The Nature of the Gaze: A conceptual discussion of societal privilege from an indigenous perspective

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Whakatauākī

Ruia taitea, ruia taitea, kia tū ko taikākā anake
Strip away the sapwood until only the heartwood remains

Abstract

This thesis explores how Kaupapa Māori paradigms can make important contributions to research topics that may not be of direct or immediate relevance to Māori communities. Insights gained from a Kaupapa Māori investigation of white privilege in Aotearoa New Zealand are discussed. I argue that cultural hegemony is maintained through structured forgetting, silence, and suppression of dissent that has dire consequences for dominant cultural groups as well as marginal. Structural racism and privilege are amenable to analyses utilising similar frameworks albeit from opposite sides that can provide valuable insights to understanding inequity more broadly. I also examine ways in which Kaupapa Māori analyses of white privilege can illuminate pathways of redress that will benefit all New Zealanders and provide more embracing perspectives of nationhood.
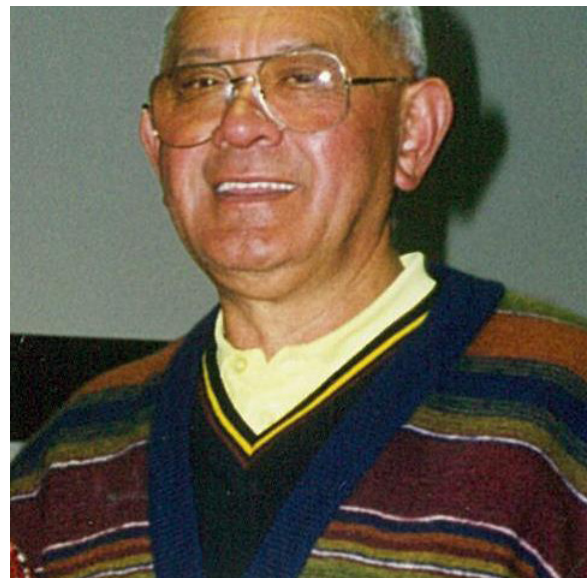
He Maimai Aroha

Reginald Borell
15.05.1937 – 02.05.2015

Hori Pomana
23.12.1954 – 01.01.2017

Alex Whaiapu
23.03.1929 – 15.12.2015

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Glossary

Aotearoa: New Zealand

Hapū: sub tribe, kinship group of multiple whānau

Hui: a gathering or meeting

Iwi: nation, tribe

Kaitiaki: guardian

Kākahu: cloak, garments

Kaupapa: underlying base, general principles, topic, platform

Korowai: cloak with black fibre tassels

Mana: authority

Mātauranga: knowledge

Mihi: form of address, greeting

Mokopuna: grandchild, descendant

Pākehā: people of European origin

Rangatahi: youth, adolescent

Rōpū: team, group

Tangata whenua: indigenous people of the land

Te reo Māori: Māori language

Tikanga: Māori protocols, practices or processes

Wāhi ngaro: lost or hidden place; realm of the supernatural

Waka kōiwi: bone repository

Whakatauākī: significant saying, aphorism

Whānau: extended family groupings and structures

Whāriki: chiefly mat

Introduction

"We had a meeting on Indian religion at Harvard Divinity School and one of the religious leaders opened the conference with a prayer and a pipe, just passed the pipe around. After that, I think it must have been a dozen whites came up to me just breathless; "Oh I've never been in a ceremony like that! That meant so much to me! I just can't tell you how I love Indian religion!"… The craving is just so, there is a desperate need to appropriate from somebody, not necessarily Indians but from somebody, some feeling, emotional feeling of authenticity. And the problem is they all think of themselves as individualists, they don't have definable communities to return to so they're just trapped and I really feel sorry for them." – Vine Deloria Jr (McLeod, 2015)

Aims and Objectives:

The aim of this thesis was to explore the conceptual, theoretical and methodological issues involved in the study of cultural, racial and ethnic privilege in Aotearoa New Zealand. In a similar vein to the gaze on whiteness offered by Native American scholar, Vine Deloria Jr in the quote above, my positional gaze is grounded in indigenous research generally and Māori research in particular. This research describes the political and practical imperatives that locate and constrain indigenous research within academic structures that reiterate and reinforce (settler) white privilege. I propose that societal privilege, as experienced on the basis of race, ethnicity and culture, permeates the entire epistemological process and results in the denigration, marginalisation and symbolic annihilation of indigenous knowledge, paradigms, methodologies and application.

My scholarship is nurturing of alternative understandings of the surface level phenomena of disadvantage. It seeks to open up and explore in detail the dynamics, mechanisms and affective impacts of privilege as key to the constellation of power, resources and control – global, national and local – that underlie and lead to the exclusion, exploitation and harm to indigenous people. I am by no means the first to take this path but it is important for indigenous women to be in this space,

developing and applying an indigenous decolonising paradigm in an effort to describe, understand and redress privilege and its harmful impacts on society. This thesis contributes to the broad areas of racism, whiteness studies, indigenous paradigms and methodology development. It also provides comment on both the scarcity and importance of appropriate analytical tools to examine and illuminate the hidden, repressed and denied phenomena that mark societal privilege, and the marked contrast to the multitude of concepts, methods and analytical tools that describe, ascribe and measure disadvantage.

Data

This thesis draws on several diverse databases collected in the course of research about how social advantage contributes to societal disparities – for which I was Principal Investigator. This work was funded by the Health Research Council of New Zealand between 2007 and 2010 and known as the Privilege project. Data include policy documents, newspaper articles, television news items, and key informant interviews. I also gathered important insights from the delivery of educational workshops and resources related to that work, as well as formal and informal feedback from workshop participants, colleagues and students. Data gathered as part of the Privilege project have been used as the empirical basis for two of the chapters and provided inspiration for the conceptual discussions in the other three. Being in the unique position of carrying out a Kaupapa Māori research project on the topic of white privilege has also inspired the collection of further interview data (with appropriate notification to the Massey University Human Ethics Committee) for the doctorate to give greater effect to this expansion of Kaupapa Māori methodology and its application.

My objectives were to:
- Reflect on and document key learnings from conducting a Kaupapa Māori research project about societal privilege.
- Challenge the notion that Māori research be solely occupied with studying Māori people and subjects that relate directly to Māori communities.

- Reflect on the notion that Māori controlled research projects that focus on a non-Māori subject such as white privilege can provide valuable insights towards improving equity.

- Argue for the expansion of Kaupapa Māori research methodologies, in terms of both definition and application.

- Examine how cultural hegemony is constructed and maintained through the deliberate and vigorous application of epistemologies of ignorance, silence and suppression of dissent.

- Explore how cultural hegemony can be challenged by developing and testing theories that illuminate and inform the structural ignorance, forgetting and silence that keep phenomena like privilege hidden from the primary beneficiaries.

Background

Māori and Pacific disadvantage has long been the subject of intense and ongoing research, policy, monitoring and evaluation initiatives. Indeed, measuring the disparities or quantifiable differences in outcomes for these groups compared to those for other sub-populations consumes considerable material, intellectual and personnel resources, regionally and nationally. Research on disparities suggests that race, ethnicity and gender are important influences on a range of outcomes, irrespective of socio-economic circumstances (Ajwani, Blakely, Robson, Tobias, & Bonne, 2003; Anderson et al., 2016; Bécares, Cormack, & Harris, 2013; Blakely, Fawcett, Atkinson, Tobias, & Cheung, 2005; J. Hattie, 2003; C. P. Jones, 1999; Paradies, 2006b; Paradies et al., 2015; Bridget Robson & Ricci Harris, 2007). Various forms of social exclusion, including racism and sexism (Ricci Harris et al., 2006; Karlsen & Nazroo, 2002; Krieger, 2003; Yin Paradies, Ricci Harris, & Ian Anderson, 2008), are key factors in explaining disparities. If we accept there are forces in our society (other than socio-economic) that are significant in creating and maintaining disadvantage within certain populations, and that access to opportunity is relative, it is also likely that equivalent forces – environmental, cultural, societal, institutional,

interpersonal and psychological – protect and perpetuate *advantage* in other population groups. Dominant societal discourses and practices surrounding notions of meritocracy, democracy, civilisation and equality help create and embed the racial and gender privilege within our society to the point where it is practically *invisible* (Consedine & Consedine, 2005; Kimmel, 2010; Aileen Moreton-Robinson, 2004; Wise, 2008), particularly to those who enjoy its benefits and advantages.

This introduction will outline the key ideas examined in this thesis and detail the literature that forms the backdrop to these conversations. I begin by briefly outlining what is meant by the 'nature of the gaze' in relation to indigenous people and formal academic research to contextualise the arguments to come in the following chapters. I will explain the antecedents to this doctorate by outlining how this gaze was shaped by earlier research about racism culminating in the Privilege project.

I will then briefly outline the literature most useful in understanding racism, whiteness and privilege to illuminate the role each plays in perpetuating racial injustice. This is critical for readers because, based on my experience of researching and educating in anti-racism and white privilege for the last decade, it is difficult to think of any other area of human experience so personally familiar that encompasses such superficial knowledge. Cursory understandings of racism solely as acts of individual prejudice are rife in our public discourse. It is my hope that the literature below can assist readers in appreciating how these acts are informed by the structural and institutional elements of racism and privilege that produce the ethnic group disparities so prevalent in society. I have organised the literature as follows. Firstly I explore some of the empirical evidence that highlights how racism has fuelled and perpetuated inequity across society in most areas of everyday life over many generations, and denied justice to those most adversely affected by these disparities. Of particular interest are the pathways of racism, from the structural to the interpersonal, as manifest in racism stressors and impacts of social ascription.

I will then examine some of the major new developments in the academic study of racism, particularly as it pertains to privilege. The goal here is to highlight how

societal privilege works, both as a means of advantage for dominant groups relative to the marginalised, and also as an undermining force in society more generally, and how it can leave dominant group members themselves vulnerable to adversity, even though its prevalence may be rare.

The nature, forms, dynamics, pathways, entrenchment and invisibility of societal privilege and its implications for indigenous research, development and advancement are under-researched areas. They nevertheless have great potential to enhance understandings of inequitable social relations as a determinant of health, wellbeing and life experience for both those who possess it and those who are excluded. This thesis is devoted to the exploration of societal privilege in Aotearoa and how it shapes life experience, research on the social gradient (Commission on Social Determinants of Health, 2008; Michael Marmot & Wilkinson, 1999) and indeed the very nature of indigenous inquiry, knowledge creation and application.

The Nature of the Gaze

Researching indigenous peoples

Much has been written about the experiences of indigenous people in the domain of Western or 'mainstream' research activities (M. Battiste, 2000; Deloria Jr, 1995, 1998; Grossman, 2003; Aileen Moreton-Robinson, 2004; L. T. Smith, 1999, 2012). The scientific tradition has, up until relatively recently, seen indigenous people as an oddity or exotic group from which to draw information and impose policy, so facilitating the colonising process (D. T. Goldberg, 1993; H. Moewaka Barnes, 2000; L. T. Smith, 2012). The cataloguing, archiving, investigating, measuring and documenting activities of the mainstream research community has often sought to examine and explain indigeneity, with little or no recourse to the needs and aspirations of indigenous people themselves. Indigenous people have and continue to be the target of what Said (1978) explains as the union of knowledge and domination for the purposes of empire. Knowledge creation in the imperialist paradigm is essential to justify, even necessitate, the theft of indigenous land and

resources and the erasure and subordination of indigenous language and culture, while cementing the universality of the imperialist gaze as the natural, objective and scientific truth (M. Battiste, 2000; Battiste & Barman, 1995; Said, 1978; L. T. Smith, 1999).

As Smith (1999) argues, research on indigenous peoples has continued a colonial process by which the stories, histories, artefacts, texts, images and ideas of numerous people were often stolen, then "classified, preserved, arranged and represented back to the West", and claimed by them. This process is fundamental to 'discovering' indigenous people, their material possessions and culture re-classifying said items into Western-controlled and knowable archives. Together these practices ensure that the 'gaze' of the West is seen as universalising objective truth, to which the identity, understandings and meanings of the indigenous world can only ever be a subaltern, marginal, exotic and 'other' (Said, 1978; Spivak, 2010). The hegemony of Western epistemology and the metropolitan North has meant that indigenous theory remains partial and inferior (Connell, 2007). The application of these processes to knowledge of indigenous worlds facilitates the hierarchical classifying of peoples, which in turn legitimates and rationalises a series of policies and practices (notably racism, capitalism and colonialism) that allow for the exploitation, appropriation and alienation of the lands, properties, knowledges, cultures, labour, bodies and futures to the service of metropolitan power.

Māori in Aotearoa New Zealand, like indigenous people globally, have been steadfast in their resistance to the outcomes such knowledge has generated on their people, and also to the epistemic foundations of the knowledge itself. Recognition amongst indigenous people that research is linked to the depredations of empire has led to a deep and warranted suspicion of academic research and researchers (Health Research Council of New Zealand, 2010; Jackson, 2008; Ramsden, 2002; Rigney, 1999; L. T. Smith, 1999). On the other hand it is precisely these experiences and the resistance to their continuation that has reinforced greater acknowledgment and recognition of indigenous peoples' own knowledge traditions, and their superiority in explaining the world as they see it. Ironically then, the academy has been a fertile

ground for the dissemination and continued development of indigenous paradigms, methodologies and approaches to research that not only provide some well needed innovation in the development of knowledge in these sites, but also legitimate paradigms of knowledge specific to geographical place gained over centuries of habitation (Deloria Jr, 1995, 2002; Grossman, 2003; Nakata, Bryrne, Nakata, & Gardiner, 2005; L. T. Smith, 1995, 1999; Ranginui Walker, 1990).

The involvement of indigenous people in all manner of research activities has grown significantly in the last 30 years (Chilisa, 2012; L. T. Smith, 2012). In New Zealand, as elsewhere, the number of indigenous researchers has been steadily increasing toward critical mass and the validation of indigenous paradigms of knowledge creation and methodologies of enquiry has gained much momentum (R Bishop & Glynn, 1999; H. Moewaka Barnes, 2000, 2008; L. T. Smith, 1999; Ranginui Walker, 1989). Most agree that in terms of involvement, one may loosely map indigenous research on a continuum from research that is non-indigenous and does not involve indigenous people, paradigms or indigenous applicability at all, to research that is centred within indigenous paradigms, of high relevance to indigenous communities and having a strong focus on utility to improve indigenous lives. There is much variation between these two poles.

The bulk of indigenous engagement with research tends to remain in the dominant pattern where we are participants in non-indigenous controlled projects (H. Moewaka Barnes, 2008). While the recognition that research needs to be appropriate and meaningful to indigenous people has necessitated greater active input of indigenous communities and expertise, most research involving indigenous people is still driven by formal academic institutions, or as part of the agenda of government agencies. Much of this research assumes that indigenous people will be the subjects or participants in the research project, and not the research leaders, instigators or controllers. What happens when indigenous people do control the research project, questions, paradigms, staff, participants, analyses and dissemination?

Studying societal privilege-scoping

Throughout the early 2000s Whāriki Research Group experienced significant developments in the types of research we conducted, supported by the emergence and development of Kaupapa Māori research methodology (Smith, 1991, 1999). From its inception in the mid-1990s as a collection of Māori students and researchers with a focus on appropriate and useful evaluation research for Māori, Whāriki took on a series of researcher initiated projects, both strategic and applied, and the group grew steadily in size and stature. As a consequence of this expansion, Whāriki was able to have greater involvement and take leadership roles in projects that examined racism. Part of this development involved cementing relationships with Pākehā academics with extensive experience in researching racism, and Pākehā discourses about Māori, Pākehā and race relations in general (McCreanor, 1993; Timothy McCreanor, 1997; McCreanor, 2005; McCreanor & Nairn, 2002; Nairn & McCreanor, 1991; Wetherell & Potter, 1992). Patterns identified in Pākehā discourse about Māori produced a set of themes (Nairn & McCreanor, 1991) that have been important in later analyses (Angela Moewaka Barnes et al., 2012), and in the development of the Privilege project (Belinda Borell, Amanda Gregory, Tim McCreanor, Victoria Jensen, & Helen Moewaka Barnes, 2009).

In 2005, Whāriki Research Group began a formal examination of the conceptualisation of societal privilege in Aotearoa New Zealand and its implications for the social and health status of the nation. This research was informed by a knowledge of earlier articulations by Pākehā research participants across a range of studies that seemed to indicate distinct experiences of societal privilege (McCreanor, Watson, & Denny, 2006). Specifically, the participants were "overwhelmingly comfortable and stable in their family environments and who are also optimistic, future-focused and looking forward to life's challenges and excitements" (McCreanor & Watson, 2004, p167). These descriptions of comfort and stability often seemed at odds with Māori and Pacific participants in the same data sets in terms of their norms, practices and expectations of society (B. Borell, 2005; V. Jensen, 2006).

We wanted to explore these experiences and status by further applying our own worldview to the issue. This was important firstly as a means to give effect to the importance of the Treaty of Waitangi as a guiding framework for respectful relationships between Māori and non-Māori, but also as a means for understanding an often overlooked area of health disparity, namely conferred societal advantage.

Studying societal privilege – The Privilege Project

A scoping study (funded by Nga Pae o te Maramatanga, the Māori Centre for Research Excellence at the University of Auckland) allowed the team to design a larger proposal that was awarded a grant by the Māori Health Committee of the Health Research Council in 2007. The 'Privilege Project' was a four year qualitative exploration of cultural, racial and ethnic privilege in relation to health systems in Aotearoa which examined three key domains: health policy, the media, and experiences of a diverse group of participants. The project sought to improve understanding of societal privilege in relation to health policy and the media, and to enable a broad critique of recent health policy and the differential implications this may have had on health and wellbeing of different groups of New Zealanders.

At the time the Privilege project was commencing, Aotearoa New Zealand was still working through the fallout from the infamous "Orewa Speech" delivered by opposition and National Party leader, Don Brash. In his speech to the Orewa Rotary Club in January 2004 (New Zealand National Party, 2004), Don Brash lamented Māori progress as a "dangerous drift towards racial separatism". In the aftermath of the speech and the enormous outpouring of public support for the ideas expressed in it (Johansson, 2004), the Labour government decided to review all programmes and policies that targeted recipients on the basis of ethnicity. The review was managed by a Ministerial Review Unit based in the State Services Commission. Part of the Privilege Project was to examine as much of the official record of this process as possible. As a result of the review, changes were flagged for 21 programmes and policies (New Zealand Government, 2004, 2005b). The changes largely entailed either the removal of ethnicity in the targeting framework (for instance removing

ethnicity from the funding formula to determine school decile rating), or broadening the targeting language to include all those in need rather than the targeted ethnic groups; a phenomena now termed "whitestreaming" (H. Potter & Cooper, 2016).

The Privilege Project also analysed white privilege in media, examining issues such as the formation of the Auckland 'Super City' (Field, 2010), the historic racism of the Dawn Raids (Pearson, 2011) and the increase in respondents who wrote "New Zealander" in the 2006 Census of Population and Dwellings (Statistics New Zealand, 2007a). In addition we collected in-depth interview data from a range of Pākehā participants, some of which is discussed in Chapters 3 and 4 of this thesis.

In addition to these outcomes, our research team built important relationships with other theorists and researchers in the broad racism field in Aotearoa New Zealand. Members of our research team were invited to join a "Racism Network" of Māori researchers engaged in research around structural racism and privilege. These connections with other Māori racism experts continue to inform and strengthen my analyses. We were also successful in obtaining a Knowledge Event Support Grant from Nga Pae o te Maramatanga to hold the "Make Privilege History" meeting in November 2011. Thirty invited key theorists, researchers and activists attended the meeting, including international guests Professor Nancy Krieger and Professor Margie Wetherell. The Privilege project and related activities have formed the ideological, empirical and collegial basis for this thesis.

Racism

A conceptual discussion about societal privilege experienced differentially by ethnic group is a discussion about racism. Racism is defined as:

> *"a system of structuring opportunity and assigning value based on the social interpretation of how we look" (Camara Phyllis Jones, 2010).*

Of all the definitions of racism in dictionaries and other literature, or found using online tools like Google, this definition best captures what this thesis and my work in

the area is designed to bring forward. Key in this working definition is its marking of racism as a *system* of social relations and group disparity. It is describing racism as a system rather than as a set of beliefs about inferiority or superiority, or acts of interpersonal discrimination or intolerance, thereby making explicit that racism can and does exist outside of any individual's active intent. This removes the polemic duality so obstructive/counterproductive to effective education about racism, that it is about good and bad people, that is good people who are not racist and bad people who are. Conceptualising racism as a system of structures, institutions, ideologies and practices makes explicit the idea that there are larger forces at work beyond an individual's intent, choices, beliefs, or even their missteps or blunders. In this way, the definition more comfortably includes privilege as part of that system, as most other definitions are exclusively about prejudice and discrimination.

I also prefer this definition because it mentions key elements of this system – especially *opportunity* and *value* – that can greatly assist learners and activists. In my teaching and researching about racism, these elements have been critical to explaining the concept more fully and they serve as important junctures for developing interventions that may address racism. I often elaborate opportunity as including access to power (both political and economic) and describe value as inclusive of concepts like social status.

This definition of racism is also useful in that it articulates "race" not as a set of biological markers, a theory debunked for generations (Sussman, 2014), but as a *social interpretation* of one's appearance (Camara Phyllis Jones, 2010). And while this is not perfect – social interpretations can be made on non-visual factors including how people sound (in that some accents are more valued than others, for instance) – it makes explicit that racism is about how humans interact with each other rather than the makeup of their genes.

