāwaitanga o Ngā Tapuwae Kia Ora Tonu *Life and Living in Advanced Age: A Cohort Study in New Zealand (LiLACS NZ). Ngā Wā o Te Koroheketanga. Room 429, Level 4, Human Sciences Building, Symonds Street,* the University of Auckland. 8 June 2011

24] Invitation, Guest Speaker, Life and Living in Advanced Age: A Cohort Study in New Zealand (LiLACS NZ). The Indigenous Māori Treaty Partner. Ellerslie Sunrise Rotary Club Breakfast Meeting, Ellerslie Convention Centre, Ellerslie Racecourse, 7.00 a.m. Friday 3 June 2011

25] Invitation. Kēpa, M, Smith, P, McPherson, B, Kameta H & Kameta, F. Panel Presentation to the International Research Advisory Panel, Ngā Pae o te Māramatanga. *Bring 'Me' Beyond Vulnerability. Elderly Care of Māori, by Māori. Kei Hinga Au E, Kei Mate Au E. Te Tiaki Ā Te Māori I Te Hunga Kaumātua Māori, June 2005 to June 2006, and Life and Living in Advanced Age: A Cohort Study in New Zealand, July 2009 to July 2011 (both projects funded by the CoRE). 2 May 2011. Langham Hotel, Auckland*

26] Invitation, Guest, Age Concern New Zealand, Focus on Serving the Needs of Older People Conference, Wellington, 12 April 2011

27] Invitation, Panel Interview, Life and Living in Advanced Age: A Cohort Study in New Zealand-Wave 2. Te Rūnanga o Ngāti Awa Iwi Radio, Wednesday, 23 March 2011 28] Interview by Peter Shaw, Radio Rhema NZ, Thursday 16 December 2010. Life and Living in Advanced Age Cohort Study in NZ (Māori Cohort)

http://www.rhema.co.nz/index.php?option=com_content&view=article&id=1&Itemid=46

29] Interview. Dionne Christian, Feature Article in Canvas, in The NZ Herald, Saturday 4 December 2010. Life and Living in Advanced Age Cohort Study in NZ

http://www.nzherald.co.nz/lifestyle/news/article.cfm?c_id=6&objectid=10692698

30] Invitation, Consultant, Liz Baxendine, President, of Age Concern New Zealand. Age Concern in New Zealand Board Meeting, Wellington to discuss Age Concern's relevance to Māori including consultation/caucusing options, to advise on a Māori culturally appropriate version of the *Enduring Power of Attorney* brochure. (1 Dec 2010)

31] Invitation, Ngā Pae o Te Māramatanga Research Fellow, Ngā Pae o Te Māramatanga, New Zealand's Māori Centre of Research Excellence. Co Presenter, Waitai, Waima, Waimārie. Caring for Taonga. *Critical and Sensitive Issues in Research Symposium-Water*. Rydges Hotel, Christchurch. 14-15 November, 2010

32] Invitation, Ngā Pae o te Māramatanga Research Fellow, Ngā Pae o Te Māramatanga, New Zealand's Māori Centre of Research Excellence. Presentation, *Life and Living in Advanced Age: A Cohort Study in NZ (LiLACS NZ)*. *Excellence, Distinctiveness, and 10 Years Ahead*. Writing Retreat. Copthorne Resort, Ōmapere. 1-5 November 2010

33] Invitation, Contributor, Life and Living in Advanced Age: A Cohort Study in New Zealand. *Australia & New Zealand Research Consortium (ANZARC)*, Coachman Hotel, Palmerston North. 8th to 9th November, 2010

34] Invitation, Ngā Pae o te Māramatanga Research Fellow, International Indigenous Wananga & Writing Retreat sponsored by Ngā Pae o te Māramatanga, New Zealand's Māori Centre of Research Excellence, hosted by the University of Auckland. Silver Oaks Resort Hotel, Rotorua. 11 to 18 June

35] Invitation, Participant, Families Commission Research Conference. Wellington Convention Centre, Wellington Town Hall. 3 June 2010

36] Invitation, Keynote Speaker, Treaty of Waitangi Training Workshop, LiLACS NZ Research Office, Western Bay of Plenty Primary Health Organisation (WBoPHO), Tauranga to provide an urgent training component for the LiLACS NZ Research Team in Tauranga on the Treaty of Waitangi. 13 May 2010

37] Invitation, Contributor, New Zealand Council of Christian Social Services *NZCCSS Manaaki Hapori/Enhancing Communities Networking* Meeting Parishes, Schools & Social Services in Avondale 214 Rosebank Road

38] Invitation, Speaker, Ngā Pae o te Māramatanga Research Fellow, 4th International Indigenous Conference Mātauranga TakeTake: Traditional Knowledge Ngā Pae o te Māramatanga, New Zealand's Māori Centre of Research Excellence, hosted by the University of Auckland. *Duty of Care: Enhancing People and Organisations in Caring for Each Other in the Māori Research Community and Other People in the World*. Faculty of Business, the University of Auckland. 6 to 9 June 2010.