To better understand racism as a characteristic of disparity that is a modifiable determinant of health, theorists have usefully divided the phenomenon into institutional, personally mediated (also known as interpersonal), and internalised

components (C. P. Jones, 2000; Paradies, 2006a). Through our work on the Privilege project, and in subsequent theorising, we extrapolated institutional and structural racism as separate components (see Chapter 2). In our analyses, structural racism describes the higher level epistemologies, representations and social narratives that naturalise white (and in the New Zealand instance, Pākehā) supremacy; it is the systemic imposition of Pākehā values, cultural norms and sensibilities onto Māori and other non-Pākehā settlers through the ongoing process of colonisation.

Institutional racism is described as the differential access to societal opportunity and public goods and services on the basis of ethnic identity (R. Harris et al., 2012a; C. P. Jones, 2000; Paradies, 2006b; Yin Paradies et al., 2008). Paradies and Cunningham (2009, p.551) operationalises institutional racism as 'systemic', defining it as "the production, control and access to material, information and symbolic resources within a society that serve to increase power differentials between racial groups". Institutional racism then is seen as much more closely related to the operational practices, requirements, policies and processes that give effect to the structural imposition of white supremacy via societal institutions that maintain and re-produce social inequities. For most people, the structural and institutional aspects of society are framed within an egalitarian ideology (Wetherell & Potter, 1992), where the over-riding epistemological and cultural basis of these structures is invisible and they are perceived as neutral and applicable to all. As such, structural and institutional racism are often misinterpreted as a personal or collective failing of those adversely affected by it, rather than an unjust leaning in the system itself.

Interpersonal racism, on the other hand, is what most people understand when they think of 'racism'. It is the attitudes, beliefs, and assumptions made about someone based on their race (e.g. in terms of ability, intelligence, work ethic, law-abidingness) and differential acts made towards someone because of those attitudes, beliefs and assumptions. Jones (1999) describes the attitudes, beliefs and assumptions as *prejudice* and the actions as *discrimination*. Acts can range from receiving poor service and a lack of respect, to suspicion and avoidance and ultimately to dehumanising language and behaviour and hate crimes.

Internalised racism is defined as acceptance by members of the discriminated group that the negative perceptions and stereotypes made about them are in fact true and reflective of their individual and collective abilities and self-worth (Paradies & Williams, 2008). This may manifest as general devaluing of themselves and their culture, rejection of positive markers of their racial identity and even embracing physical changes so as not to look like their group (hair straightening, skin bleaching, leg-lengthening surgery, etc).

Racism in Aotearoa

Society in Aotearoa New Zealand is marked by major ethnic and cultural disparities in health and wellbeing. Inequalities between Māori and non-Māori are deep-seated and well documented in a broad range of domains, including health (Ajwani et al., 2003; Pomare, 1980; E Pomare et al., 1995), wealth and income (Spoonley, Pearson, & Macpherson, 1991), housing (Howden-Chapman, 2004), education (J Hattie, 2003; L. Smith & Simon, 2001), and in representation in the media (A. Gregory et al., 2011; McCreanor et al., 2010; Nairn et al., 2009). These inequalities are seen as the result, at least in part, of the imposition of monocultural political and bureaucratic policies and practices established in the colonisation of the country by Britain (Belich, 1996; Cunningham & Durie, 2005; M. Durie, 2004; Fitzgerald, 2004; Howden-Chapman, 2004; P Reid & F Cram, 2005).

Popular explanations of this situation draw upon an egalitarian ideology of equitable social relations (A Bell, 1996; Bell, 2004b; Fitzgerald, 2004; Humpage & Fleras, 2001; McCreanor, 2005) to account for outcomes that sum to create disparities. Such accounts emphasise the responsibility of individuals for their life choices and experiences in ways that are congruent with the neo-liberal political regime and ambience that has been in place since 1984 (Jane Kelsey, 1995; Kelsey & New Zealand Law Foundation, 2015). These explanations also fit with social Darwinist justifications of the exclusion and marginalisation of indigenous peoples (D. Goldberg, 1993; L. T. Smith, 1999) that have been central to settler culture in New

Zealand since the early 1800s (Ballara, 1986; Belich, 1986; TN McCreanor, 1997; RJ Walker, 1990).

Despite early observations of health, vigour and longevity among tangata whenua (Banks, 1962; Beaglehole, 1968; Ward, 1839), European settlers in Aotearoa arrived ideologically wedded to imported racisms (Ballara, 1986; TN McCreanor, 1997) such as 'fatal impact' theory (Adams, 1977) and what Kipling referred to as "The White Man's Burden" (Murphy, 2010) of civilising non-white peoples. The popular notion that indigenous populations would melt away before the superior, civilizing mission of the settlers (Moser, 1988; A. Salmond, 1991; Sinclair, 1977) was disabused by Māori diplomacy, resistance and innovation in the nineteenth century (Belich, 1986; King, 2003; RJ Walker, 1990), and since then by major Māori population growth from the beginning of the twentieth century (Pomare, 1980; Sutherland, 1940; RJ Walker, 1990), and by the subsequent Māori renaissance that has driven current demographic, economic and political resurgence (Derby, 2012; M. Durie, 2001, 2013). Regrettably, settler acknowledgement that the culture and practices of colonisation are still a key determinant of Māori mortality and morbidity is not commonplace. The efforts of academics and commentators such as Moser (1988), McLintock, (1966) and Pember Reeves (1899) to talk Māori out of existence at the turn of the nineteenth century failed, but varied practices of representing Māori as inferior, marginal and as rightfully giving way to the dominant culture in their own land, remain (Ballara, 1986; McCreanor, 2008; L. T. Smith, 2012; Wetherell & Potter, 1992).

It is increasingly recognised in the international literature that societal exclusion and marginalisation reduce opportunities (Allport, 1954; Daniel Dorling, 2010; D. Goldberg, 1993; Wetherell & Potter, 1992), perpetuate a racialised socio-economic situation and maintain stress at levels that, particularly over the lifespan, result in multifaceted ethnic disparities in a wide range of social settings (Karlsen & Nazroo, 2002; Krieger, 2003; LaVeist, 2003; RG Wilkinson & Marmot, 2003).

Causal links between racial and ethnic discrimination (at multiple levels), and the health and wellbeing of individuals and groups are increasingly recognised in the

international literature (Cain & Kingston, 2003; Gee, 2002; LaVeist, 2003; McKendrick & Thorpe, 1998; McKenzie, 2003; Swan, 1998; D. Williams, 1999; D. Williams, Neigbors, & Jackson, 2003). In this country, Harris et al. (2006) found that Māori were up to ten times more likely than Europeans to report experiences (including violence, abuse and exclusion) of racial discrimination in interpersonal relations, in the healthcare system, in employment and in the housing market. They concluded that racism, in both interpersonal and institutional forms, contributes to health disparities between Māori and Europeans. There is also evidence (Bécares et al., 2013) of some health gain from the ethnic density effect for Māori, that is Māori living amongst other Māori can produce a buffering effect on particular measures of health and wellbeing. However, these protective effects of ethnic density were masked by area deprivation.

Conventional discourses offered to explain disparities in a range of sectors focus on individual responsibility as the primary site for intervention, which often negates both wider societal obligations and the possibility of acknowledging advantaged groups' position in society (McKay, 1999a; Solomon, Portelli, Daniel, & Campbell, 2005). The invisibility of conferred privilege supports and perpetuates disparities by allowing those who have advantage to attribute their fortune to merit and others' disadvantage to personal issues, bad luck or lack of hard work rather than acknowledging and understanding structural forces (Ancis & Szymanski, 2001; T. L. Robinson, 1999). Historically, social science may have reinforced common discourses and understanding**s** of inequality by producing research that focuses on disadvantage and disparity, leaving those with the most privilege in our society unmarked and under-investigated (Ferber, 2003; Johnston, 1998).

Social Ascription Ethnicity

Socially assigned ethnicity is an area of growing interest, investment and research activity in Aotearoa New Zealand. It seeks to expand understanding of racism as a determinant of health by examining the concept of socially-assigned (or socially ascribed) ethnicity, in other words how one may be classified ethnically by others, irrespective of how one defines oneself. In Aotearoa New Zealand these latest

innovations in racism work are being undertaken by researchers at Te Rōpū Rangahau Hauora a Eru Pomare within the University of Otago (Cormack, Harris, & Stanley, 2013; R. B. Harris, Cormack, & Stanley, 2013). Their findings show that, irrespective of how an individual self-identifies, Māori who reported that they were most often socially ascribed as white/Pākehā were significantly less likely to report experiences of interpersonal racial discrimination and psychological distress and had higher socio-economic status. Together these produced a health advantage for Māori in this group, reinforcing the notion that the structural representations of different ethnic groups can have powerful interpersonal and internalising effects on individual health. These findings are supported by previous studies (Camara Phyllis Jones, 2002; C. P. Jones et al., 2008).

Further, Houkamau and Sibley (2015) measured "perceived stereotypicality" for Māori to find that self-perceived and socially ascribed appearance as Māori was the only statistically significant predictor of decreased rates of home ownership amongst Māori. Demographic covariates such as educational level, household income, age, relationship status, neighbourhood deprivation, and levels of Māori cultural efficacy did not negate this effect. The appearance of Māori ethnicity both self-identified and socially ascribed is compromising Māori access to housing, a crucial element among the social determinants of health.

Whiteness

For the purposes of this doctorate I have chosen to group the following literature under the loose heading of 'whiteness'. While there are various understandings of what whiteness can mean, both within and external to the academy, whiteness in this study represents a combination of the two central tenets – critical race politics and white privilege.

Critical race politics

The 1960s and 1970s provided perhaps some of the most profound and valuable critiques about the identifying and positioning of the 'other' and its intrinsic links to

power, Western imperialism and colonisation in academic writing and praxis (Foucault, 1965; P. Freire, 1972; Said, 1978). A fundamental underpinning in these works was to highlight the *relational* aspect of power and 'othering', prompting questions around the issue of "other to what?" For instance, Said (1978) argued that through the explicit descriptors of the "oriental" other as portrayed in Western art, literature, politics and scholarship, *implicit* comment was also being made about the West. If people in the Orient were explicitly portrayed as barbarians, implicitly this meant the West was civilised. This manufacturing of the 'other' as explicitly inferior, and the associated implication of Western superiority, was crucial in justifying the domination and exploitation of the East. Importantly, Said is also critiquing the lens through which the East was seen as being anything but unbiased in arguing that knowledge and domination almost always worked together in advancing an imperialist agenda.

More recent theorising has signalled a more nuanced and expanded analysis of systems of oppression and supremacy, making greater claims about their racial, gendered and cultural underpinnings (bell hooks, 1981; Deloria Jr, 1995; A. Jones, 1991; Leonardo, 2002; Aileen Moreton-Robinson, 2003; Okihiro & Delgado, 1988; Riggs & Walker, 2004). Some of this later literature that seeks to explore supremacy experienced on the basis of race has been nurtured, at least in the academic sense, in what has become loosely known as 'whiteness studies' (Allen, 1994; Fine, 1997, 2004; Garner, 2007; Ignatiev, 1996). Whiteness studies and various other forms of critical race analysis (Applebaum, 2008; Frankenburg, 1993; Hage, 1998; Peggy McIntosh, 1990; Riggs, 2007) attempt to centralise differential access to power, and to gain a greater understanding of the manifestations of racism by not just tracking the experience of victims of racial and ethnic discrimination, but rather by focusing on the beneficiaries of racial or ethnic privilege (Fine, 1997; Kendall, 2013; Sullivan, 2006; Wise, 2008).

White privilege

White privilege is a fundamental descriptor of a system that creates, sustains and perpetuates the supremacy of white people, values, norms and epistemologies

(Kimmel, 2010; McKay, 1999a; Aileen Moreton-Robinson, Casey, & Nicoll, 2008; Wise, 2008, 2010). Privilege refers to systemic and interpersonal advantages on the basis of one's membership of a group that has normalised and preferred status in society (Frankenburg, 1993; Kimmel, 2010; Peggy McIntosh, 1990; Movsessian, 1999).

White Privilege: Unpacking the Invisible Napsack (Peggy McIntosh, 1990) continues to be one of the most powerful and widely utilised critiques of white privilege in the maintenance of racial hierarchies. Among the ideas that McIntosh presented is a list of approximately 50 statements the author felt she could take for granted as a white person that wouldn't necessarily apply to people of colour. The most cited examples are:

- I am never asked to speak for all the people of my racial group.
- I can be pretty sure that if I ask to speak to the "person in charge", I will be facing a person of my race.
- I can do well in a challenging situation without being called a credit to my race.

At a conference I attended in 2011 in Denver, Colorado, a young researcher presented data that measured the statements in the McIntosh knapsack list according to college students' degree of agreement with them and perceptions of their effectiveness in shifting white students' attitudes about racism. In the report of that research (Boatright-Horowitz, Frazier, Harps-Logan, & Crockett, 2013), the following two of the 50 statements were rated the most effective in predicting racism by white students:

- I can go shopping alone most of the time, pretty well assured that I will not be followed or harassed [by a store detective].
- I can chose blemish cover or bandages in "flesh" colour and have them more or less match my skin.

McIntosh's list of racial advantages has been a catalyst for the development of a wide range of other 'privilege lists' (Amptoons, 2015) that seek to highlight societal

privilege on the basis of gender, sexual orientation, being able-bodied, class, religious affiliation, national identity and citizenship.

While much has been done to bring white academics into the wider debate about racism and racial inequality, much of the debate circles around what has been called the "black/white binary" (Gines, 2013; Linda Martín Alcoff, 2013; Aileen Moreton-Robinson et al., 2008; Perea, 1997), where the position of white power and privilege is most often juxtaposed to the powerlessness and disadvantage of black minorities. The explicit ignoring of other racial minorities has been a point of contention, particularly in the USA where direct challenges have been made in relation to the place of non-white, non-black peoples in the racial hierarchy, largely by Latino and Asian American scholars (Okihiro & Delgado, 1988; Perea, 1997). However, the voice of indigenous people in current critiques of the relationship between whiteness and 'others' has been less prevalent in the United States literature, and has tended to coalesce around protest about the practice, and effects on Native people, of tribal names and iconography being used as mascots for non-Native sports teams (Fryberg, Markus, Oyserman, & Stone, 2008; Staurowsky, 2007; Steinfeldt et al., 2010). Research and commentary from Australian academics explores the position of indigenous people more broadly (ACRAWSA, 2017; McKay, 1999b; Aileen Moreton-Robinson, 2004).

It is my hope that this thesis will make a small but vital contribution to the growing analysis of whiteness, white privilege, critical white racial identity and the relationship with indigenous identity and self-determination in Aotearoa/New Zealand.

White Fragility

An area of growing importance in understanding how privilege works for whites in social settings has increasingly coalesced in the concept of *white fragility*. This concept has been defined as:

> *"a state in which even a minimum amount of racial stress becomes intolerable,*
> *triggering a range of defensive moves. These moves include outward displays of*

emotions such as anger, fear, and guilt, and behaviours such as argumentation,
silence, and leaving the stress-inducing situation. These behaviours, in turn,
function to reinstate white racial equilibrium." (Diangelo, 2011, p.54)

White fragility describes a set of responses from whites to the exposure of racial inequities and white privilege. These exposures to their own place within an inequitable and deeply racialised society tend to reveal a set of denials, dismissals and particular entitlements from white learners that any anti-racism educator will be familiar with. For instance, because whites have difficulty seeing themselves as anything other than individual, they struggle with thinking of white people as a group with similar interests and backgrounds. So the "not all of us…" defence to dismiss the impact of racism and white privilege is common. Other aspects of white fragility include an irrational fear that talking about racism makes one more likely to be racist, an entitlement to racial comfort, a sense of innocence about racism (often manifest as an inflated focus on intent and not impact), and a certain expectation the it is the job of people of colour to educate whites about racism. These factors have long been recognised in Aotearoa New Zealand. A paper published in 1999 about the experiences of Alison Jones and Kuni Jenkins (A. Jones, 1999) was a key work in the later development of the white fragility concept.

Deaths of Despair

In the last year of this doctoral study, some concerning data was being reported from the USA (Case & Deaton, 2015) that on the face of it seemed to seriously challenge the concept of white privilege and question its usefulness in explaining social realities. In their examination of mortality and morbidity data, these researchers found that, although racial disparities in mortality and morbidity rates remained large, with African Americans experiencing much greater burden proportionally than their white or Hispanic counterparts, mortality and morbidity rates for Black and Hispanic populations were decreasing. For whites (both men and women) these rates were increasing, largely driven by whites in midlife (aged 50-54) with a high-school level education or less.

Detractors of white privilege may highlight this as evidence that white privilege does not exist. The argument here is that if white people enjoy such political, economic and cultural power, relative to others, how can their mortality rates be increasing when other ethnic groups are decreasing? A clearer picture begins to emerge when one considers the causes of death and morbidity driving the increases. The three primary causes of increased deaths for these non-college educated whites are poisonings (mostly from drug overdoses), chronic liver disease (mostly due to alcohol addiction) and suicide. Such was the importance of these causes of early mortality amongst midlife working class whites, that the authors called these "deaths of despair". As the authors are both economists, the explanations offered for the increase centre on links to income, employment and education. They argue that globalisation and increased automation in the workplace are changing employment patterns and that intergenerational loss of employment prospects explains some of the increase in mortality. They also suggest a sense of cultural decline in this group as reflected in changes in rates of marriage, a reduced role of the church and greater social isolation. The mortality and morbidity outcomes being reported begin to make sense when one considers the difficulty many lower income people have in securing effective health services, greater availability of prescription opioids, and more generally the social and economic decline that is producing many mentally unwell individuals with little support.

Not offered was any detailed analysis of how white privilege may play into these deaths. Such an analysis might argue that the deaths do not only reflect social and economic decline in this demographic – which in reality has been experienced more pervasively and for much longer by the black community; yet have not responded to these conditions in the same way as affected whites. Rather, viewed through a white privilege lens, I would argue that in addition to the social, political and economic conditions, the level of *expectation* that society would take care of you has also declined. There has been fundamental shaking of the narrative that if one played by the rules and just applied oneself, reward would then surely follow. Of course this is an expectation that has never held true to the same degree for communities of colour, often despite their effort and application. Thus black and brown populations

are well used to coping with such levels of adversity, and the general political indifference that accompanies such matters in these communities. This inability to cope with such a sense of loss of power, opportunity and status has deeply affected whites with little collective wherewithal. So far from refuting that white privilege is real, a deeper racism analysis of these mortality rates actually supports the notion of white privilege; that it has buffered these white communities so well for so long that they have not only been left vulnerable, but have actually been harmed by the very thing that may have given them a sense of superiority to start with. Adding to this is a sense that the political elite at worst caused this decline, or at best ignored it, thereby creating the perfect conditions for the rise of the racist, sexist demagogue we now see in the USA. Indeed, Monnat (2016) mapped these deaths county by county in key areas of residence for less educated whites (Industrial Midwest, Appalachia and New England) and found a definitive correlation between these mortality increases and election success for Donald Trump. However, perhaps the most distressing thing for an indigenous researcher is contained in a footnote of the Monnat paper: the only ethnic group that had higher mortality rate increases from drugs, alcohol and suicide were Native Americans (Monnat, 2016, p.8 note 4). If "inaction in the face of need" (Camara Phyllis Jones, 2002) constitutes evidence of institutional racism, then the fact that Native people, who experience higher rates for the same causes of mortality than whites, rate a single footnote to a phenomenon that appeared to consume media attention about health in the later parts of 2016 adds further weight to the validity and inherent danger of white privilege.

The Chapters

This thesis contains five chapters to which published or submitted papers are the centre-piece, 'bookended' by Introductory and Discussion sections. Each of the five research chapters is prefaced by a linking page to provide the necessary background that helped develop the ideas expressed along with details of the relevant journals that have published or are currently reviewing the chapter as a paper for publication.

The first chapter, *When the marginalised research the privileged: One Māori group's experience* lays out what I consider the central challenge of this thesis and narrates Whāriki's journey into the broader area of anti-racism research culminating in the successful project about societal privilege in Aotearoa New Zealand using Kaupapa Māori epistemologies. I argue that the academy is structured to view indigenous people and indigenous research in particular ways. The Privilege project challenged these notions and revealed the ways in which whiteness permeates the research process using our experiences of research funding, assessment and ethics as sites of contestation.

Chapter 2 titled *Theorising the structural dynamics of ethnic privilege in Aotearoa: Unpacking "this breeze at my back"* considers a theoretical framework that elucidates the complexities of societal privilege as an underexplored part of the social construction of racism. Well documented frameworks that seek to understand the construction of racism as including aspects of societal structure; institutional norms and practices; personally mediated acts of individual intolerance and the subsequent internalisation of racial stereotypes are the key features. These frameworks have become widely used in the literature to assist anti-racism workers in understanding the many possible sites of intervention to address racism. Yet they focus almost exclusively on the construction of racism as discrimination producing negative life outcomes for particular groups, most often minorities. Much less explored is the construction of racism as privilege that enables the foundations for advantageous social and life outcomes most notably for the normalised and dominant ethnic group who most often, but not always, constitute the majority. In this chapter we attempt to utilise the racism frameworks to demonstrate that societal privilege also has structural and institutional elements; personally mediated acts of preference that are often invisible to those that receive it; and an internalised sense of expectation and entitlement. We do this using particular discursive trope similar to those developed by McIntosh (1990) that helps illuminate these in everyday language.

The third chapter *Fumbling in a vacuum: explanations of mainstream privilege* begins to look more closely at the complexities the invisibility of societal privilege creates in

everyday conversations with Pākehā participants. The difficulties they appear to encounter in trying to discuss their own centrality constitutes a kind of rhetorical incoherence (Bonilla-Silva, 2006) and interactional trouble in their conversations about everyday life around them. I contend that this highlights the lack of discursive resources available to members of the dominant group to understand and discuss 'mainstream' identity. The causes of ethnic group disparities in health and social life that don't encompass victim-blaming narratives are also lost on participants and they appear troubled by this. I argue that this structured silence marks an important site of possible intervention for those interested in addressing racism and presents a valuable opportunity to create and develop more embracing patterns of language that encompass structural forces which impact on life outcomes over time and through subsequent generations.

The focus of my thesis has been to examine the enormous potential that addressing societal privilege on the basis of ethnic group membership offers to interventions aimed at improving social wellbeing for all. This is developed by applying a Kaupapa Māori gaze to the issue of societal privilege in Aotearoa. In Chapter 4, *Beyond the Veil: Kaupapa Māori gaze on white privilege* I discuss some of the complexities involved in researching content that is unlikely to incorporate some of the more common aspects of Kaupapa Māori research practice. That the primary subject of the research which can be viewed as only indirectly related to Māori people and communities is somewhat of a divergence from more common subjects of Kaupapa Māori research. This paper argues that Kaupapa Māori research marks an epistemological culture shift in understanding the social world. It seeks the expansion of the subjects by which Kaupapa Māori methodology may be applied to include those less travelled pathways that while utilising a Kaupapa Māori gaze, may relate most directly to non-Māori. I use the theorising of a leading Māori scholar in the visual arts field to illuminate Pākehā discourse about mainstream identity as an illustration of the Kaupapa Māori expansion that's possible.

Chapter 5 entitled *Conceptualising Historical Privilege: the flip side of historical trauma, a brief examination* seeks to examine and describe how a concept of

'historical privilege' may provide a useful analytical tool in understanding the privileging effects colonisation has made to the colonisers and their descendants in a way that mirrors the insights gained from the concept of historical trauma in understanding the current social position of indigenous people. I examine key definitions and core components of historical trauma and seek to mirror those elements for the privileged.

In the Discussion, I grapple with the learnings examined in the previous chapters and seek to interpret the implications they pose for further research in the area of societal privilege and the expansion of Kaupapa Māori methodology. An inevitable question arises when examining non-Māori subjects through a Kaupapa Māori gaze, namely what characteristics must be present to consider this a Māori research project at all. I explore this question in relation to ideas about indigenous authority, transformation and through research as a tool of advocacy.

Link One

My thinking about societal privilege in Aotearoa really began while conducting another research project. This project involved people in their late teens. My job involved spending quite a few hours with these young people as we travelled around. I mostly accompanied young Māori men, which was easy – being Māori myself and having worked most my career up until that point on issues of direct relevance to rangatahi Māori. However on one particular night I accompanied a young Pākehā man who was flatting in an affluent suburb in Auckland. As we worked, we chatted about his family and school experiences, his current work and his hopes for the future. I learned that he had experienced personal tragedy in his life, losing a parent as a young child and then being raised by his surviving parent. This parent held a professional position and had been able to send their son to an elite private high school in Auckland, from which he had graduated the year before. At the time he was working as an apprentice, a role he had gained through family connections. There was nothing pretentious or snobbish about this young man; he never put on airs or talked about others in a mean or unflattering way. He was humble and unassuming. He owned a modest car and dressed no differently from the other young men I had meet on that project. What struck me the most was how he spoke about his 'plans' for the future. I use scare quotes around plans, as essentially he didn't really have a plan for his future. He talked loosely about perhaps finishing his apprenticeship or maybe doing an 'OE' at some stage. He said he didn't really know what to do with his future and that he wasn't really worried about it. There was an overwhelming sense of casual confidence from him that the future would be alright no matter what. There was no sense of him actively planning his life course, but rather that the opportunities in his life were gently unfolding before him in an interesting and timely manner. The abundance of opportunities seemingly available to him, and through which he might direct his life, seemed to imbue a deep sense of comfort; an assurance that his life would progress just fine. I realised in all my work up until that point I had never heard Māori youth ever speak of their future in such a 'she'll be right' way. It was only hearing it in this way that I realised non-Pākehā

people, especially our young, wear a cloak of general disquiet about the future: nothing can be taken for granted and time is precious.

I came away from our conversations understanding two things. First, the world is very different for Pākehā young people; they have an embedded sense of assurance that the world will deliver them a comfortable life. I have come to understand this assurance and comfort with life as a key manifestation of white privilege. Secondly, it made me understand that it was this kind of collective privilege that supported the Pākehā world and delivered outcomes, irrespective of the personal circumstances of the individuals involved. One can experience deep personal tragedy and still be imbued with a sense of abundant opportunity, comfort and belonging, and further, personal misfortune could be called on as a powerful defence to refute the reality of structural privilege.

I decided then that I wanted to know more about privilege and the complexities apparent in its formation and implementation. I understood that as a Māori person (who is often socially ascribed as Pākehā) I had a unique opportunity to not only highlight these insights to Pākehā people, but to translate this world and affirm its effects to Māori. In many ways this thesis marks an important milestone in this journey. I began pursuing funding opportunities to develop research proposals about societal privilege soon after, culminating in the Privilege Project discussed in the Introduction.

The following chapter, *When the marginalised research the privileged: One Māori group's experience*, lays out the learnings and reflections from the Privilege Project. The somewhat unusual positioning of our research, a Kaupapa Māori investigation of white privilege, illuminates the taken for granted norms and patterns apparent in undertaking research in mainstream universities. The challenges we faced in the assessment and funding of the research, as well as which particular ethical considerations were appropriate, are used as examples of this illumination and reveal the academy as an important institution of epistemological inequity. The paper

which largely forms the chapter was submitted to the *International Journal of Critical Indigenous Studies* and published in 2014.

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Chapter 1:

When the marginalised research the privileged: One Māori group's experience

Abstract

Since the introduction of academic research as a tool of imperialism and colonisation, indigenous people have responded to the intent, processes and implementation of its insights about their lives and experiences in a range of ways. While many of these responses have been reactionary, greater epistemological innovation is opening up new ways for indigenous researchers to understand and interpret their social world. Recent efforts have even sought to apply indigenous frameworks to the lives and experiences of their colonisers. This paper outlines one such initiative and attempts to demonstrate how this may provide valuable insights for participants, indigenous researchers and the academy itself.

Keywords: Indigenous people, critical race, whiteness studies, colonisation, academic research, ethics.

Introduction

The western scientific tradition has, up until relatively recently, positioned indigenous peoples as oddities or exotic groups from which to draw information and later, as a group, with problems to fix or change. As problems, they have also been the focus, not only of inquiry, but also of policy and interventions from colonial powers and administrations imposed on them. Conducting research about indigenous people has had the effect of emphasising the exotic and different (and supposedly inferior) nature of the natives, justifying assimilation, theft of lands and resources, and the inherent inferiority of indigenous languages and culture (Adams,

1977; M. Battiste, 2000; H. Moewaka Barnes, 2008; Aileen Moreton-Robinson, 2004; Said, 1978; L. T. Smith, 1999). It reinforces the, apparently, superior knowledge produced and framed by the dominant culture as universal truths, objectively sought and attained. Said (1978) describes the link between the creation of knowledge about the one-dimensional and fundamentally inferior 'other' to the implicit justifications for imperialist ambitions involving the domination and exploitation of indigenous societies.

Aotearoa, New Zealand, has been no exception and has a well-recorded history of the ways in which the creation of knowledge about the 'natives' has been an important tool in the colonial project (Pember Reeves, 1899; Ward, 1839). Some argue that research has, at best, been of no use to Māori and, at worst, actively disempowering (F Cram, 2001; Jackson, 1996; Ramsden, 2002; L. T. Smith, 1999). Smith (1999, 1) notes that the word 'research' is "inextricably linked to European imperialism and colonisation", leaving Māori with a deep suspicion of research and the uses to which it has been put by diverse Pākehā authorities; a similar pattern to indigenous peoples internationally.

Māori have had a range of reactions to research conducted <u>about</u> and in their communities (F Cram, 2001; Rankine & McCreanor, 2004; Stewart, 1997), but the overwhelming response has been distress, dissent and despair at the inaccuracy and inadequacy of processes, findings and outcomes. Moewaka Barnes (2008, 42) points out that feminists and indigenous peoples have offered key critiques of western knowledge, its methods of production and its links to imperialism and marginalisation. Power imbalances between the researcher and the researched, fundamentally alien (and alienating) research practices and the separation of research practitioners from the production of research positioned as 'truth' have been central elements in these critiques. In a schema that seeks to position different types of research involving Māori and Māori responses to them, Moewaka Barnes outlines a continuum of experience from Māori as being solely researched 'on', to exemplars of partnership and mutual respect. Māori responses to the former have included compliance, resistance, rebellion and the internalised denigration of

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indigenous culture (H. Moewaka Barnes, 2008, 141). Rather than seeing this as a rationale for Māori change, she argues for non-Māori development, in order to advance *their* practice when researching in Māori spaces, pointing to a mismatch between measured changes in practice, but few changes at broader conceptual and systemic levels.

The invitation to the research community to shift the focus of research from the marginal to the dominant signals an innovative opportunity that could produce far more accurate, grounded and applicable understandings of trenchant social issues.

In this paper, I firstly discuss the challenges and questions posed in shifting the power balance in health and social research. This is followed by an examination of the issues and implications of shifting the gaze in Māori-led projects, supported by two key examples of how these dynamics can play out in practice through ethics and assessment processes and paradigms.

Practical changes in the conduct of research projects involving Māori have arisen, in large part, from the increase of Māori people in the academy, as students and faculty members. Responding to criticisms around power relations and ethics, research endeavours have sought to position Māori as researchers, initially at least, in the lower echelons of the research process, often at the site of data collection, as interviewers, community liaisons, cultural consultants and translators. These arrangements frequently elicited exchanges between Māori researchers and Māori 'subjects' of research and often encompassed additional research practices, compared to conventional processes of health and social science. Foremost among these were establishing relationship/connectedness, fielding challenges about usefulness or safety of research, the relevance of research questions and what reciprocal obligations, if any, were appropriate with the researched community beyond the current project. While some of these shifts in the conceptualisation and conduct of research involving Māori have been dramatic in a practical sense, the mainstream academic members' perceptions of the inferiority, or even existence of

Māori science, methodology and epistemology, remains largely unchanged (New Zealand Herald, 2003).

The involvement of Māori as researchers in subordinate positions, while fulfilling the needs of mainstream research projects in, for example, facilitating recruitment of Māori participation, has, at times, created compromised spaces for the Māori researchers involved. This has led to more direct challenges *down* the research chain, in terms of greater input into the analyses and interpretation of research findings, and pathways of dissemination. Challenge and change *up* the research chain has been generally slower and more problematic for mainstream research and Māori-led and controlled projects remain relatively scarce. For example, the Health Research Council of New Zealand, the country's largest health research funder, has an annual *indicative* allocation to Māori research of 10%, although actual allocation is closer to 3% (HRC annual reports 2006-2010).

Indigenous controlled research

Māori have responded to their place in the business of research in numerous ways. As outlined above, significant change has been achieved, in an operational sense, in the ways in which research about Māori is conducted. Symbiotic with the emergence of Māori at all levels of academic pursuits, and their gradual elevation into leadership roles in teaching and research, the critical mass of Māori academics and the importance of nurturing connections with customary practices of knowledge creation has acutely challenged the inherent legitimacy of non-Māori control of research involving Māori (F Cram, 2001; H. Moewaka Barnes, 2008; Pihama, Cram, & Walker, 2002; L. T. Smith, 1999). The growth of Māori ontologies, epistemologies and methodologies into western academic settings continue to impact significantly on what counts as knowledge and practice in our society.

Kaupapa Māori methodology (R Bishop & Glynn, 1999; A Eketone, 2008; Pihama, 2001a; G. Smith, 1997; L. T. Smith, 1999) developed from the academic field of education and was initially an important pedagogical tool. Its early and most

prominent theorists asserted that kaupapa Māori research (research using kaupapa Māori methodological tools and practices) related to Māori identity, philosophy, language, culture and autonomy. Pihama (2001a) expanded this frame when she posited that Kaupapa Māori research projects were essentially decolonising, insofar as they were inherently involved with power and the political positioning of Māori people and knowledge. There can be little doubt that the development of Kaupapa Māori methodology has had positive effects on the perception and outcomes of research activities in Māori communities. Through the emergence of multiple bodies of work and communities of practice, there have also been impacts in terms of increasing the Māori research workforce and creating more equitable and respectful relationships with non-Māori colleagues. In this sense, it has been instrumental in moving research practices and relationships towards the empowering end of Moewaka Barnes' schema (H. Moewaka Barnes, 2008).

'Ghettoised' or 'romanticised' research

Research projects that indigenous people are leading and controlling can be categorised either as:

- research to reduce the disparities that indigenous communities experience, relative to wider populations (Ajwani et al., 2003; Bridget Robson & Ricci Harris, 2007); or

- the research will be attempting to transform the indigenous experience and, thereby, uplift indigenous wellbeing, perhaps involving the reclamation of elements of 'traditional' culture (M. Durie, 1994, 2004).

A central notion is that the framing of indigenous research in Aotearoa, New Zealand, is often phrased as 'by Māori for Māori'. Although this makes explicit the importance of reciprocity between indigenous communities and indigenous researchers, I argue that it may reinforce the notion that Māori-led research must, of necessity, centre on Māori participants in order to claim legitimacy within Kaupapa Māori and other Māori-centred domains. One critical effect of this dynamic is to focus the gaze of

Māori researchers away from the non-indigenous sector, effectively hiding key determinants of outcomes for Māori. It has also had the unexpected outcome of pigeonholing indigenous control of research as being only naturally legitimate to those projects largely or exclusively involving indigenous people. One notable exception has been the body of work around social and health disparities, for example "Hauora" (Pomare & De Boer, 1988; Eru Pomare et al., 1995; Bridget Robson & Ricci Harris, 2007), which has been monitoring, among other outcomes, mortality experiences between Māori and non-Māori New Zealanders since 1955 (Eru Pomare et al., 1995). Hauora has reported these data within a Treaty of Waitangi[1] framework that emphasises health as being a protected entitlement in its own right, and affording Māori the same rights and privileges as other Crown subjects. In this instance, a Treaty framework allows the monitoring of Māori health outcomes relative to other New Zealanders, highlighting Crown failures to address determinants of health and meet its obligations to Māori as the indigenous people of New Zealand.

The changing nature of the gaze (from indigenous to dominant, rather than dominant to indigenous) has illuminated assumptions that exist in the academy about who will be doing the research, who will be the researched, who says the research is important or a waste of time, what processes are appropriate, what funding streams and other types of support are available and what difference such studies can make in the long term.

The academy generally seems enthusiastic and supportive of Māori research projects that keep Māori people and issues at the fore. This is the natural and accepted place for indigenous inquiry within the academy. It sits comfortably within the colonial paradigm of indigenous as different and inferior, and frequently charges leaders of Māori communities with the development of internal solutions, disengaged from wider contextual environments, such as the economic, cultural and social

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[1] The Treaty of Waitangi is an agreement signed in 1840 between representatives of the Crown and Māori chiefs that outlines the protection of indigenous rights, resources and governance.

marginalisation, stemming from the fundamental racism of colonial practice. Adding to the comfort of the academy, Māori leadership and control of Māori research, while improving best practice for Māori communities engaged in research, nonetheless may effectively replace the surveillance and monitoring function that non-Māori research, up to that point, had conducted directly. In this sense, indigenous-controlled research is more likely to apply a Māori gaze to understanding and remedying Māori marginalisation, deprivation, difference and disproportionality than to apply the same level of scrutiny to Pākehā normative centrality and privilege.

For all the reasons above, Kaupapa Māori research that seeks to reduce disparities, by turning our gaze away from Māori disadvantage and focusing it on the non-indigenous members of society, is rarely considered as the locus of indigenous research.

Whāriki journey

The Whāriki Research Group began as a collection of Māori individuals, many from unconventional, academic backgrounds, contributing, in particular, to various evaluation projects involving Māori communities. As the number of Māori being recruited increased, it became prudent for these few individuals to form their own collective based on shared values, expertise and experiences as Māori. Whāriki's early direction was to improve engagement and practice for Māori communities involved in projects conducted by the Alcohol and Public Health Research Unit (APHRU) for the University of Auckland. Over time and with symbiotic commitment of both groups to the Treaty of Waitangi, a co-governance structure was developed. This relationship of governance and practice based on the Treaty recognised that it was fundamentally relevant to both Māori and non-Māori. In an environment where Treaty rights and obligations are understood almost exclusively as 'Māori business', rather than a reciprocal relationship with rights and obligations on both sides, a governance structure that ensured a joint approach to meeting duties and obligations was critical to Whāriki's epistemological journey and future.

Any sustained examination of the particular and comparative health and social outcomes for Māori communities inevitably involves greater consideration of a comprehensive range of contributing factors, from common ideas at the site of the individual, familial, cultural to more critical analyses of institutional, structural, historical and political factors. This approach to conceptualising research complemented the ideological push-back of the victim-blaming type of approaches common for explaining ethnic disparities at the time and better reflected Whāriki's vision for Māori research. In this sense, Whāriki was able to develop from a Māori research group firmly focused on a 'by Māori, for Māori, *with* Māori' framework to a research group using Māori paradigms of knowledge and methodology development to examine issues of relevance to the social justice of Māori and non-Māori.

A robust analysis examining the health and wellbeing promoting or demoting elements in social environments, as opposed to individual or cultural circumstances, has remained at the forefront of the group's political positioning and forms the first point of focus for conceptualising and developing research projects. The analysis of racism as a social determinant of health has become increasingly acute in international literature (C. P. Jones, 2000; Camara Phyllis Jones, 2010; Krieger, 1990, 2003; Nazroo & Karlsen, 2001; D Williams & Mohammed, 2009; D. R. Williams, 1999). The positioning of indigenous people within wider movements that correlated racism with adverse outcomes has also steadily increased (C. P. Jones, 1999; Yin Paradies et al., 2008; Paradies & Williams, 2008; Robertson, 2005; B Robson, 2008).

Being practised at examining social environments has also meant that the Whāriki group members were well positioned to apply international learnings about racism (C. P. Jones, 2000; Paradies, 2006a; Paradies & Williams, 2008) to the New Zealand situation. The opportunity to explore racism, not only where it manifests as marginalisation and social exclusion, but its flip side, to conferred advantage, social inclusion, its links with critical race theorising and whiteness studies, also became highly relevant analyses. The particularity of privilege as being a specific outcome for 'settlers', vis-à-vis the indigenous population, was a hitherto under-explored area that we sought to examine (Aileen Moreton-Robinson, 2008).

This examination was informed from earlier articulations by 'Pākehā' research participants across a range of studies that seemed to indicate distinct experiences of society (Huygens, 2008; McCreanor & Nairn, 2002; Nairn & McCreanor, 1991; Wetherell & Potter, 1992). These experiences often seemed at odds with all others in the data sets, both in terms of the discursive treatment, as well as their norms, practices and expectations of society. Findings from such projects broadly point to a set of normative, discursive resources and practices that articulate and manifest through a construct of societal, institutional, interpersonal and psychological pathways and reproduce powerfully pro-Pākehā understandings of all aspects of Māori/Pākehā relations (Angela Moewaka Barnes et al., 2012).

We wanted to explore these experiences and the attainment of such an 'ideal status', and the personal- and population-level experiences that flow from it, by further applying our own world view to the issue. This was critical, firstly, as a means to give effect to the importance of the Treaty of Waitangi as a guiding framework for respectful relationships between Māori and non-Māori, but also as a means for understanding an often overlooked area of health disparity; conferred advantage. Our application for research funding, in this instance, was successful, but responses from diverse actors in the research establishment show more clearly the complicit nature of societal privilege within university-based research.

Challenging the 'gaze'

As Whāriki moved to more explicit consideration of privilege and developed projects that involved, or exclusively focussed on this domain, a number of challenges arose. The issue of where to position research that examines societal privilege, unearned advantage and critical whiteness was an important discussion, which flavoured many questions asked in the development of one research project that centred on conferred advantage (Health Research Council reference 07/076D—mostly referred to, by the research team, as the 'Privilege Project'). Is a study about societal privilege in Aotearoa a general population study or specific to the lives of particular groups?

How might a Māori-led project about non-Māori lives and experiences be accurately assessed and who should fund it?

There were conceptual challenges about which parameters could define what was considered to be Māori research. Is research conducted by a Māori research group, controlled by Māori, yet exploring a topic that, on the surface, seems only indirectly relevant to Māori be considered a Māori project? Is a project employing Māori and non-Māori researchers, yet primarily involving non-Māori as participants, be legitimately claimed as Māori research? These were often critical and contentious discussions. Articulations of the continuum of Māori research (Health Research Council, 1998, p.8; H. Moewaka Barnes, 2008, p.141) suggest that, given the high level of Māori control, the level of conceptual development and analyses, and the important strategic aspiration of understanding health and social disparities on the basis of ethnicity, the project should indeed be considered Māori research. An aligned consideration was 'what challenges might the approach pose to understandings of Kaupapa Māori and could such an approach be called Kaupapa Māori research?' The Privilege Project did not fit many of the commonly accepted descriptors of Kaupapa Māori research, in terms of strong engagement with *te reo* Māori (Māori language) and some customary practices involving Māori people and places, as being a 'decolonising' and deeply political project. However, it enriches Kaupapa Māori, as it allows a Māori-controlled knowledge paradigm to inform facets of the social world that may have greater, albeit less direct and immediate, relevance to Māori interests.