39] Invitation, Presenter. He Whānau Katoa Tātou i Roto Tēnei Mahi/We Are All in This Work Together. *Bright *Star Inaugural New Zealand's Age Care Workforce Conference, How Can We Manage the Issues Surrounding New Zealand's Ageing Population*. Rydges Hotel, Auckland. 29 to 30 June 2010 June http://www.brightstar.co.nz/conferences/download-documentation

40] Invitation, Ngā Pae o te Māramatanga Research Fellow, International Wānanga Programme sponsored by Ngā Pae o te Māramatanga, New Zealand's Māori Centre of Research Excellence. Developing the *Request for a Proposal for the Critical and Sensitive Issues Symposium*. Silver Oaks Quality Inn Heritage Hotel, Rotorua. March 7-12 2010

41] Attendance, Alzheimer's New Zealand Conference 2010. People, Policy and Partnerships. Wellington Convention Centre. 6 to 8 May 2010

42] Invitation, Observer (on behalf of Age Concern and LiLACS NZ) Wellbeing Summit 2010, Kelston Community Centre, Kelston, Waitakere City Council

PEER ESTEEM

43] Re-invited. Te Whare Wānanga o Awanuiārangi. Advisory Group, Te Ōhanga Mataora Paetahi, Bachelor of Health Sciences Māori (Nursing) 2012–2008

44] Re-invited. Trustee. Age Concern Inc., Auckland 2010-2011

45] Re-invited. Editorial Board Member, *ALTER*NATIVE *An International Journal of Indigenous Peoples*. Ngā Pae o te Māramatanga, New Zealand's Māori Centre of Research Excellence (CoRE) hosted by the University of Auckland

46] Invitation. Ngā Pae o te Māramatanga, New Zealand's Māori Centre of Research Excellence (CoRE), Steering Committee, *Critical and Sensitive Issues in Research Symposium-Water*, Rydges Hotel, Christchurch. 14 to 15 November 2010

47] Grant Reviewer Ngā Kanohi Kitea–Community Research Initiative Referee Request for the Health Research Council of New Zealand. April 2011

48] Grant Reviewer, Māori Health Literacy and Palliative Care, Request for Proposal (RFP). Health Research Council of NZ. February 2011

49] Grant Reviewer Ngā Kanohi Kitea—Māori Knowledge and Development Funding Initiative 09/10. Health Research Council's Māori Health Committee. Health Research Council of New Zealand, 2010

TEACHING

1] PH.D Advisory Group to Marama McDonald, Supervisor Professor Ngaire Kerse

2] PH.D Advisory Group to Nadine Mesnage, Supervisor Dr Valerie Wright St Clair, School of Occupational Therapy, AUT University

3] Prospective PH.D Candidate, Judah Kopu. Research Proposal, Department of Māori Studies, the UoA City Campus and LiLACS NZ (in process)

4] Prospective Masterate Candidate, Florence Kameta, Te Whare Wānanga o Awanuiārangi Secondary Supervisor. Primary Supervisor Dr Wiremu Doherty (in process)

5] PH.D Interview for Soenke Biermann, Southern University, Lismore, Australia

TABLE 3



Table 4

Fact Sheet

- 429 people born between 1920 and 1930 of Māori descent consented to participate in and contribute to the partnership of *Kaumātua:Taonga Aroha* and LiLACS NZ.
- 278 Māori participants completed the Full Interview.
- 148 Māori participants completed the Partial Interview.
- 263 Māori participants completed the Physical Assessment.
- 222 Māori participants donated a Blood sample.
- 18 Māori participants have been declard dead.
- 138/277 (49.8%) Māori participants speak Te reo Māori me ngā tikanga.
- 73/263 (27.8%) Māori participants live in a rural neighbourhood,
- 57/73 (78.1%) Māori participants living in a rural neighbourhooed speak Te reo Māori me ngā tikanga compared to 81/190 (42.6%) of the others.
- 196/391 (50.1%) of the Māori participants named their Iwi/Tribe
- 196/391 (50.1%) of the Māori participants who named their Iwi listed, at least, one Iwi from the area covered by the Contractor responsible for the LiLACS NZ Interview