The shifts in the conceptual gaze of 'what research questions and approaches would be appropriate' and 'what practical considerations would be required to explore societal privilege and conferred advantage in New Zealand through an indigenous-controlled paradigm' raised significant challenges to that which might otherwise be understood as being conventional operations for conducting research within a mainstream university.

Assessment/funding

A Māori-controlled project that sought to explore societal privilege, the relationship between white privilege, as understood internationally, with colonisation, as manifested locally, with the goal to better understand health and social disparities between ethnic groups was always going to be a challenge to get funded. The research team deemed it to be a lower risk to send the application to a Māori assessment committee, rather than having it reviewed by members of the dominant group, who may have considered the project irrelevant, unnecessary or even inappropriate, despite holding greater portions of funding for 'general population' studies.

The application seemed to hit at many points of difference from what was conventionally understood to be Māori research, at the time, and the sense of innovation appears to have particularly appealed to the assessors when final feedback for the project was revealed, once funding was approved. The assessors identified research that analysed social and health disparities through examinations of privilege as an emerging field of study with relatively few indigenous contributors and that the emergent areas of 'whiteness studies' had a scarcity of studies pertaining to health. This would seem to be a significant development, given that established criteria for the award of Māori research funding should involve direct improvements in Māori health and social status, and prioritising Māori workforce development, both of which were more circuitous and gradual in the Privilege Project than explicit and immediate. While the best placed assessors of the innovation and potential of the research project were likely to be Māori, the fact that both the process and the substance of what was proposed entailed drawing on Māori funding streams to shed light on societal privilege as being a determinant of health is deeply ironic.

Not only does the project challenge what types of research questions are legitimate for Māori to consider, it also centres the ethnic makeup and practices of the dominant group as being the unit of study. The rarity of this approach tends to

entrench the 'invisibility' of the dominant ethnic group as part of wider society in which disparities are generated, while leaving much of the focus on victim-blaming strategies that construct Māori and minorities as being 'problems' that should be fixed.

Ethics

In addition to the challenges the project posed to conventional ways of understanding, assessing and funding Māori research, the ethics of our research processes were also contested. Of immediate interest was the proposal for establishing a high ethical standard for the research that highlighted the often invisible and embarrassing character of privilege and dominance to Pākehā.

The most immediate challenge came when filling out the application for ethical approval by the university's ethics committee. Conventional ethics processes and ethics forms are developed within a framework that does not anticipate indigenous-controlled research concerning non-indigenous people as primary participants. It became obvious from reading the form and thinking of the express information required that the questions used to elicit information did not seem to apply well to our project at all. Again, the research team had to consider deeper aspects of how ethical processes assume that dominant group members are controlling research agendas and that, irrespective of who controls the research project, dominant group members were not assumed to be the express focus of participation.

How might we, as a Māori research group with underlying research values of community empowerment and accountability to participants, ensure that we are culturally 'safe' for participants, most of whom will be non-Māori? What unintended risks might be important to consider for participants, the research team and the university given this context? Given that this project involved some discussion and analysis of the intersection between societal privilege and Pākehā culture, what information might we provide ethics committees to assure them that this culture will be respected throughout the research process?

Most forms of ethics invite applicants to consider how they will address concerns or requirements for particular groups. These groups usually represent 'others', in terms of power differentials between the researchers and the researched, and relating to a range of variables, including race and ethnicity, nationality and language proficiency, age and gender, and mental and physical capability. Considerations necessary to address potential risks are, unquestionably, useful for research projects involving them. The distinctiveness of these groups from the dominant 'norm' provides little clarity when the dominant norm is the focus of the research. There is no specific, dominant culture, safety section of ethics forms; the assumption being that the 'general' population information requirements serves as a proxy for dominant groups in relevant variables (for example, white, Pākehā, male, middle aged, able-bodied and English speaking), with no accounting required for their particularity.

When thinking about what information to provide to the committee, one might use an ethics request form with questions for 'other' groups and attempt to mirror those for a Pākehā population. Again, the shift of gaze is an important exercise. The ability to converse in English, knowledge of Pākehā customs and social groupings, connections with Pākehā cultural institutions (for example, Lions Clubs, Returned Services' Associations or Rotary Clubs), adequate processes of consultation, and connections to Pākehā cultural advisors and consultants should all be considered. This process of reflection on Pākehā cultural ethics has really highlighted how difficult those safety 'bottom lines' are to capture and how none of these considerations really address the cultural safety assurances that we want to fulfil, as an indigenous research group with the values that we have. Some of these safety concerns were addressed through the involvement of a largely bicultural team and sets of bicultural processes for analysing, writing and disseminating the data. In each instance, both the bicultural research team and its processes are organised as working under Māori authority. A shared culture of ongoing collaboration, inclusion and critique was fostered.

The final challenge that the project posed to conducting research involved the inter-relationship between being 'powerful', academic researchers and the status those positions hold in wider society, compared to the negative, social positioning attributed to being a Māori group; in a sense, researching where we should not. This is exacerbated by the range of reactions and responses from potential participants, from ambivalence and caution to anger and defensiveness of the topic area. For some, there was a level of surprise and possible discomfort with the terminology used in the project, such as 'privilege' or 'advantage', that was encountered in efforts to recruit participants in the initial stages of the project. Our decision to use the formal project title, "*Conferred privilege and structural advantage—the health implications*", on participant information sheets and consent forms was off-putting for some. The implied notion that potential participants were 'privileged' was so at odds with their sense of self, that explanations about the project's aims and the need for a diverse set of participants did little to assuage these fears. This general aversion to the idea that one is privileged is documented in literature (Kimmel, 2010). That the project documents also clearly identified that a research group with a Māori name was controlling the study, which concerned some potential participants and drew unhelpful and racist comments targeted at members of the research team. While this is possibly a risk associated with researching group membership of dominant cultures and inequality more generally, for researchers working under the authority of indigenous control, the issue seemed to invoke specific racial overtones. In this sense, participation in the 'Privilege Project' itself could be seen to be interrupting the invisible nature of societal privilege and its underlying racial, ethnic and cultural nuances.

In the face of such reactions, the research team thought it prudent to adjust the title of the project to 'Health and Culture', which greatly enhanced recruitment and data collection.

Discussion

As a research approach for indigenous self-determination, shifting the conceptual gaze to include a focus on the advantaged can provide numerous benefits to the individuals, groups and institutions involved and provide a much-needed, discursive alternative for the general public about a range of important issues.

Moving from focusing solely on those experiencing a 'burden', by expanding a formal inquiry to include advantage across numerous social variables, centres analyses on structural, institutional and environmental factors that produce differential outcomes, rather than seek to blame or celebrate individual behaviour and personal circumstances. 'Victim-blaming' is further extrapolated by examples of individual success by minority group members, while collective oppression may remain unchanged, thereby enforcing the 'logic' that it is individuals, rather than systems and structures, that produce outcomes. In this sense, the approach of studying the dominant group is aligned intuitively with wider critical movements that place individual and collective experiences in an appropriate social, political and historical context.

At an institutional level, supporting efforts to broaden research enquiries can encourage a more embracing and inclusive academic environment. Opportunities to uncover new truths and develop complementary and conflicting perspectives may enhance innovation and diversity. Shifting the gaze invites the academy to genuinely acknowledge and move on from its role as a tool for imperialist interests and fulfil its role as the 'social conscience' of society.

There is much evidence that the 'standard story' of social life in Aotearoa (Baxter, 2012) draws upon deeply entrenched ideas and discourses that seek to blame the disadvantaged for their situation. These discourses are commonly entwined with historic and current representations of race and ethnic group membership, particularly of Māori, that reinforce national narratives about merit and worth. Shifting the gaze from disadvantage to advantage, and also drawing on national

discourses about the racial and ethnic particularity of the advantaged, can open up a, hitherto under-explored, narrative to the social lexicon of New Zealand society. Our experience conducting research projects with dominant group members as participants and audience members in Aotearoa has illuminated that many dominant groups' members desire more nuanced and inclusive explanations, based on relevant information and evidence, as an alternative to entrenched discourses that place individuals outside of their context.

The research developments described in this paper have the potential to expand the application of kaupapa Māori research. Māori modes of conducting research have seen a steady and sustained increase in formal, academic institutions. Application of these frameworks, however, tend to be towards projects that directly involve Māori people as participants or issues of direct relevance to Māori. Applying a kaupapa Māori worldview to issues and phenomenon not directly related to Māori, or of immediate benefit to the Māori community, is a great challenge to the methodological development of indigenous frameworks in the academy. Research projects that shift the gaze of inquiry go some way to clarifying that challenge and inviting response.

Conclusion

The establishment and conduct of the Privilege Project follows a particular interest in the immediate environs of the academy and the clarity of its racial, ethnic and colonial positioning. However, it also critically engages with how those same structures have made the coupling of indigenous research with an explicit focus on the nature of indigenous 'difference' (in terms of addressing ethnic disparities or 'distinctiveness' relating to language and culture) itself, which sets limitations on the scope of the legitimate research interests of indigenous researchers.

If 'by Māori, for Māori' research is most naturally applied to those research questions of immediate and cultural interest to indigenous people, then we miss important opportunities to develop the epistemological framings, methodologies, tools and

resulting analyses. These are implicit in the epistemological framings, such as Kaupapa Māori, but not often employed to understand, deconstruct and critique wider environmental structures and norms that frame the long term interests that indigenous people have to a more just society that better reflects their values and expertise.

This paper has sought to outline a particular context that has marginalised indigenous research activity, both within the explicit practices of 'by indigenous, for indigenous' research and within the wider academy. The conduct of the Privilege Project has shown, more clearly, the structural and discursive impediments to realising more fully the practical capabilities of indigenous, epistemological frameworks and concepts.

Link Two

In the previous chapter, *When the marginalised research the privileged: One Māori group's experience*, I documented my journey into the Privilege Project and discussed some of the implications that arose from the research.

In the paper which forms Chapter 2, *Theorising the structural dynamics of ethnic privilege in Aotearoa: Unpacking "this breeze at my back"*, I worked with our wider team to develop a structural analogy to make sense of privilege. It brings together many years of research, presentations and experience in order to explain our understandings and how those insights guided our work. Articulating theory in a published paper puts a stake in the ground and is an invitation to a wider audience to join in the debate about correlations between structural privilege and racism. We sought to bring together some of the important analytical tools that illuminate structural racism and privilege in putting forward a new theory and understanding of how privilege works and the dangers its poses for the social order.

I have used the framework outlined in this paper in many presentations to inform and educate audiences on societal privilege. By introducing privilege as an oppositional position to racism, but using the same overall components, allows the audience to better understand the systemic nature of these social constructs, which is important given most people have a visceral reaction to thinking they are privileged or racist.

This paper was published in the *International Journal of Critical Indigenous Studies* in early 2014. This journal appealed, as it promotes critical discussion of issues affecting indigenous peoples and signifies a comfortable repository for indigenous knowledge.

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Chapter 2:

Theorising the structural dynamics of ethnic privilege in Aotearoa: Unpacking "this breeze at my back

Abstract

Colonial praxis has been imposed on the culture, epistemologies and praxis of indigenous Māori in Aotearoa, entrenching the settler cultural project that ensures the continuation of the colonial state, producing damaging disparities. This article theorises ways in which settler privilege works at multiple levels supporting settler interests, aspirations and sensibilities. In institutions, myriad mundane processes operate through commerce, law, media, education, health services, environment, religion and international relations constituting settler culture, values and norms. Among individuals, settler discursive/ideological frameworks are hegemonic, powerfully influencing interactions with Māori to produce outcomes that routinely suit settlers. In the internalised domain, there is a symbiotic sense of belonging, rightness, entitlement and confidence that the established social hierarchies will serve settler interests. This structure of privilege works together with overt and implicit acts of racism to reproduce a collective sense of superiority. It requires progressive de-mobilising together with anti-racism efforts to enable our society to move toward social justice.

Keywords: theory, structural analysis, racism, privilege, social order.

Introduction

> The Māori people … want to have things both ways. They expect all the privileges of racial equality … but when some claim can be made for preferential treatment, they vigorously demand to be treated not as New Zealanders but as Māoris …" (*Observer*, 29 April, 1953 cited in Ballara, 1986, p117.)

In the context of the entrenched colonial society of New Zealand, this quote, from a newspaper editorial 60 years ago, is among myriad mundane expressions of the contempt with which the established social order has long judged Māori society and culture. Māori, the indigenous people of Aotearoa, are explicitly double-positioned as privileged through enjoying the same benefits as other citizens of colonial society, but also as having 'preferential treatment'. These notions of privilege reconstruct our history of injustice and colonisation, and fly in the face of most measurable indicators of Māori social standing and wellbeing (B Robson & R Harris, 2007; L. Smith, 2012; R Walker, 2004).

Such manoeuvres reflect the discursive component of what Billig (1995) has referred to as "banal nationalism", the practices and processes by which an illicit and unjust colonialism (L. Smith, 2012; R Walker, 2004) has been imposed and maintained through all the instruments of state upon the indigenous cultures of this land. Anti-Māori sentiment abounds throughout the written and oral public records from early contact to the most recent times (Ballara, 1986; Colvin, 2010) as a virulent contributor to a wider hegemonic discourse about relations between settlers and Māori (A Moewaka Barnes et al., 2012; Nairn, Pega, McCreanor, Rankine, & Moewaka Barnes, 2006; P Reid & F Cram, 2005; L. Smith, 2012; R Walker, 2004; Wetherell & Potter, 1992).

In this paper, we offer a theoretical exploration of the concepts and discourses of privilege that have emerged iteratively from a study of the ways in which such conferred advantage is manifested in the field of population health in Aotearoa/New Zealand. The study has gathered data in multiple forms including policy documents,

media reporting and individual interviews in the broad domain of health and wellbeing. While we do not draw directly upon these materials in our theorising of privilege, engagement with them has informed what we offer here.

Our position, somewhat contrary to entrenched 'common sense' in Aotearoa, is that it is accurate to describe the settler population (hereafter referred to by the Māori term, Pākehā) as privileged in this context. We suggest that a theoretical framework, similar to that applied to the structural analysis of racism, can be elaborated for what it is; a less obvious conceptualisation of privilege—at least for those who benefit. We are guided by the theorising of racism through structural analysis and its articulation as a social determinant of the health of marginalised population groups (CSDH, 2007; Y Paradies, R Harris, & I Anderson, 2008),although we extend the notion of privilege to patterns of systematic benefits, differentially distributed across social groupings. We argue that Pākehā privilege is more than the inverse of Māori marginalisation, but that it functions with racism against indigenous people, as a fundamental social determinant of health here and, with variations, in other developed colonial states. We see a multifaceted, multi-level phenomenon that operates to include, centre and rationalise settler ideologies, practices, agendas and the settler cultural norms at the expense of indigenous cultures, communities and peoples.

We begin by reviewing critical writings about racism and privilege, turn to offer a structural framing of Pākehā privilege and, finally, discuss implications for understandings of social determinants of health, health policy and practice in Aotearoa.

Background

Exploitation and oppression of social groups have become structured into human relations, and reactions of resistance, revolt and upheaval against established injustice have provided some of the defining moments in human history. Ethnicity, gender and class are, perhaps, the most obvious domains in which the effects of privilege on disparities in health and wellbeing are empirically established (CSDH,

2007; R Wilkinson & Pickett, 2010). Social movements have taken up these concerns in an effort to rebut and change the established explanations and associated actions that reproduce inequality in society.

Academics have explicitly joined these debates about forms of injustice. Dorling (2010) summarises the understandings developed within social geography to argue that unequal outcomes, such as poverty, racism and oppression, are the result of deliberate, structured strategies. These are underwritten by discursive arguments in five key domains—elitism, exclusion, prejudice, greed and despair—that work to naturalise and legitimate inequalities.

Within social psychology, Reicher, Spears and Haslam's (2010) critique of Allport's 'perceptual paradigm' of prejudice and the related 'contact hypothesis' approach to improving race relations is congruent with Dorling's position. Rather than being located in the characteristics and behaviours of individuals, Reicher et al argue that prejudice should be understood as a rich representational practice that is mobilised by leaders and institutions such as media. Racism does not arise through personal ignorance or error, but through the motivated social action of those whose interests it serves. Reicher et al conclude that its elimination will not come from education or contact alone, but from struggle; struggle to undercut racist discourses and practices, and to mobilise anti-racist alternatives.

From empirical studies in the economic domain of mechanisms of intergenerational transmission of wealth in the United States of America (US), Bowles and Gintis (2002) argue that cognitive and personality traits are insignificant in accounting for the established patterns that see the offspring of wealthy families enjoy economic success. Rather, they conclude that "wealth, race and schooling are important to the inheritance of economic status, but IQ is not a major contributor" (p. 22)

These generalised approaches to racism as a determinant of life outcomes is elaborated by Krieger (2003), who describes an Eco social model of five pathways of embodiment through which racism produces health disparity: Economic and

deprivation, harmful exposures hazardous conditions and toxic substances, socially inflicted trauma, targeted marketing of harmful products and inadequate or degrading access to healthcare. To these, she has critically added an historical factor: The impacts of colonisation on the health of Indigenous peoples (Krieger, 2011), particularly via the loss and degradation of traditional lands.

The clear inclusion of racism among the social determinants of health by the World Health Organization, Commission on the Social Determinants of Health (CSDH, 2008), together with the theorising considered above, represents a sea-change in thinking about issues of justice and oppression. Such thinking challenges the entrenched notion that the fairness of society is guaranteed by its democratic, meritocratic ideology, and asserts that alternative philosophical and theoretical underpinnings are necessary and desirable (M Battiste, 2000; A. Robinson, 2004; L. Smith, 2012).

The study of racism has noted interlocking and reciprocal relationships among societal, institutional and personal domains (C. Jones, 2000). Paradies et al (2008) outline four dimensions:

- Societal—values, culture and sensibilities of one culture are imposed on another.
- Institutional—practices, policies and processes maintain avoidable inequalities across ethnic groups.
- Interpersonal—interactions between people reproduce inequalities.
- Internalised—attitudes, beliefs or ideologies are held by marginalised groups about their own inferiority.

This composite structures the life experiences of target group members (Ziersch, Gallaher, Baum, & Bentley, 2011) in ways that accumulated over lifetimes and aggregated within marginalised populations, the sum of entrenched disparities.

Societal racism enacts marginalisation and produces stressful events that lead to direct harms of exclusion, psychological distress and physiological stresses affecting

mental health. Institutional racism contributes to lower socio-economic status and poorer living conditions in which poverty, crime and violence are persistent stressors. Interpersonal racism stresses individuals and undermines their sense of self-worth and value to society. Internalised racism evokes negative imagery, denigrates individual self-worth and damages social and psychological efficacy.

Colonisation and privilege

Bolstered by social and scientific theories of racial superiority (D. Goldberg, 1993; Lorimer, 1978), European colonisation of the lands of Indigenous peoples has routinely presumed its right to acquire the intellectual, human and resource capital (Collins, 2010; Denzin, Lincoln, & Smith, 2008; Said, 1978; L. Smith, 2012) of such nations. One outcome has been that Indigenous populations within colonial states have been marginalised in power structures and economic development, with consequent sustained population-level disadvantage and disparities in key life domains (M Battiste, 2000; Denzin et al., 2008; A. Robinson, 2004). Notions of natural justice and other supposedly humanitarian ideologies of colonial societies mean that explanation is called for, accountability is required and transformation is indicated as being fundamental to achieving social equity and the elimination of disparities in health and wellbeing.

Data from Aotearoa show that health disparities between Māori and non-Māori/non Pacific persist when class and gender are controlled (B Robson, 2008; B Robson & R Harris, 2007). Wilkinson and Pickett (2010) have pointed out that New Zealand is one of the most unequal societies in the Organization for Economic Cooperation and Development (OECD) and that health inequalities flow directly from this characteristic. As international comparisons demonstrate, high inequality correlates strongly with poorer outcomes across the social strata (R Wilkinson & Pickett, 2010) and, in the case of Aotearoa, the inequalities were laid down and are maintained by the colonial processes of marginalisation and exclusion of Māori (L. Smith, 2012; R Walker, 2004).

Privilege and public health

Racism, as a key determinant of social outcomes, has helped to focus research and policy attention on sources of preventable damage wrought upon Indigenous and minority populations. However, the theorising and investigation of privilege is neglected and under-researched. As Paradies et al (2008) note, "the phenomenon of oppression is also intrinsically linked to that of privilege. In addition to disadvantaging minority racial groups in society, racism also results in groups (such as Whites) being privileged and accruing social power."

The dominant culture remains largely invisible and whiteness is "relatively uncharted territory" (Moreton-Robinson (2005, 79). Not only does this impact on the way people experience privilege and disadvantage, but the benefits accrue over generations. As Collins (2010) queries:

> Were your fathers, uncles and grandfathers really more capable than mine or can their accomplishments be explained in part by the racism [that] members of my family experienced? Did your mothers stand silently by and watch all this happen? More importantly, how have they passed on the benefits of their whiteness to you? (p. 390)

Kimmell and Ferber (2003) characterise ethnic, gender and class privilege as powering a warm tailwind that propels the advantaged through life. Describing a number of dimensions of these invisible forces they assert that, "our task is to begin to make visible the privilege that accompanies and conceals that invisibility" (p. 6).

Turning our gaze from the marginalisation and exclusion that produces ill-health, privilege may be conceptualised as contributing to good health and wellbeing. For example, it is likely to contribute to the social gradient (M Marmot & Wilkinson, 2001) of a society and to the broad inequalities that are now widely recognised as being crucial social determinants of health (R Wilkinson & Pickett, 2010).

In Aotearoa, disparities between Indigenous Māori and settler Pākehā populations, which have been monitored for several decades (B Robson, Cormack, & Cram, 2007), can be used to demonstrate the effects of intergenerational privilege for the Pākehā population. Disparity discourses can be inverted to describe how Pākehā, as a group, continue to show higher rates of positive outcomes in education, employment, income and health. Pākehā are under-represented in negative data across most domains, including poverty and hardship, housing, contact with the justice system, and self-reported discrimination (B Robson & R Harris, 2007). Pākehā levels of unemployment are a third of those for Māori, and the youth unemployment rate was half that of Māori (Ministry of Social Development, 2007). Pākehā are less likely to be in the lowest quintile of household incomes and twice as likely to be in the highest quintile. Pākehā children are far less likely to live in poverty or in households on 'benefits'. Significantly fewer Pākehā families are living in severe hardship than those of Māori and Pacific Island people. Pākehā are more likely to own their home and less likely to be living in crowded housing or deprived areas (B Robson & R Harris, 2007).

Non-Māori, age-standardised rates are significantly lower than those of Māori for most health indicators, including cardiovascular disease, cancer, respiratory disease, infant mortality, diabetes and suicide. Significant differences exist between non-Māori and Māori in mortality, morbidity and independent living. Life expectancy disparities range from 7.9 years for non-Māori/non-Pacific females and 8.6 years for non-Māori/non-Pacific males compared to their Māori counterparts (Statistics New Zealand, 2008). Non-Māori report that they are less likely to experience racism in many areas, including work or job applications, renting or buying property, and health services (R Harris et al., 2006).

The differences arise primarily from life-course exposure to affirming conditions in the form of higher incomes, educational achievement, good housing, healthy diets, active lifestyles and better access to quality healthcare (Crengle, Lay-Yee, Davis, & Pearson, 2005). These material conditions are, in turn, produced through a complex set of social determinants that produce inclusion by centring Pākehā culture and practices (Nairn et al., 2006). Among social determinants, privilege is becoming

increasingly acknowledged in how we understand population differentials and wider societal inequity (Paradies & Williams, 2008).

Privilege discourse

Established discursive patterns apply commonplace notions of privilege to individuals and groups who are already marginalised. Studies (B Borell, A Gregory, T McCreanor, V Jensen, & H Moewaka Barnes, 2009; Wetherell & Potter, 1992) have deconstructed this phenomenon in which arrangements made to mitigate inequalities are described as privileged, unfair and racist. For example, designated seats in representative bodies, specific resource allocations (such as fishing quota), grievance settlements and budgetary support for growing Māori institutions are all targets for attack (A Moewaka Barnes et al., 2012). Other more superficial arrangements, such as Māori sports teams, educational affirmative action and Māori protocols in public life, are similarly criticised. An illustration of mobilisation (Reicher et al., 2010) of this pattern is drawn from mass media items in Aotearoa:

> A lot of benefits are specifically focused on Māori, such as education grants, loans and the Māori All Blacks. If you had a Pākehā All Black team people would be hitting the roof. (New Zealand Herald, 2004a)

In both public and private discourse, including politicians' speeches, newspaper items, magazine articles, historical texts, research interviews, talkback radio, informal interactions and internet sites, a 'privilege' trope is used to question the legitimacy of such arrangements and to argue for their removal. Rarely heard is the contextual information that the criticised arrangements have arisen either to confer advantage to the settler majority or to mitigate harms caused by the imposition of white ideologies and practices upon Māori via the supposedly culturally neutral, colour-blind workings of society (A Moewaka Barnes et al., 2012). The key effect of this discursive strategy is to create a classic 'elephant on the sofa' scenario in which, despite the obviousness of the phenomenon to the critical observer, the everyday realities of Pākehā advantage are effectively obscured to the unwilling or non-reflexive.

Theorising privilege

Despite the obvious linkage of racism and privilege, there is a growing interest in treating them, for research purposes, as phenomena in their own right. The rise of studies of whiteness (R. Jensen, 2005; A Moreton-Robinson, 2005) and settler culture in Aotearoa (Bell, 2004b; Huygens, 2008; Spoonley, Macpherson, & Pearson, 2004; Tuffin, 2008; Wetherell & Potter, 1992) is evidence of the value of this distinction. A sense of the form and impact of such cultural capital can be derived from the structural analysis of whiteness produced by Peggy McIntosh (1990), who developed some 50 brief statements about everyday experiences to describe her own social position. Discursive studies have focussed on patterning in the talk of Pākehā people as a means of understanding cultural inclusion (Bell, 2004b; Huygens, 2008), belonging and identity (Campbell, 2005) alongside the ways in which such discourses serve to exclude and marginalise. Borell et al (2009) reported that key informant understandings of privilege revolved around the notion that privilege is multi-layered, invisible (to those that benefit) and closely related to class and culture.

We argue that privilege—the systematic accrual of advantage by a social or ethnic group—is amenable to the types of structural analysis that are applied to racism as discussed above. Such an analysis includes the characteristics of the dimensions of power in play at each level (societal, institutional, interpersonal and internalised) as being important influences on population level disparities in health and wellbeing. We will discuss each level and suggest how the structural dimensions of privilege may impact on health.

Societal privilege

The broad social mores of nations flow recursively through common sense to constitute what Bourdieu (1986) might have called the habitus—the myriad naturalised actions, practices, roles and norms that people enact in mundane social life—of the Pākehā cultural project (Huygens, 2008). This latter enterprise is constituted in the patterned social transactions, especially in the dominant discourses, that facilitate and enact Pākehā understandings of the relationships,

power dynamics, meanings and material outcomes in everyday experiences, collective identities and the cultural life of the nation.

Societal privilege entails the imposition of the values, epistemologies and sensibilities of settler culture upon that of Māori in ways that assume superiority and rights of domination in all spheres. Social life, with its prescriptive norms and practices, is produced and consumed through the lens of the Pākehā cultural project, seamlessly remaking history, current social orders and futures in an unwaveringly colonial gaze (Spurr, 1993).

As a scion of Western thought and practice, Pākehā worldviews, ideologies, norms and practices cohere to the notion of the meritocratic, self-determining sovereign and individual. The colonial ideology of majoritarian democracy—what Henry and Tator (2002) have called "democratic racism"—underpins resistance to social change at all levels, maintaining social inequality. In health, this is reflected in the persistence of the disparities outlined above and the seemingly unattainable character of health equity (CSDH, 2007), across almost every domain (B Robson & R Harris, 2007).

Discourse, as articulated in politics, media, everyday debate and conversation, is fundamental to Pākehā culture, which is constantly articulating its achievements, anxieties, challenges and successes. Resurfacing privilege can be achieved through exploring statements of the kind that McIntosh (1990) developed:

- How fair and ethical is the society you live in?

- How well does your democratic system work to produce equitable outcomes for all citizens?

- How is your culture treated in stories of national life?

While most Pākehā are likely to argue positively on such points, many may acknowledge that there are many unresolved issues around Māori. Such self-critique is widely discounted by claims that Māori enjoy multiple initiatives, ensuring inclusion and access to resources, that they are on a positive trajectory in relation to

equity and the country has done comparatively well. These features work synergistically to produce social, cultural, economic and religious environments that reproduce a sense of rights, expectations and diverse functional practices for those enculturated to, and comfortable with, such flows of power and resources.

There is a broad understanding within the Pākehā polity, reflected in dominant discourse, common sense and public opinion, that, while the detail may change through social movements, political evolution and bureaucratic reform, this fundamental structuring is a public good that produces just, healthy and sustainable social orders. Such arrangements are mundanely policed by popular adherence and institutional praxis, and are maintained by their own momentum: Ultimately, they are backed by force to maintain a unitary national sovereignty.

Institutional privilege

Societal, interpersonal and personal discourses, ideologies and practices of the Pākehā cultural project have become sedimented into institutions that were, themselves, imported wholesale from nineteenth century England (King, 2003) and developed locally to meet the evolving needs of colony and state. The myriad mundane actions that are utilised in the conduct of relationships between citizens and state, in domains such as commerce, law, media, education, health services, environment, religion, international issues and so on, are profoundly and inescapably shaped by, and constitutive of, Pākehā culture. Māori values, practices and aspirations are, at best, minor chords in this symphony and most commonly patronised, ignored or obliterated. We suggest some questions that could be expected to promote debates around Pākehā experience:

- How does ethnicity impact on the way your judicial system deals with citizens?
- How impartial are your financial service systems in respect of ethnicity?
- How well does your education system meet the needs of all ethnic groups?

While there are some concessions to Māori praxis within Pākehā institutions, these are begrudging and often tokenistic, failing to reflect a broad Māori cultural project or produce changes to Pākehā society that shift ethnic relations in the direction of social equity. To paraphrase Paradies et al (2008), institutional privilege is constituted in requirements, conditions, practices, policies or processes that maintain and reproduce avoidable and unfair advantages to particular ethnic/cultural groups.

There is a comfortable congruence among Pākehā institutions that ensures their maintenance even when their orientations, objectives and goals may, at operational levels, be seriously conflicted. This coherence helps to maintain the sense of unity, commonwealth and national identity that is integral to the reproduction of social orders. Māori institutions are likely to be perceived by Pākehā as special and different. Negative perceptions may frame them as improper, illegitimate and irrelevant. Both sets of characteristics cast Māori institutions as marginal to everyday 'public' systems. In both routine and extraordinary interactions with the institutions of society, Pākehā experience the reassurance (and absence of anxiety) of familiar praxis and alignment with the objectives, processes and outcomes of institutional operations. Whatever their effectiveness, there is an overwhelming sense that these institutions are the natural way to serve the needs of society.

Interpersonal privilege

At the social level, privilege takes material form in the ways relationships between empowered and marginalised individuals and groups play out. Norms and practices are heavily entrenched and the interlocking nature of coloniser and colonised in a dialectic whole (Said, 1978; L. Smith, 2012) means interactions between Māori and Pākehā take on a certain stable, scripted formats. In the context of Pākehā power and dominance, this overwhelmingly favours outcomes that suit Pākehā. Underpinning such interactions is a certainty that Pākehā knowledge, processes and practices are valid, normal and naturally superior to those of Māori; in the event of conflict, Pākehā institutions will support and ultimately enforce this status quo. For example, Pākehā epistemological traditions, particularly the realm of Western science, are held to be pre-eminent and universal. Thus, recourse to particular types

of scientific accounting is regarded as a 'winning argument' that will brook no debate, except in its own terms. Similar arguments apply in most domains, so interactions in law, political representation, employment, media, arts, sports and so on are all inflected with Pākehā meaning and practice. Such subjectivities may be surfaced by these questions:

- How conscious are you of your ethnicity or culture in social interactions?
- How fairly does your employer treat people of your ethnicity?
- How welcome and 'normal' do you feel in everyday public settings?

As with any social interaction in any sphere, there are complexities, contradictions and counter-examples that leave such analyses fragile and awkward when applied to everyday situations. In aggregate and in the presence of the entrenched patterns of Māori/Pākehā relations, there is, however, a naturalisation of Pākehā practice in this domain. Again building on Paradies et al (2008), we characterise interpersonal privilege as being constituted in interactions between people that maintain and reproduce avoidable and unfair advantages across ethnic/cultural groups.

Societal and institutional privilege underpins the Pākehā cultural capital available to social interaction through protective family, social and community networks of power, and access to resources. Each person's connections are a conduit for the exchange and accrual of this cultural capital in the mundane practices of social life.

Interpersonal and 'within-group' hierarchies of power and influence exist, but advantages to Pākehā persist as measureable outcomes in domains such as wealth, health, education and justice. Individuals may fail, or rebel (and still 'pass'), but, at the population level, these effects aggregate to ensure that social and economic statuses are progressively enhanced for the privileged groups.

Internalised privilege
Pākehā take on board and incorporate into their identities political analysis and cultural perspectives that justify, enable and embody differential resource

distribution and use. This is reflected in a symbiotic sense of belonging, rights, comfort and entitlement and in the confidence that established social hierarchies will serve their interests. Their active understanding of this, however, is likely to be at the level of a 'cultural unconsciousness', a sedimented set of norms, beliefs, discourses and practices that, together with overt, implicit and unconscious racism, mundanely reproduce a sense of superiority over Māori.

- How often do you question your sense of identity and self-worth?
- How much do your achievements depend on ethnicity and culture?
- How freely can you choose your life goals?

Internalised effects generated via the social processes suggested above converge with an inherited sense of self-worth that promotes and builds social and psychological agency and efficacy. An upshot of this is that there is little energy for concern over the life experiences of out-group members, since, if they are competent, they ought to be able to provide for themselves in an idealised egalitarian society.

The Pākehā individual is 'empowered' within a framework that produces both standards of achievement and justifiable outcomes in a self-fulfilling prophecy; the belief that personal, meritocratic advancement is a paramount goal of inherent social value. Internalised privilege entails the acceptance and adoption of discourses, beliefs or ideologies by members of privileged ethnic/racial groups about the value of one's own ethnic/racial group (Y Paradies et al., 2008).

Discussion

We argue that there are potential gains from the naming and defining of privilege as a social determinant of population health and wellbeing, and that it is the turn to focus on privilege, as well as racism, in structural analysis. Challenging the hegemonic gaze, we see relevance in a number of domains of social life in Aotearoa, including policy, equity monitoring, beliefs/values, and identities.

Determinants of social and health inequity

Privilege structures, interwoven with those of racism, maintain inequalities and disparities between Māori and Pākehā. In health domains, colonial mechanisms, through the enactment of Pākehā cultural values, the norms and expectations of providers and clinicians, and the health beliefs and practices of those using such services, inequitably serve the needs and preferences of Pākehā and, thereby, contribute to health inequity (CSDH, 2007; Krieger, 2011).

As Dorling (2010) argued, the links between power and outcomes are relatively easy to understand; the challenges are around adjustments to the expression of power through inequitable structures, policies and the discourses that support them. Reicher's (2010) insight that prejudice is always mobilised might be reworked to say that privilege is not mobilised or 'forgotten', as suggested by Billig (1995). The task for those working for equity could be extended to include actions and discourses that articulate and critique the hidden hegemonies of privilege.

Giving up power and privilege for altruistic reasons is an unlikely aspiration for empowered groups (Ramsden & Spoonley, 1993). However, as Wilkinson and Pickett (2010) pointed out, large social gradients are bad for everyone in a society, including the most privileged. For many Pākehā, collective identity is tightly fused with notions of equity; a 'fair go' for all is a strong value. Addressing Pākehā privilege highlights how precarious notions of fairness are for Māori and challenges the assumption that their benefits are universally accessible. Questioning such values can go some way to preparing Pākehā for a more open dialogue with Māori aspirations for self-determination. We hope that our theoretical framing of privilege in this way will contribute to better understandings of why collective work on reducing social gradients is critical to aspirations for social and health equity.

Structural analysis of Pākehā cultural beliefs/values

Structural analysis of racism has long been an important tool for Treaty of Waitangi education enterprises (Huygens, 2008), but the additional focus on privilege may sharpen Pākehā learning experiences in this domain. Such analyses can help to shift

focus from personal guilt reactions and defensiveness to a realisation that the privileged are also part of a racialised environment that discounts their humanity. Articulating the social positioning of Pākehā allows a more inclusive and nuanced sense of their ethnic identity and collective responsibilities for achieving social equity. We argue that collaborative and negotiated movements towards eliminating injustices brought about by colonial oppression require negotiated commitment by both the coloniser and the colonised (P Freire, 1970; L. Smith, 2012). This perspective is strengthened in the work of Wilkinson and Pickett (2010), which demonstrates that countries such as the US, the United Kingdom and New Zealand, where social inequalities are extreme, have much worse health outcomes for all social classes than do countries including Japan, Sweden and Demark where inequalities are not as extreme.

Pākehā identity work

Through re-centring the analysis of health inequity as being a collective challenge for society, there is an impetus to promote and legitimise a more robust cultural identity for Pākehā people, as distinct from the current 'default to the West'. There is emerging evidence (Huygens, 2008) that Pākehā feel a certain 'hollowness', most obvious in the appropriation of Māori icons to express distinctive identity (A Fleras & P Spoonley, 1999). Addressing Pākehā privilege can highlight the Pākehā cultural project in ways that will enable it to contribute more effectively to the constructive development of Pākehā identities.

Having accurate and specific information that monitors society's performance for all groups is a basic right that has long been argued as being necessary to inform judgements, norms and practices about justice and equity. The invisibility of the dominant culture means that information about the cultural specificities of that group is consistently obscured from view. For example, questions that we developed to illustrate personal proximity to indicators of privilege in this country have been informally shown to demarcate major differences between Māori and Pākehā. They could become a complementary tool to broaden and strengthen research that links racism and health (Crengle et al., 2005; R Harris et al., 2006).

Policy frameworks

Finally, and critically, there are significant implications for policy settings that underpin social order. Te Tiriti o Waitangi, as the foundational document of the nation, encodes equity as being fundamental to the enactment of Māori rights and to good governance. Too often, in Pākehā common sense, Te Tiriti is framed solely as a Māori concern of negligible relevance to Pākehā (A Moewaka Barnes et al., 2012). The theorising of privilege that is suggested here challenges this view by putting the coloniser firmly in the frame of social equity. The articulation of Pākehā privilege with racism helps to foreground this. In the policy arena, such work helps to dispel hegemonic notions, such as the 'level playing-field', and offers constructive pathways toward policy changes through which health and social equity might be achieved.

Conclusion

We have described a series of conceptual elements of privilege that work synergistically with personal and collective identity. Pākehā norms, values, behavioural practices and naturalised expectations about rights, roles and rewards for group members are fundamentally promoting belonging, health and wellbeing. We do not mean to suggest that these should be seen as meaningfully separable in practical everyday terms, but feel that teasing them apart, as we have, can contribute at a conceptual level to a poorly understood, but critically important aspect of the structure of inequality. Nor do we contend that personal Pākehā dissent is futile; it exists (Huygens, 2008; R Walker, 2004) and contributes valuable critique and resistance. However, more generally, the impetus for radical change of the kind that may produce just relations between Indigenous and settler people remains weak and compromised by the continual pay-offs of normalised population-level ascribed privilege.

Link Three

The preceding two chapters, *When the marginalised research the privileged: One Māori group's experience* and *Theorising the structural dynamics of ethnic privilege in Aotearoa: Unpacking "this breeze at my back"*, outline some of the theorising that has been usefully gleaned from conducting research about structural privilege. The next three chapters, *Fumbling in a vacuum: Explanations of mainstream privilege*, *Beyond the Veil: Kaupapa Māori gaze on white privilege*, and *Conceptualising Historical Privilege: The flip side of historical trauma, a brief examination*, test and apply these analyses to open up new and expand understandings of privilege from a Kaupapa Māori gaze. These chapters elucidate the idea of privilege as wāhi ngaro, a hidden or lost space that presents an important opportunity for new knowledge and interpretations, to begin to shed light on this darkened and silenced arena of importance in Māori philosophy. These chapters build on the previous chapters to show, not only how structural privilege works in concert with racism to disadvantage Māori compared to Pākehā, but also how privilege can and does cause harm to Pākehā people as well. While arguing that these harms are somehow equivalent is absurd, there is nonetheless value in examining what Pākehā forfeit for the privileges required by dominance.

I start with *Fumbling in a vacuum: Explanations of mainstream privilege*, an empirical examination of Pākehā participants' talk in the Privilege Project. The disfluencies of Pākehā talk about their own social and cultural practises reveal the wāhi ngaro at the heart of dominant identities. The paper was submitted to the Du Bois Review in April 2017 and is currently under review.

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Chapter 3:

Fumbling in a Vacuum: explanations of mainstream privilege

Abstract

Racism continues to have an undermining effect on the health and social wellbeing of New Zealanders. Whilst much of the attention to date, both nationally and internationally, has tended to focus on the effects of racial discrimination, there is a dearth of comparable scholastic attention on privilege as experienced on the basis of race and ethnic group. The marked nature of marginalised lives contrasts sharply with the general invisibility of societal privilege for the dominant group. This invisibility creates an ideological vacuum that impedes those living in it, irrespective of intent, from articulating or critiquing their own identities as 'mainstream' New Zealanders, resulting in the maintenance of hegemonic discourses of racial inequality. This paper seeks to explore these dynamics using qualitative data collected from a sample of dominant group members.

Keywords: Indigenous people; Colonisation; White privilege; Racism; New Zealand; Discourse; Hegemony; Health

Introduction

Colonisation in New Zealand has been characterised by an aggressive transfer of resources from Māori (the indigenous people) to the Pākehā (descendants of British settlers) population through military force, legislation, planned migration and occupation (Belich, 1986, 1996; Billig, 1995; Ranginui Walker, 1990) and the simultaneous promotion of Pākehā culture and marginalisation of Māori (Augie Fleras & Paul Spoonley, 1999; Angela Moewaka Barnes et al., 2012; L. T. Smith, 1999).

Notions of racial superiority provided an underlying justification for colonisation and have been an enduring feature of Pākehā discourses of Māori since European settlers first arrived in New Zealand (Ballara, 1986; Baxter, 2012; Timothy McCreanor, 1997). Racism continues to be an undermining force in Māori health and wellbeing (Ajwani et al., 2003; Bécares et al., 2013; Cormack et al., 2013; R. Harris et al., 2012a; Ricci Harris et al., 2006; Howden-Chapman, 2004; Pomare, 1980; Eru Pomare et al., 1995; Papaarangi Reid & Fiona Cram, 2005; Bridget Robson & Ricci Harris, 2007). Much of this scholarship contextualises the links between racism and these adverse outcomes as an effect of the historic and ongoing trauma experienced more generally by indigenous people through the processes of colonisation (Walters et al., 2011).

When considering the ongoing effects of colonisation on Māori, one must also give equal attention to those who have benefited most from these arrangements and critically examine how the normalisation of their institutions, values and cultural practices continues to produce advantageous conditions that promote and protect health and wellbeing for non-indigenous people. Pākehā, in particular, continue to benefit greatly from the colonisation which gave many settlers and their descendants privileged access to land and other resources wrested from Māori (Billig, 1995; Dalton, 1967; Parker, 2003). They have also fared better in the contemporary job market (Wilson, Gahlout, Liu, & Mouly, 2005), although that success has been severely challenged by the dominance of neo-liberal ideology and macro-economic policies since the mid-1980s (Jane Kelsey, 1995; Kelsey & New Zealand Law Foundation, 2015). Housing ownership has long shown clear distinctions favouring Pākehā on the basis of ethnicity (Statistics New Zealand, 2014), and higher educational achievement is shared on a proportional basis between Pākehā and members of the Asian ethnic aggregate (Statistics New Zealand, 2015).

Aside from these material benefits, in general the dominant group are also able to assume that their specific interests will be promoted and protected within New Zealand society (Belinda Borell et al., 2009). Yet these structural advantages are rarely referred to when explaining health and wellbeing statistics for Pākehā New Zealanders. If not explicitly explored and unpacked, the factors privileging Pākehā

will continue to be ignored or obscured by broader narratives of meritocracy, individualism, and innocence (Hines, 2016). This 'other side' of the disparity equation, that is the role privilege plays in the everyday running of New Zealand society remains largely invisible, consequently the focus remains on the 'under privileged' and the privileged are allowed to slip from sight. A rebalancing is required to direct research attention to those who benefit from this normalised power and status within society. This is starting to happen, with privilege increasingly being positioned as a topic worthy of study, and as a framework for research (Belinda Borell et al., 2009; R. Gregory, 2002; H. Moewaka Barnes, Borell, & McCreanor, 2014; Paradies, 2006b). However, this shift in perspective is not without its challenges. Some of these difficulties are inherent in researching privilege, irrespective of its source in race, ethnicity, gender, or nationality (Black & Stone, 2005; B. Borell, 2014; Belinda Borell et al., 2009; Consedine & Consedine, 2005; Croteau, Talbot, Lance, & Evans, 2002; Diangelo, 2011, 2012; J. Durie, 1999; Frankenburg, 1993; Hines, 2016). The location of dominant group membership and identity (Pākehā in this instance) within a broader structure that accords members numerous advantages is central to these difficulties because collective identity is largely unmarked and values are assumed to be universal (Belinda Borell et al., 2009; Consedine & Consedine, 2005; S. Young, 2004). Being Pākehā is the normalised, neutral state of racial identity in Aotearoa New Zealand. It throws up barriers to exploration of the subject, among which are responses of defensiveness, evasion, and direct denials of privilege that have been usefully coalesced under the term *white fragility* (Diangelo, 2006, 2011; Hines, 2016).

Moewaka Barnes et.al. (2014) theorise that, similarly to categories of discriminatory racism (C. P. Jones, 2000; Yin Paradies et al., 2008), privilege too is amenable to a structural analysis which identifies institutional, personally mediated, and internalised elements of privilege. At an institutional level, the purposes, processes, practices, ideologies and discourses of New Zealand institutions, imported, primarily from England, have facilitated colonisation and served the needs of British settlers, especially the elite (Belich, 2001, 2009; Consedine & Consedine, 2005; M. Durie,

2004; Augie Fleras & Paul Spoonley, 1999). Current New Zealand institutions profoundly reflect Pākehā culture in commerce, law, media, education, health, justice/corrections and religion. New Zealand's common law jurisdiction is grounded in the importation of English common law considered to be general applicable to New Zealand, as formalised in the English Laws Act 1858 (D. V. Williams, 2010), which displaced Māori law of the land. Now, Māori institutions and provisions made to protect their status as indigenous people are characterised as 'special' (read 'privilege'), and Māori people are frequently constructed as separate from the "public" (Angela Moewaka Barnes et al., 2012; H. Moewaka Barnes, McCreanor, & Huakau, 2009). Individual Māori, like non-white minority groups, are marked as representatives of their group and its marginal status. The outcome of these structural processes is that these colonising institutions (that privilege Pākehā generally) are routinely understood to be normal, valid, modern, and naturally superior to those of others and. As McIntosh (1990) identifies in her explanation of the naturalised central position of whites, this creates diverse privileges for group members across numerous personal situations.

These examples of institutional and interpersonal privilege hint at the high levels of cultural capital enjoyed by members of the dominant group as a result of the naturalisation of Pākehā superiority and which underpins so much of Pākehā success. Just as internalised racism entails some acceptance of negative racial stereotypes as accurate by those most affected, internalised privilege involves acceptance of positive stereotypes of white superiority (whether these are couched as ideologies or as discourses of merit, work ethic, upward mobility, lawfulness, self-worth) as being accurate, aspirational and applicable to all (Belinda Borell et al., 2009; H. Moewaka Barnes et al., 2014).

Hegemony and Discourse

Cultural hegemony is a term widely used in the academic literature to describe how patterns of dominance and subordination are maintained and naturalised, not through military force but as norms, values, and beliefs transmitted through social

institutions like education, media, politics, family, law, and religion (Hoare & Nowell Smith, 1971). The literature includes debate about the complex interplay between what might be understood by 'intellectuals' and the 'common sense' representations of the masses (Billig, 1995; J. Potter & Wetherell, 1987). Crucial to the concept of cultural hegemony is its requirement for continued support by, and ongoing evolution of the ideological practices and discursive resources that maintain it. Such changes are exemplified by contemporary reflections of racism as 'new', 'casual', 'everyday' or even 'neoliberal'. Commentators are struggling with changing forms of racial discrimination and seek to capture how racism operates as (relatively) hidden, obscure or unconscious, and how it differs from previous forms that maintained it in overt and explicit forms of segregated practice and discourse (Boyd, 1970; Inwood, 2015; New Zealand Herald., 2015). Indeed the public censure for and removal of racist terms from historic place names now acknowledged as derogatory, like the 2016 renaming of "Nigger Stream", "Niggerhead" and "Nigger Hill" in New Zealand's South Island to Pukio Stream, Tawhai Hill and Kanuka Hill respectively (Upston, 2016), illustrates the importance of adaptability in patterns of discourse to maintain 'common' sense and decency.

Discourses about race and ethnicity in Aotearoa New Zealand have tended to be underpinned by entrenched egalitarian and liberal concepts of individual rights, freedom, equality, meritocracy and fairness. Yet, as argued by Wetherell and Potter (1992, p174) in their analysis of informants' talk describing the ability of Māori people to exercise those rights, the egalitarian ideological framing mobilises arguments that do not support social justice but instead oppose strategies Māori utilise for their attainment and practice. This creates a discursive separation of historic and structural discrimination from perceived interpersonal benefits of programmes like affirmative action. Consequently, assured representation in public governance, such as state-funded strategies to secure the future of the Māori language, is labelled 'special treatment'. This convenient marriage of liberal egalitarian discourses with deeply rooted anti-Māori sentiment has not only been a consistent pattern in much of New Zealand's history (Timothy McCreanor, 1997; Angela Moewaka Barnes et al., 2012), but also forms a master narrative or "standard story" of race relations in this

country (Baxter, 2012). Unsurprisingly these egalitarian and liberal ideologies underpin Pākehā participants' construction of information about their own and 'other' ethnic groups. The very centrality of Pākehā ethnicity to the everyday workings of New Zealand society is reflected in the silences, pauses, and troubled accounting that marked Pākehā participants' talk about their ethnic culture in our data, and which we have termed "verbal fumbling". Our examination of such talk draws on the concept of 'interpretive repertoires' – "…broadly discernible clusters of terms, descriptions…and figures of speech often clustered around metaphors or vivid images and often using distinct grammatical constructions and styles" (J. Potter, Wetherell, Gill, & Edwards, 1990, p.212).

Silence, Pauses and Rhetorical Incoherence

Silence has been used as an epistemic tool to maintain a cultural hegemony that naturalises and justifies structural inequities and racism (Applebaum, 2016; Mills, 1997; Sheriff, 2000; Sue, 2014; Sullivan, 2006). White silence, whether intentional or not, is both an outcome of and contribution to an "epistemology of ignorance" (Mills, 1997; Sullivan & Tuana, 2007). With specific regard to the processes of colonisation and its effect on relations between indigenous and non-indigenous, white silence can mark acts of structured and ongoing collective 'forgetting' (Gahman, 2016; Haebich, 2011; McCulloch, 2014; Stanner, 1969). This limits the interpretive repertoires available to speakers, from which to construct alternative patterns of language and more informed and embracing perspectives of race relations in Aotearoa New Zealand. Structured silence and collective forgetting can then manifest at an interpersonal level as white racial ignorance (Mills, 1997) of particular phenomena. We argue in this paper that this kind of interpersonal enactment of ignorance applies as much to participants' difficulties in articulating their own cultural specificity, as it does to racism and inequality more generally – an outcome that Gramsci (Hoare & Nowell Smith, 1971) claims marks the success of cultural hegemony.

Social psychologists have contributed an extensive literature concerning the importance and power of language in the ongoing creation, reflection and recreation of the social world. Of particular interest in this paper are the patterns of pauses,

fillers, and distorted speech evident in white participants' discussions of ethnic inequality in health, and not dissimilar to what Bonilla-Silva (2006) described as "rhetorical incoherence". This kind of disfluency in talk is especially acute when the topic is deemed sensitive or controversial. To begin to discuss 'mainstream' identity and invite explanations of health disparities amongst different ethnic groups in a societal context that promotes colour-blindness and a structured form of historical amnesia is to tap directly into this sensitivity; this paper discusses the subtle forms of rhetorical incoherence that resulted.

The Research

The Privilege research project (2007 – 2011) aimed to explore discourses of cultural, racial and ethnic privilege in relation to health systems in Aotearoa New Zealand. Data sets included policy documents, key informant interviews, in-depth interviews with Pākehā participants and media case studies. This paper reports on perspectives of the Pākehā participants from 15 interviews involving 20 participants (three heterosexual couples, three generations of women from one family, and 11 individual interviews with 8 women, and 3 men). Participants were mostly aged between 30 and 50 years, with one retiree aged approximately 70. Most participants were employed and lived in homes they owned. Some had a tertiary-level education and identified as working in professional occupations or were self-employed. Although most participants identified their adult lives as reflecting middle class realities (as indicated by home ownership, residential neighbourhood and secure employment), many claimed an earlier life and childhood of less affluence and working class struggle. Ethnic identity was initially canvassed through researcher networks and recruitment initiatives and then confirmed in pre-interview briefings and when discussing ethics and other research procedures. Participants used several of the extant dominant identity labels in self-identifying their ethnicity. These included 'Pākehā', 'New Zealander', 'Kiwi', 'European', 'Ngati Pākehā' (Pākehā tribe, 'Ngati' being the Māori language prefix for a tribal group), and one participant identified as "Honky" (exonym for white people, generally thought of as derogatory or offensive). Four of the 20 participants claimed to have a degree of Māori ancestry but none self-identified further as a Māori person. There were important differences

in socio-economic, occupational and educational markers of privilege within and amongst Pākehā participants which elicited interesting variations, including the self-identifying labels described above. However in this paper we are interested in the effect of cultural hegemony on the discursive resources that these participants, as members of the dominant ethnic group, can access to examine identity and inequality in ways that transcend such variations.

Participants were recruited through researcher networks using a snowball method. A semi-structured interview format was used to ask participants about a range of aspects of their lives, including education, employment, housing, communities, networks, and health and wellbeing, and their explanations for health disparities. Interviews generally lasted 1–2 hours and were transcribed verbatim. These were then analysed using a thematic analysis (Braun & Clarke, 2006) in which commonalities were tentatively derived by induction and steadily firmed up through repeated readings and checking against transcripts; NVivo qualitative software assisted in this task. The transcription conventions followed those used by Wetherell and Potter (1992) to reflect the content of the discourse and the broad patterns of account giving present in the data. We were not so interested in the intricate conversational coherence of the extracts beyond the following: pauses are marked by a dot within parentheses (.), speech fillers and incomplete words are included in italics (e.g., *um, ah*), and we have also included questions marks, commas and full stops to convey our sense of how the talk was heard during the interview.

Research findings

Participants were asked about a range of issues relevant to wellbeing in the broadest sense. Topics ranged from childhood, family and work experiences, values and group belonging, ideas about who might be described as 'mainstream' and how are they distinguished, and the explanations participants drew on to explain health and social disparities amongst New Zealanders. Of particular interest to this paper are the ideas and important discursive mechanisms employed to articulate "mainstream" New Zealand.

> Joe: I think (.) gosh (.) would say it's probably like husband and wife and 2.5
>   kids or something of middle class. You know, not on the breadline or in
>   poverty but not flashy or got a lot spare you know, they just go about
>   their thing and just got what they need to survive and a little bit more
>   maybe. That's what I'd call middle class New Zealand.

Joe begins quite hesitantly which immediately points to his uncertainty about what he is offering, and he then works to construct a more coherent response. This uncertainty is evident in the wording "I think", followed by a pause and then "gosh", and terms such as "probably like", "or something". The iterations of "you know" are also discursively useful in that their basic meaning is centred on the interaction between the speaker and the addressee and "signals the speaker's estimation of how her information may relate to the addressee's cognitive environment" (Jucker & Smith, 1998, p172). Yet "you know" has a range of other possible meanings that don't necessarily imply uncertainty, from aiding in language comprehension and in turn management, encouraging interpersonal rapport or implying informality, and even monitoring or 'repairing' talk (Fox Tree & Schrock, 2002). Here, Joe seems satisfied with his accounting, providing a final sentence that is his only direct statement "That's what I'd call…".

Thematically, as the speaker grapples with his response, his focus is on a characterisation of the middleclass family unit as commonly understood in most Western democracies – married, heterosexual couples with an average number of children. Joe then describes what is excluded from 'mainstream'. The phrases "not on the breadline or in poverty" and "not flashy or having a lot to spare" are used to mark marginal positions that sit outside the middle/mainstream. The speaker's use of "just" naturalises this as the normal state and mainstream as they "just go about their thing".

> Joe: I can't really speak for other people but I would think all anyone wants
>   is a roof over their head and a meal and a few little creature comforts
>   that we've all grown to like, you know just a few little fun vouchers to
>   make life a little more enjoyable. You know, it's not a struggle every day
>   which most people (.) it is a struggle but you know you define a struggle.
>   We still say we struggle but we're better off than a lot so (.) Yeah I think

just you know as long as people are relatively comfortable and they can
afford to do, their kids can do their school education programmes and
not be left out you know because they can't afford it and stuff like that.

This excerpt, which closely followed the first excerpt from Joe's transcript explored above, also begins with a hedging comment. Again Joe equivocates ("I can't speak for other people…"), highlighting his subjectivity about what constitutes 'mainstream', before going on to outline explicit markers of social inclusion. Of particular interest in this regard are the inclusion cues illustrated through the use of personal pronouns. The phrase "all anyone wants" universalises not only the importance of basic necessities, but also non-essential luxury items that "we've all grown to like". The use of pronouns in this way serves to naturalise the speaker's construction of food, shelter and creature comforts as universal aspirations while working, somewhat paradoxically, to naturalise elements of something he had previously implied was subjective. The passage is littered with "you know". For instance in line 3, "you know" is used to suggest an informal tone and keep a quick pace. Then in line 4 "you know" is used to stall for time as Joe works through what he wants to say and selects the relevant words to characterise hardship and universalise "struggle". His use of the phrase "We still say we struggle" reinforces the ideological attractiveness of struggle as the antithesis of privilege, even when changes in material circumstances over time appear to challenge these notions. His statement "you define a struggle" prepares the addressee for this apparent contradiction by implying that struggle is relative, and again "you know" is used to forewarn of this adjustment. The entwined narrative of having enough to survive and a "little more", to enable social inclusion, was an unexpectedly common thematic feature in the interview data. This appears to acknowledge that some forms of social inclusion – here being able to participate in school activities – are not available to all and require resources in excess of those needed for pure survival.

Int: …Or average, average New Zealander or is that exactly the same?

Sally: Yeah that's the same for me (.) average (.) Then I would have to look at
         the extremes I can't even (voice becomes inaudible) (.) I would really
         have to think about that one for a long time (.) To me average still comes

back to house, family, car, holidays, working (.) you know a regular job I
guess to me average is having a 9 to 5 job, 5 days a week, weekends off.

After Sally had asked for clarification on what 'average' meant in reference to New Zealanders, she describes an 'average' New Zealander. She stumbling as she works through the interactional difficultly is signalled by her 'thinking out loud' as her voice trails off and her claiming of space in which to "think about that one for a long time". She then takes some seconds to construct a response. The words "I guess" mark this uncertainty and here "you know" is used to stall for time as she searches for words to clarify what "working" means. She then draws on similar markers of social life that speak of ordinariness and regularity in quite specific terms; material items, family, employment, and leisure.

When asked directly about what characterised good health and wellbeing participants spoke of the importance of a balance between work and family life and described the following as primary determinants of wellbeing: absence of stress, personal characteristics, support networks, agency and choice, self-esteem, self-determination, independence, social desirability and being well-resourced.

Jasmine: Wellbeing is (.) *um* (.) gosh I guess a lot of things go into that (.) having
                 well I don't know I guess the first thing that I think of is being able to be
                 self-supporting, *um* (.) being able to take care of myself and my child in
                 a way that means that we have good health, that we have enough to eat,
                 we are warm when the weather is cold and *um* can live sort of I guess
                 anonymously and seamlessly and go through life without being too
                 conspicuous for not having good coping if you know what I mean? Yeah
                 I guess, being well resourced emotionally and financially and spiritually,
                 like being enough, having enough, enough, not yeah I would say that
                 would be my definition of it yeah.

Although participants had much less trouble answering questions about health and wellbeing than questions about descriptors of mainstream New Zealand, there was still verbal fumbling and uncertainty in their talk. The passage is leavened with pauses marked by "um", supplemented with time fillers like "gosh" and markers of discursive uncertainty such as "I guess" and "I don't know". This task is approached

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as an interactional challenge. Jasmine explains to the interviewer that the issue is complex, saying "…a lot of things go into that", but also seems to be speaking to herself in an effort to interpret what resources might be necessary to build an answer. The fillers buy time and the speaker is gradually able to martial the unfamiliar ideas into a coherent account that is nevertheless rounded off with the interactive 'if you know what I mean?' in an attempt to both clarify her claims, and to check whether her view is understood and shared by the interviewer.

The value of independence, of being "self-supporting" of family/children was seen by Jasmine as primary to wellbeing, and this included but was not limited to immediate physical necessities such as food and warmth. Jasmine's description of living "anonymously and seamlessly" is particularly interesting as it was heard not only as a nod to whiteness but, coupled with her emphasis on avoiding scrutiny for "not coping", alludes to management of stressors arising from societal judgements about poor parenting which she, as a solo parent, may be particularly attuned to.

Jasmine: I have got a sister whose daughter became diabetic at the age of seven and a son who's ADHD and they are high users of health services because of those impacts in their life and yeah I imagine that the stresses and the burdens that have been placed on my sister and her husband through their two children are much greater than I have experienced in my life or any, yet they look like ordinary average New Zealanders but to have to live with two high needs children isn't particularly normal average, but they look normal and average so I guess …it's an advantage for them that they do look normal and average because if they didn't and they had high needs children *um* I think it would be a very difficult journey for them. For both the children and the parents.

Int: Because?

Jasmine: Because when you are mainstream or normal or average or ordinary or any of those terms you can be invisible you know? You don't stand out, to stand out you have to have lots of differences… but if you are not normal, ordinary, average you stand out anyway and then you only have to have one thing that's slightly different and it's exaggerated … I have got a friend… from Africa … she looks like me, so, she doesn't sound like me she has an Afrikaans accent but I had forgotten that she didn't grow up here, … because she can fit in until she speaks and then you know she is not from New

Zealand and she is not an ordinary average New Zealander but for the rest of the time as long as she doesn't open her mouth she can move through the streets and anywhere she likes yeah looking like she is, so

Int: So that's about skin colour?

Jasmine: Yeah

Having previously been asked about what might constitute 'mainstream' New Zealand, when asked to explain impacts one's ethnic group membership and culture may have on wellbeing, Jasmine, unique among these participants, characterises mainstream as a normalised and seamless state that renders one "invisible" and "not standing out" largely on the basis of race marked by skin colour. Her talk suggests that some but not all sectors of the New Zealand populace are awarded the privilege of being 'mainstream' and that she belongs to the population group best served by this arrangement; implying that difference means not fitting in. Of particular interest are her comments about the racial nature of being mainstream in New Zealand. We see this first in reference to her sibling's family who stand out as high health service consumers although they "look normal", and again in reference to her South African friend who "looks like me" and so is able to "fit in" in a racial sense; however, when she speaks her Afrikaans accent marks her ethnic and national heritage as originating outside of New Zealand. She presents a scenario by which, as long as her friend stays silent, she is able to move anywhere she likes as an unmarked average New Zealander, with the associated privileges that may accrue.

Many participants held contradictory positions on the health system – seeing it in a predominantly positive light as accessible and themselves as lucky to live in a country with a good health system, while simultaneously acknowledging limitations in access and equitable treatment for all New Zealand citizens.

Int: In terms of differences in health in different groups in New Zealand and stuff how do you explain that? Like differences between Māori and Pākehā and Pacific Island and Māori or-?

Leeann: Well smoking is a pretty big factor I think

Mark: Fizzy drinks and bad food and-

Leeann: and diet

Mark:	How do I explain it? I think it's *umm* well you have got different problems in different areas so it-
Leeann:	Where there is less money there is more junk food I think and less quality food parents both working so they are more likely to have takeaways rather than got mum at home cooking all day kind of thing
Mark:	I mainly blame the social structures and family habits
Leeann:	Education I think
Mark:	Of *umm* parts of society that have habitually poor health you know like if your family is more inclined to spend money on if the parents are more inclined to spend the money on cigarettes and drinking too much than spend money on good quality food then *umm* the kids get into the habit of only having bad quality food so they can never change that and then they emulate their parents later on so how are they ever going to get healthy I mean talking about general health issues, like diabetes and *umm* obesity and that kind of thing (.) it's hard to say it's also an education thing and attitudes

When Leann and Mark are asked to comment on explanations for health disparities between ethnic groups, their exchange highlights a kind of discursive vacuum of resources where they, despite their intent and obvious discomfit, struggle to produce an explanation that doesn't draw on victim-blaming constructions. The couple begin by articulating particular individual behaviours around smoking and dietary choices that are common tropes in popular discourse and media portrayals of ethnic differences across a wide range of health indicators. These persist even when more structural analyses are offered (Hodgetts, Bolam, & Stephens, 2005; Hodgetts, Masters, & Robertson, 2004; Nairn et al., 2011), and when the media producers themselves appear deeply dis-satisfied with the prevailing journalistic constructions of race relations (Matheson, 2007). A subtle form of rhetorical incoherence emerges, perhaps arising from concerns about sounding racist, as they seek a more nuanced explanation that avoids language that is overtly victim-blaming. After the initial exchanges around smoking, fizzy drink and bad food, Mark signals the trouble he is having by asking, "How do I explain it?", followed immediately by further verbal fumbling and an appeal to complexity. He then goes on to co-construct an explanation with Leeann, as they seek to elaborate and clarify their earlier comments

about dietary choices, with Leeann providing a form of structural analysis (gendered division of labour) by relating these choices to poverty and the necessity of employment. In their understanding, differences in health outcomes are primarily about personal decisions, which is why they see education (i.e., personal change) as the key strategy for redress and change. Although Mark states that "social structures and family habits" are responsible and elaborates on this, the use of words such as "habit" and "attitudes" seems to point more towards individual and family practices, rather than constraints created by or inherent in social structures.

Discussion

A lack of interpretive repertoires available to construct seamless and satisfying explanations of their own cultural specificity, and of ethnic inequality in general, seems to affect these dominant group members. This structured absence of readily accessible explanations disturbs the coherence of participants' talk, often resulting in lengthy pauses, uncertainty, repetition, and verbal fumbling in their accounts. We also found that accounts frequently revealed unfamiliarity with being asked to describe 'mainstream' or dominant cultural identity and experience. There were clear linguistic markers, with speakers using several means to give themselves time to think of what to say and how to say it. Some stated that it was a really 'hard' question that they had never thought about it, and others began by saying that they did not know. It was clear that many had not encountered or expected such questions, and had not previously considered these issues explicitly.

Participants offered clearer descriptions and representations of marginal groups and non-dominant identities in specifying what 'mainstream' was not. This difficulty in describing the centre is entirely consistent with its naturalised ordinariness. Participants' use of the 'differences' they saw as marking those groups' lack of ordinariness, led to them describing the 'centre' in terms of its juxtaposition to those groups whose exclusion was being signalled. We interpret this resort to such roundabout accounts as the participants struggling with the unconsidered privilege of not having had to think about the nature and distinguishing features of the centre

where they are comfortably at home: what Hage (1998) referred to as "homely belonging". It reinforces the observation that powerful groups are ill-equipped to, or lack practice at, thinking about and articulating their own centrality while clearly understanding the position and difference of 'others'.

Participants interviewed in the privilege project demonstrated an engaging and sincere interplay between their social inclusion and markers of cultural capital that they, by and large, take for granted and regard as generally applicable to all New Zealanders. Their conceptualisations of wellbeing encompassed a range of determinants, some of which were linked to the privileged normalised status of being able to glide seamlessly through life, obtain services without hassles, and not be outside the norm. Participants in general did not explicitly use the term privilege in relation to their invisibilised and normalised status, but did sometimes allude to the assistance granted by being positioned as 'normal' or 'ordinary'. Some were aware of their privilege and spoke of the positive impacts on their lives of being part of the norm and living "anonymously and seamlessly". Others elaborated on the advantage of being average or ordinary when it came to access to, and treatment within the health system. This suggests that even if Pākehā are aware of and acknowledge the system as privileging some and marginalising others to the detriment of their health, this does not necessarily result in moves to challenge this injustice.

The discourses utilised by Pākehā to explain health disparities and positive Pākehā health and wellbeing in comparison to Māori and non-Pākehā were predominantly those of individual lifestyle choice, although genetic and cultural explanations were also offered. Participants presented themselves as active and responsible in their lifestyle choices while positioning 'others' as making bad choices, thereby disguising and naturalising Pākehā advantage and blaming non-Pākehā cultures and practices for their poor health outcomes.

Using a privilege framework (H. Moewaka Barnes et al., 2014), these data provide numerous examples of institutional privilege in the sense that participants on the whole had little cognisance that there is anything 'cultural' about New Zealand

institutions; although some did imply this through observations about how various people may or may not 'fit in'. Interpersonal privilege is expressed in the myriad examples of cultural capital infused in the talk. Notions of comfort, security, and choices available to participants across all aspects of social life reinforce dominant ideologies of merit, hard work, upward mobility, responsibility and self-worth. Participants' lived experiences reflected the statistical evidence that Pākehā New Zealanders mostly enjoy positive health outcomes. Their understandings of how their lives came to be privileged in a society beset with inequalities, are affected by a structured forgetting of the traumatic effects of colonisation on indigenous people, and by the cultural hegemony that fills social spaces and institutions with discourses of individualism, hard work, having the right attitude, and the moral superiority of Pākehā values, beliefs, and practices. Very few participants were cognisant of the privileges directly awarded them through 'being' Pākehā, or linked this to the detrimental impact of racism and effects of colonisation on Māori.

Conclusion

This research looked at some of the positive determinants of health in Pākehā lives that promote their overall wellbeing through a privilege framework. While privilege has been researched and theorised in a range of areas (gender, age, sexual orientation, class and race), we have explored aspects of Pākehā lives in relation to wellbeing in order to highlight protective factors that arise from being Pākehā in a colonial society. We have shown that when the lives behind the statistics are explored, a range of factors that support Pākehā wellbeing come into focus. Discursively these factors are made to appear to be about luck, hard work, and the right mindset, constructing them as part of the level playing field on which everyone is presumed to live, work and either succeed or fail. The groups in New Zealand experiencing positive health and consistent social wellbeing are generally employed, educated, well housed people who live in areas of low social deprivation and constitute a significant proportion of the Pākehā population (Belinda Borell et al., 2009). At the same time, Pākehā have better health outcomes in relation to non-Pākehā that persist even when socio-economic status is controlled for (Ajwani et al.,

2003; Bridget Robson & Ricci Harris, 2007). So there is something protective about being Pākehā in and of itself. Being beneficiaries of colonisation, and being 'white' in a racialised society are rarely presented as crucial contributors to these positive Pākehā health and well-being statistics. As the data presented here show, these taken for granted aspects of Pākehā-ness play out in various, intricate ways in participants' talk about health and wellbeing. But these benefits are not absolute and our findings also show how Pākehā too can be adversely affected by the inherent invisibility their structured advantage affords them. This paper provides a critical inquiry into the naturalisation of Pākehā experience and seeks greater acknowledgement and understanding of structural advantage as an undermining force in the health and social wellbeing of all New Zealanders.

Link Four

The following chapter, *Beyond the veil: Kaupapa Māori gaze on the non-Māori subject*, examines how Kaupapa Māori research approaches can shed light on the ways privilege affects dominant group members.

In some respects writing this paper about Kaupapa Māori epistemology has been far more challenging for me than the examination of privilege literature, data and discourse. Although our research group works within a Māori paradigm all the time, attempting to describe and define some of the border politics of Kaupapa Māori research and the disparate validation of Māori theorists has been difficult. This chapter has required the most thought as I frustratingly grappled with and changed the ideas discussed on several occasions. Grounding some of those ideas and being able to discuss them in reference to the theorising of an established, yet often under-acknowledged Māori scholar was incredibly helpful in this regard and I am grateful and humbled to have had the opportunity. To argue as I have in this paper - that Kaupapa Māori epistemology is fertile soil in which to examine all manner of phenomena in the social as well as the physical world - seems a natural progression from my grapplings with Kaupapa Māori in my Master's research (B. Borell, 2005). In that work, where I examined the cultural diversity of rangatahi in my home area of South Auckland, it was prudent to characterise what I saw as Kaupapa Māori research as both *strategic* and *operational*. Strategic characteristics revolved around what Pihama (2001a) explains as the decolonising features of Kaupapa Māori research, that it necessitates critical engagement with notions of power, privilege and representation, that the research is led and controlled by Māori, and that the research be useful to the researched. These characteristics however seemed to both complement and challenge what I referred to as the operational characteristics, that is, the cultural competences viewed as an implicit requirement if one was to "take for granted the validity and legitimacy of Māori, the importance of Māori language and culture…" (G. Smith, 1997). As my Kaupapa Māori gaze was to examine just how "taken for granted" these aspects of Māori identity were for South Auckland rangatahi, an over-reliance on language and culture, as understood in a customary

sense, ran the risk of marginalising youth who may have felt, or been told directly, that they were lacking in this way.

> *"As Māori researchers who proclaim the value of Kaupapa Māori, we must ensure that decolonising projects at a strategic level, do not become re-colonising projects at an operational level" (B. Borell, 2005, p.40).*

So progressing from an examination of how Kaupapa Māori methodologies could be applied appropriately to the diversity of Māori people, to considering how they might be appropriately applied to non-Māori groups and research topics was not intellectually problematic. Again much of the literature about indigenous knowledge critiques the Western academic gaze on indigenous people and recognises that knowledge is a powerful tool in the ongoing process of colonisation. In addition to these critiques, there has been the general reclaiming of the indigenous voice that marks literature like *Decolonizing Methodologies* (L. T. Smith, 1999). And while I support the reclaiming of indigenous voice, I felt that the research content to which this legitimizing voice was applied was too limited. Given that so much of the Kaupapa Māori literature involves critical analyses of power and context, a Kaupapa Māori project about white privilege marked an exciting and worthwhile approach. In this sense, while I remain focused on the *strategic* goals of kaupapa Māori as reported in Borell (2005), I have moved further from the operational goals that some argue lend themselves to cultural essentialism (Hoskins, 2012).

I discussed and developed these ideas about Kaupapa Māori in many collegial gatherings at seminars, PhD writing retreats and conferences. I presented these ideas as part of the Māori Seminar Series at Massey University's Albany Campus in August, 2015. These opportunities to talk about ideas, answer questions and receive feedback with Māori and non-Māori colleagues were critical to the continued development of the Kaupapa Māori epistemologies in my work.

In April 2014 I attended an 'artist talk' by Kura Te Waru Rewiri as part of the Auckland Art Gallery exhibition, "Five Māori Painters" (Mason & Auckland Art Gallery., 2014). This deepened my appreciation of Te Waru Rewiri's theorising and I invited her to be

involved in the research for this doctorate. I wanted to utilise some of these theories to illuminate the privilege data that had been collected as part of the Privilege Project. So I began to more explicitly incorporate Kaupapa Māori theory within the discipline of visual arts and culture. This culminated in an invitation to participate in a panel discussion at the International Symposium of the Pacific Arts Association (2016). The panel was titled: 'Indigenous Knowledge is Everywhere', and I presented alongside Dr Manulani Alui-Meyer from Hawaii and Professor Hufanga Dr 'Okusitino Mahina from Tonga. The panel discussion was chaired by Pacific scholar and poet, Karlo Mila. I presented some of the basic challenges and correlations made in the following chapter between Kaupapa Māori art practice and white privilege. While a small number of Pākehā attendees struggled with accepting the challenges the panel made to their privilege in such settings, the overall feedback was very positive and encouraging.

The following chapter examines the concept of wāhi ngaro as understood in the literature and through the theory and practice of an established Māori painter. I combine these understandings to offer new analyses and insights into structural privilege in the talk of a Pākehā participant from the Privilege project. At the time of writing, this paper is with the Māori theorist and painter for final feedback and editing.

Chapter 4:

Beyond the veil: Kaupapa Māori gaze on the non-Māori subject

Abstract

Kaupapa Māori methodologies in Aotearoa New Zealand have often been applied to content of immediate and direct relevance to Māori communities. Some of these include research about aspects of cultural revitalisation or examinations of the position Māori occupy within broader ethnic disparities. This paper seeks to expand the application of Kaupapa Māori paradigms to research topics outside "te ao Maori" (the Māori world). We argue that the Kaupapa Māori theorising of a Māori visual arts and culture scholar can shed crucial insights on white privilege in Aotearoa New Zealand with a view to creating more embracing and equitable perspectives of belonging, citizenship and nationhood.

Introduction

"Kaupapa Māori" is a theory and approach that encompasses Māori controlled and collective processes for generating knowledge and applying such knowledge in the delivery of Māori driven services to communities in Aotearoa New Zealand. While the emergence of Kaupapa Māori research within formal academic institutions and specific Kaupapa Māori social and health services within both government and community sectors is relatively recent (Hauora Waikato Group, 2000; Ihimaera, 2006; Ministry of Health, 2014; H. Moewaka Barnes, 2000; Pihama, 2001a; L. T. Smith, 1999; Te Rau Matatini, 2015), these approaches draw on the oldest episteme in Aotearoa. The application of this episteme to contemporary settings is sometimes

phrased as representing a Māori "world view" (Pio, Tipuna, Rasheed, & Parker, 2014; L. Walker, 2015). While there is no doubt that Kaupapa Māori approaches have sought and had reasonable success in addressing Māori outcomes compared to assimilation strategies for example, this Māori 'gaze' has tended to apply only to areas seen as having direct relevance to Māori people.

While the number and range of disciplines using Kaupapa Māori to legitimate Māori perspectives continues to grow, the tendency to fix that gaze on issues of direct relevance to Māori, has remained. Kaupapa Māori research has broadened rapidly from its disciplinary foundations in education (Russell Bishop, 1996; Fiona Cram, 2001; Pihama, 2001a; L. T. Smith, 1995), to become increasingly important in public health (Baxter, 2012; M. Durie, 2000; New Zealand Department of Health, 1984), most social sciences (Cram, McCreanor, Smith, Nairn, & Johnstone, 2006; Le Grice & Braun, 2017; A. Moewaka Barnes, 2011; Angela Moewaka Barnes et al., 2012; Simmonds, 2011; Stewart, 1995; Te Awekotuku, 1991), commerce (E. Henry, 2007; Kawharu, Tapsell, & Woods, 2017), law and justice (Mihaere, 2015; Ani Mikaere, 2007; Annabel Mikaere & Te Wananga-o-Raukawa, 2011). Although the number of Māori academics working across these fields has grown, there has been less connection with those considered to be working in more applied areas; in particular Māori working in fine arts. In this paper I offer a possible further avenue for expansion by applying the Kaupapa Māori theorising of a Māori fine arts scholar to the analysis of discourse from Pākehā participants in a social science research project.

Background

Accounting for inequity

Ethnicity continues to be an important marker of population differences in health and almost every other social indicator (Ajwani et al., 2003; R. Harris et al., 2012b; Ministry of Social Development, 2007; Bridget Robson & Ricci Harris, 2007; Statistics New Zealand, 2007b). Comparisons in the population distribution of health and other social outcomes on the basis of ethnicity have provided detailed analyses of

disparities that epidemiologists, public health practitioners, policy makers, Māori health providers, community organisations and other professionals have used to create and implement interventions. In a context that tends to emphasise addressing individual needs, while not disrupting the structural and institutional norms that create them, it has generally been more acceptable to focus attention on those who experience the worst outcomes as, theoretically, intervention here will generate the best return for the resources invested. As Māori people in general have (dis)proportionally worse outcomes across a wide range of health issues, as well as inequitable access to the social determinants of health such as housing, education, employment and income, improving outcomes for Māori has attracted significant interest (Ministry of Social Development, 2007; C. Salmond, Crampton, & Atkinson, 2007; Statistics New Zealand, 2014, 2015; Te Puni Kokiri, 1998).

Research that seeks to illuminate disparities between Māori and non-Māori in Aotearoa New Zealand, while making a strong case for structural and institutional racism as a key driver of disparity, has tended to keep Māori issues, people and communities as the direct focus in achieving social and economic justice. In more recent times population differences have been explained as due to a mixture of structural, institutional and interpersonal factors (Ajwani et al., 2003; Bridget Robson & Ricci Harris, 2007). However, the material prepared for public consumption by the media and others has tended to ignore analyses with a structural focus in favour of interpersonal explanations that keep issues of lifestyle choice to the fore (Hodgetts et al., 2004). The structural workings of inequity are therefore under-scrutinised and marginal groups and their supposed shortcomings over scrutinised, lending further support to the idea that genetic, lifestyle and interpersonal factors are both the causes and points of intervention.

Some have argued that analyses that lay responsibility for poor outcomes on those experiencing them represent 'victim-blaming' or 'deficit thinking' (Holm, 2003; Lugo-Ocando, 2015; Sered, 2014; Woods, Ritzel, & Drolet, 1996), and that these attitudes tend to correlate with a lack of knowledge (Fox & Cook, 2011). This embedded process has commonly defined marginalised groups in terms of their 'difference'

from what is considered normal, natural or just and disparate outcomes are generally the result of these differences, not the systems and histories they embody (Lugo-Ocando, 2015; B Robson, 2008)

Expanding our accounts

Kaupapa Māori methodology guides Māori development in a range of areas that are of increasing importance in developing knowledge of the nation as a whole; this has seen a parallel rise in the volume and spread of Kaupapa Māori research practitioners. This expansion in Kaupapa Māori expertise has greatly improved the quality of Kaupapa Māori research and strengthened the legitimacy of the approach. Kaupapa Māori has achieved 'critical mass' in the social sciences (Maori Association of Social Science, 2017), with more peer reviewers and referees for funding and publication of Kaupapa Māori scholarship for instance. This paper argues that the expansion in capacity and capability of Kaupapa Māori practitioners has also resulted in an expansion of Kaupapa Māori approaches into areas of inquiry *not* of direct relevance to Māori people.

Kaupapa Māori research that is not focused on disparities with non-Māori has also tended to keep to issues of direct relevance to Māori people, as summed up in the "by Māori, for Māori" descriptor often used by funding agencies such as the Health Research Council (Health Research Council of New Zealand, 2010), and in the delivery of health services (M. Durie, 2013, p289; Hauora Waikato Group, 2000; Ministry of Health, 2014). While conducting Kaupapa Māori research that keeps Māori specific content at the fore may seem an obvious criterion when defining Kaupapa Māori research or research that describes Māori experiences, it leaves little space for developing new approaches, or revealing new knowledge that a Māori world view may illuminate. Some of this may have very little immediate engagement with or apparent relevance to Māori people, but describes their world nonetheless. For example, Kaupapa Māori research about Pākehā privilege, colonisation and social justice represents a particular and likely contentious exemplar of this category and serves as an example of the innovation possible within a broader application of Kaupapa Māori approaches.

An important aspect of privilege studies for the few Māori involved is not only to shift national discourse about ethnicity and ethnic disparities in social life from the marginalised to the normalised, but also to expand the application of Kaupapa Māori theorising to areas of life and subjects of research that it may not have reached previously. This paper seeks to outline my ideas for the expansion of Kaupapa Māori epistemology and its application to the social world. To do this I have chosen to draw on the views of a Kaupapa Māori theorist who is seen as an 'artist' rather than a theorist. However, this is not because her theorising is under-developed or unexplored. On the contrary, her theoretical contribution to Māori visual arts and culture has been profound (N. Borell & Mangere Arts Centre, 2011; Highfield, 1999). She is seen more as an artist, in part, because the academy tends to maintain silos of discipline and generally struggles with the role Māori visual arts and culture play in theory and epistemic development. I will explore how her contributions to the field provide useful insights in understanding and explaining societal privilege in Aotearoa New Zealand; a domain that shapes the world that Māori engage with on a daily basis.

Māori Episteme

Māori epistemic innovation draws on the broad and ongoing scholastic tradition that brought Māori people across the world's largest ocean in orderly migrations (Ranginui Walker, 1990), and ensured that we not only survived but thrived in an extremely different physical environment. This success was marked by steady growth in population, changes in linguistic patterns, complex social structures, technological innovation, environmental adaptation and robust health and wellbeing, developing over hundreds of years (Belich, 1996; A. Salmond, 1991). A Māori episteme remains the oldest ontology on these islands, however its emergence in sites of Western academia is more recent, and is encapsulated in the development of "Kaupapa Māori methodology" (R Bishop & Glynn, 1999; Cram et al., 2006; Pihama, 2001a; Pihama et al., 2002; G. Smith, 1997; L. T. Smith, 1999). While Kaupapa Māori methodology is a continuation of a strong knowledge tradition, its position is a crucial response to inequitable distributions of power, privilege and

social status that Māori have been subjected to by New Zealand society in general, and the academy in particular. Kaupapa Māori was, in this sense, developed as a response to white privilege produced by settler colonialism, and as a way for Māori, as subjects of research and increasingly as research and professional practitioners to claim a safe space to voice our own truths on our own terms.

> "Kaupapa Māori is, therefore, a response to the colonisation of our lands and the imposition of ways of being that are not our own. It is a way of turning our gaze back onto the coloniser when, for so long, their gaze has been on us in an attempt to make us more like them. In this way, Kaupapa Māori is an attempt to retrieve space for Māori voices and perspectives, methodologies and analyses, whereby Māori realities and knowledge are seen as legitimate. This means centering te ao Māori" (Pihama, 1993, cited in Cram, 2006).

The ability of indigenous epistemological frameworks, such as Kaupapa Māori, to enable and legitimise indigenous inquiry in any field epitomises the potential of scholastic innovation envisioned by its early theorists. The areas of research to which these frameworks have been applied tend to be of immediate and direct importance to the wellbeing of Māori people. They include rights to land, language and culture and represent the common pathways of application of Kaupapa Māori epistemology, theory and research design. The more travelled pathways of Kaupapa Māori research have secured important gains for Māori, particularly in the fields of education and health.

As pointed out by Pihama above, Kaupapa Māori is inherently involved with the direction of a Māori 'gaze' and, in this way, there is much support for Kaupapa Māori as a decolonising tool that reorients the gaze and claims space for Māori voices and analyses of the world around us. This framing, while being of benefit in the developmental stages of Kaupapa Māori methodology and fundamental to the funding paradigms within which Māori research is supported, is becoming increasingly nuanced. Kaupapa Māori methodologies have often been defined by the ways they are seen as distinct from mainstream research (H. Moewaka Barnes, 2000, 2006). This has tended to homogenise Māori positions as a single 'authentic'

orientation; the more different it is from 'mainstream' (i.e., the Pākehā world), the more it seems to be legitimised (H. Moewaka Barnes, 2008). Māori diversity (economic, social and cultural) can then be positioned as an authenticity problem that perpetuates Pākehā power, rather than a complex reflection of vibrant, self-determining groups engaged in ongoing journeys of advancement, development and adaptation that reflect the current environment.

While "by Māori, for Māori" makes explicit the involvement of Māori as researchers and users of research findings and any benefits that may ensue, the *subjects* of these activities remain largely indigenous communities who are often framed as a population in 'need'. While this has been critical for indigenous development, it has also given rise to questions about the nature of Kaupapa Māori research if Māori are not the subject of the gaze. In this instance, a research project on Pākehā privilege that applied indigenous paradigms but involved few Māori researchers and almost no Māori participants poses a challenge to the meaning, use and any claim-making one might make of Kaupapa Māori approaches. (B. Borell, 2005; H. Moewaka Barnes et al., 2014). Shifting the gaze in this way – the Māori gaze towards the subject of Pākehā privilege – maintains and enforces decolonising analyses that empower and affirm Māori understandings of the world, while readdressing societal scrutiny and the victim blaming discourses so often associated with it.

Privilege project

The Privilege project (2007–2011) was funded by the Health Research Council of New Zealand to explore how societal privilege is implicated in the uneven experience of social determinants of health and in the delivery and quality of health services (Commission on Social Determinants of Health, 2008). Data sets included health policy documents, media case studies, key informant interviews with policy makers and in-depth interviews with over 20 Pākehā participants. It is the in-depth interview data that this paper is most interested in. I propose that it is precisely the hidden and invisible nature of societal privilege that disrupts and destabilises Pākehā people's talk and understanding of it. They often draw on descriptors of what it is

not, focusing on visible markers of marginalised identities, so providing a discursive backdrop which Māori epistemology can illuminate.

Twenty participants were interviewed: three heterosexual couples, three generations of women from one family, and 11 individual interviews with eight women and three men. Participants were mostly aged between 30 and 50 years, with one retiree aged approximately 70. Most participants were employed and lived in homes they owned. Some had tertiary level education and identified as either working in professional occupations or being self-employed. They were asked about a range of topics including their upbringing and family, work and leisure activities, as well as health behaviours and their views about the causes of health disparities between different ethnic groups in Aotearoa New Zealand. Of particular interest to this paper are a set of responses participants aired when asked about what constituted 'mainstream' New Zealand. Congruent with much of the international literature about privilege, we anticipated that participants might struggle with identifying and naming these characteristics of New Zealand cultural centrality. The 'verbal fumbling' silences, pauses and rhetorical incoherence (Bonilla-Silva, 2006, p.68) that ensued has been described elsewhere (B. Borell, Moewaka Barnes, Gregory, McCreanor, & Nairn, 2017). This paper situates what was said in response to questions about mainstream New Zealand identity alongside the theorising of a Māori fine arts scholar as a way of expanding the possibilities and application of Māori frameworks to non-Māori content.

Kura Te Waru Rewiri – epistemology and painting practice

Kura Te Waru Rewiri is a well-regarded Māori woman and established painter and fine arts scholar. Much of her visual arts career has involved examining themes of deep relevance to Māori communities, including the Treaty of Waitangi, Māori land, whakapapa (ancestral connections), tapu (spirituality, religion and faith), and mana wahine Māori (the inherent power and sacredness of Māori women) (Highfield, 1999; Mason, 2014). Te Waru Rewiri is an astute thinker and educator. As Borell (2011, p.20) describes:

> "Kura Te Waru Rewiri has re-positioned Western-dominated conversations of abstract expression to speak clearly about a Māori experience and worldview…Objects, colour and form become imbued with Māori spiritual and cultural encoding that requires the viewer to decipher elements of a visual language that is specifically centred in an appreciation of Māori knowledge systems."

I argue that her use and descriptions of the concept of 'wāhi ngāro' in relation to her painting practice provides important parallels for understanding qualitative data from Pākehā participants about mainstream identity. I first read and researched the literature and media on Te Waru Rewiri's practice and theories, before seeking an interview with her on the many aspects of Māori epistemology and wāhi ngāro'. I began my analysis of Te Waru Rewiri's practice by sourcing an episode of the television series "Kete Aronui" (NZ On Screen, n.d.), which screened on Māori Television from 2002 – 2011 (The Big Idea Editor, 2009). Each episode presented a half-hour exposé of Māori in the creative disciplines. I also examined all the information about Te Waru Rewiri available in the E H McCormick Research Library in the Auckland Art Gallery. The collected information on Te Waru Rewiri extends back many years and comprises exhibition catalogues, newspaper clippings and reviews, as well as other scholarly material including in-depth essays that examine her work and theory (N. Borell & Mangere Arts Centre, 2011; Highfield, 1999; Mason, 2014). I interviewed Te Waru Rewiri by telephone in June 2016. The interview was recorded and transcribed verbatim. The transcript of this interview, along with my field notes and initial analysis were sent to Te Waru Rewiri for feedback and correction. Where possible we communicated electronically to check my analysis was acceptable, and she made several comments on the early drafts of this paper. In the next section I introduce the concept of wāhi ngāro and Te Waru Rewiri's given explanation of its meaning in her work and theory.

Wāhi ngāro

Like many words and phrases of importance in the Māori language, wāhi ngāro has layers of meaning. Wāhi ngāro combines two words – wāhi (noun), meaning place,

location, or an allocation; and ngāro (verb), to be hidden, out of sight, or absent (Moorfield, 2011). Wāhi ngāro then may mean "lost place", referring to a place that is unseen and unknown. For this reason it may be interpreted as a place of supernatural and spiritual mystique; a "world of gods and spirits, divine intervention, a place out of sight" (Moorfield, 2011). Wāhi ngāro is often mentioned specifically in Māori rituals of encounter, in oratory and in gatherings to mourn the dead, as death marks the realm of ultimate darkness and unknowing.

In the painting practice of Te Waru Rewiri, wāhi ngaro marks an important point in her development as a Kaupapa Māori theorist. Most notably, in her work titled "Ia ra, Ia po (In Te Po there are many beginnings)" (see overleaf) she taps into this intangible and unseen space, and expresses how we may occupy the dimensional space between worlds. When relating conversations she had with her father about wāhi ngāro, she offered:

> I used images like Kaitaia lintel floating, and the whenua was cloaked, you
> know the representation of the korowai was on it or the kākahu was just
> two angled lines into the middle, like this tied in the middle of like your
> chest and then in the middle panel was a waka kōiwi but it was pushed back
> into the back and I pushed it back into the middle panel and you can only
> see it in a certain light, and he saw it and said "You got really important
> work to do because you're working with the wāhi ngāro".

As she developed the idea further she came to understand that:

> "Wāhi ngāro' was something in yourself, that was lost or you know, a place
> in yourself that was or a hole that needed to be filled or that sort of or
> waiting to receive that sort of stuff"

Here, Te Waru Rewiri is not describing wāhi ngaro as a space of nothing, negative space, or a void of emptiness. Instead, she sees it as a space of immense potential – of yet to be realised understandings; an internalised, unfilled dynamic space, an as yet untapped receptacle of future knowledge and endeavour. Wāhi ngāro then represents a gateway to new realms and experiences.

Kura Te Waru Rewiri

Ia ra, Ia po (In Te Po there are many beginnings) 1994

Acrylic and tempera on canvas

2100mm x 910mm (3 panels)

Private Collection, Wellington

Privilege is wāhi ngāro to the privileged

When analysing discourse collected from Pākehā participants interviewed as part of the Privilege Project about who might be included in talk of belonging in the 'mainstream', some struggled to articulate their response. Many took several seconds to construct a reply, using speech fillers such as 'um' and verbally expressing their difficulty with the question. While some participants did offer initial descriptors of what constituted mainstream, most responses discussed mainstream identity as *not* being what marked marginal identities. Participants could clearly and easily articulate the identity and cultural markers of marginal groups as different; from 'normal', making them 'other' and easily visible in everyday society. Markers of the participants' own identity and the cultural markers of the dominant group were, to a large degree, wāhi ngāro in that their centrality to everyday life made it difficult to see them directly and thus they were rarely spoken of explicitly. Mainstream identity was instead implied in a range of ways by its opposition to the explicit position of marginal groups.

"Ah… well I suppose some people say oh it's middle class white New Zealanders but I actually don't think that's the case, I think that um that I think that it is predominately that but I also think that it actually encompasses Māori with a particular world view but it doesn't necessarily encompass Māori with a you know a strong sense of their culture so I actually think that mainstream is not necessarily colour specific but it is about um I think it is kind of fundamentally conservative actually um it's the mainstream are the people that have jobs, have children, you know, don't commit crimes, don't I don't know, don't push the boundaries of you know of political thought um and are just getting on with their it's the kiwis that are just getting on with it I don't know how else to put it really um and they are not sort of rocking the boat too much, they are not um they are not radicalised but equally they are not completely in a, um what would you call it? hibernation either they are, they do have an interest in what is going on but not so much that they would go and rush down the street or you know spray things on the wall or yeah…I would say anarchists they are not mainstream, libertarians and ACT party supporters they are not mainstream um, you know, um I am probably using the political sort of aspect too much you know. Greenies are not necessarily mainstream although that is changing as well and has

changed. Extremists I guess are not mainstream so yeah anyone's pushing the envelope of political thought is not mainstream so people like, you know John Minto [*New Zealand political activist*] he would not be considered mainstream and um I guess um feminists would not be considered mainstream um yeah" – Samantha

In this powerful piece, Samantha summarises her ideas of what constitutes mainstream New Zealand. An analysis of Samantha's discourse reveals her view of mainstream as predominately white and middle class, but not as a straightforward embodiment of whiteness. She attempts to differentiate mainstream as a cultural and structural manifestation of whiteness, in which Māori without a "strong sense of their culture" may also be included. Additional markers of inclusion in this mainstream identity are those who "have jobs", "have children" and are those that are "just getting on with it".

All her other comments about mainstream New Zealand, however, are articulated by an *implied* opposition to the groups and behaviours described. For instance, mainstream New Zealanders are *not* committing crimes, and *not* pushing boundaries or rocking the boat. This works usefully with her inclusive marker of "just getting on with it". Rocking the boat is seen as the opposite of just getting on with it, and she conveys the idea that mainstream people don't complain (Avril Bell, 1996; Bell, 2004a; Wetherell & Potter, 1992). She goes on to list the largely political groupings of those she doesn't see as mainstream. Discursively this is interesting as she marks almost every group whose particular interests can't be taken for granted as being at the heart of New Zealand institutions and society in general. Again by marking all these groups as sitting outside mainstream society, she is implying who can take their inclusion for granted. For example if feminists are not considered mainstream, then by implication defenders of patriarchy are; and if Māori who do not have a strong sense of their culture are mainstream, then Māori with a strong sense of their culture are not. This clearly implies that mainstream is non-Māori in its nature and that Māori who can forgo their identity to fit in are encouraged and rewarded through belonging.

Three offerings for the expansion of the concept of wāhi ngāro emerged from participants' analyses of mainstream privilege. Firstly, mainstream privilege is wāhi ngāro in that it is largely hidden from participants' understandings. Talking about something so central to oneself but hidden from one's view is difficult, and participants drew on characteristics of marginal identities that are visible as a roundabout way of illuminating the wāhi ngāro of mainstream identity. Such blind spots were marked by silences, gaps, as well as disjointed and incoherent speech. Some Pākehā participants seemed uncomfortable with needing to perform these discursive tricks, and others expressed dissatisfaction in their inability to explain mainstream identity.

The data discussed here speak of wāhi ngaro not only as something hidden, but also as something lost. If marginalised groups such as Māori are required to *not* be culturally Māori in order to be included in mainstream, forfeiting part of themselves is implied. Wāhi ngāro then for marginal groups seeking inclusion would mean forfeiting aspects of identity that define one's difference, particularly when seen as disruptive to an assumed norm. Accordingly, feminists must forfeit feminism to be mainstream, libertarians must forfeit libertarianism, activists must forfeit activism and so forth. This forfeiture aspect of wāhi ngāro represents a loss, not only for the aspects of identity that may have meaning at the level of the individual, but also for all New Zealanders because it demands and rewards the invisibility that makes it so difficult for participants to verbalise and understand their place in society. This continues and entrenches the silences and obfuscation in our understandings of society, hampering efforts to recognise diversity and inclusion and intensifying what Sullivan and Tuana (2007) describe as "epistemologies of ignorance".

Finally, the discomfort and dissatisfaction of some Pākehā participants with the limiting nature of their mainstream invisibility on their discursive ability and the way it disrupted their talk, aligns with Te Waru Rewiri's analysis of wāhi ngāro. Rather than seeing these wāhi ngāro as static, absolute and unchanging spaces of unknowing, she explains wāhi ngāro as a space of dramatic potential. Wāhi ngāro represents a series of gaps or holes in knowledge and experience that can be filled –

a space within oneself that is waiting to receive new and different perspectives. I argue that for members of mainstream New Zealand this potential to fill wāhi ngāro would go some way to creating greater satisfaction and clarity about their place, and the place of others, in New Zealand society.

Conclusion

The goal of this paper has not been to identify that societal privilege is invisible to those that benefit most from it; this is a fundamental premise in the study of all societal privilege, especially racialised privilege (Consedine & Consedine, 2005; Ferber, 2003; Frankenburg, 1993; Kendall, 2013; Kimmel, 2010; Aileen Moreton-Robinson et al., 2008; Sullivan, 2006). Rather this paper applies the theorising of an under-exposed Kaupapa Māori theorist to data about Pākehā privilege as a demonstration of the innovative potential of Kaupapa Māori theorising for any content area, even those not often thought of as 'Māori business'.

Nor is this paper arguing that cross-disciplinary analysis between science and the creative arts is an entirely new approach. Government initiatives such as the "Smash Palace Collaborations Fund" (2002 – 2011), co-managed by Creative New Zealand and the Ministry of Research, Science and Technology, provided support for the development of collaborative projects between New Zealand scientists and artists, some of whom were Māori (New Zealand Government, 2005a). Further, Ngā Pae o te Māramatanga, New Zealand's Māori Centre of Research Excellence, is funded by the Tertiary Education Commission and hosted by The University of Auckland (Nga Pae o te Maramatanga, 2017). To realise their vision of Māori leading New Zealand into the future, the Centre provides assistance to Māori researchers across a broad range of disciplines, is working with 21 partner research entities, and also supports Māori research and dissemination including Māori scholarship in visual arts and culture. While these collaborations between science and the creative arts are apparent and important, this paper argues that they are less travelled avenues of Kaupapa Māori collaboration which could be more deeply embedded.

Further expansion of Kaupapa Māori theorising and collaboration poses exciting possibilities. Kaupapa Māori epistemologies can offer new understandings of the invisibility of societal privilege in a way that, by definition, mainstream research may struggle to appreciate. The fulfilment of wāhi ngaro for mainstream New Zealand is one possible contribution. There is enormous potential benefit to all New Zealanders from approaches which could illuminate and help develop deeper and more meaningful markers of Pākehā identity, thereby contributing to who we all are. Creating and imbuing counter-narratives about the 'other', and race relations more generally, would give real effect to the values of inclusion and fairness we claim to value so highly. Arresting and countering epistemologies of ignorance could also facilitate acknowledgement of past and current injustice and encourage ideas that seek to address it. Kaupapa Māori approaches to better understand New Zealand society also have the potential to create more embracing and equitable perspectives of belonging, citizenship and nationhood.

Link Five

The final chapter, *Conceptualising Historical Privilege: The flip side of historical trauma, a brief examination*, began in the final stages of work on this doctorate as I was being reinvigorated by the abundance of relevant literature on structural racism and privilege that has developed since I began in 2010. "Historical Trauma" is an obvious area of growing prominence for indigenous scholars. I was excited to see various frameworks had been developed to explain historical trauma and these have greatly improved the clarity and logical progression of analyses. Although there is an overwhelming corpus of literature lamenting the poor social, political, economic and cultural positioning of indigenous people, being able to follow the pathway from historical oppression to current oppression to current outcomes was incredibly valuable, at the very least for the possibilities revealed for intervention and redress. Given what I had argued about the associations and linkages between disadvantage and privilege, I felt applying similar frameworks to the analysis of privilege might also be useful. Of course all privilege, especially racialised privilege, has historical roots and disciplines such as settler colonial studies are deeply embedded in defining those discourses. Yet, just as there is value in outlining the logic in explicit terms to show harm, so too is there utility in applying this to privilege.

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Chapter 5:

Conceptualising Historical Privilege: The flip side of historical trauma, a brief examination

Abstract:

Historical trauma is an important and growing area of research that provides crucial insights into the antecedents of current day inequities in health and social wellbeing experienced by Indigenous people in colonial settler societies. What is not so easily examined is the flip side of historical trauma experienced by settlers and their descendants – what might be termed "historical privilege". These historic acts of privilege for settlers, particularly those emigrating from Britain, provide the antecedents for the current day realities for their descendants and the structural, institutional and interpersonal levels of advantage that are also a key feature of inequities between Indigenous and settler. This paper theorises an explicit link between historical trauma and historical privilege, and explores how the latter may be examined with particular reference to Aotearoa New Zealand. Three core elements of historical trauma are posited as a useful framework to apply to historical privilege.

Historical trauma is becoming established as an area of relevance to indigenous peoples (Brave Heart & De Bruyn, 1998; Crawford, 2014; Evans-Campbell, 2008; Gone, 2013; Mohatt, Thompson, Thai, & Tebes, 2014; Prussing, 2014), and is also emerging as an area of pertinence in discussions of societal privilege experienced on the basis of ethnic group membership. While the idea was originally posited as a framework to understand the experience of Holocaust survivors, historical trauma is

also being explored in a range of other contexts, including the experiences of indigenous people as a result of colonisation. In these broader applications historical trauma has been defined as "...complex and collective trauma experienced over time and across generations by a group of people who share an identity, affiliation, or circumstance"(Mohatt et al., 2014, p.128). Historical trauma generally consists of three elements: an act(s) of trauma; the sharing of that trauma by a collective rather than an individual; and where the effects of the trauma are experienced across multiple generations (Mohatt et al., 2014). Historical trauma is a valuable concept for indigenous people as it links past injustice to present day contexts. Much of the literature has focused on health impacts of historical trauma, in particular for mental health (Duran, 2006; Evans-Campbell, Walters, Pearson, & Campbell, 2012; Gone, 2013; Walls & Whitbeck, 2012; Walters, Simoni, & Evans-Campbell, 2002).

Just as contemporary theories and frameworks of racism can articulate a structural analysis of privilege (H. Moewaka Barnes et al., 2014), the concept of historical trauma offers a similar opportunity. In this paper we examine historical trauma and posit that an explicit connection can be made using an inverse framework as a way of understanding *historical privilege*. If we accept the internal logic of historical trauma, that historic acts (and contemporary acts of discrimination that serve as reminders of those acts to the affected groups) have an important role in the current health and social wellbeing status of indigenous people, we can follow a similar internal logic in terms of historical privilege. The argument is that contemporary experiences of structural privilege that impact on the health and wellbeing of collectives, in this case settlers, in current generations also have important historical links. While the theorising in disciplines such as settler colonial studies examines the trajectories of settlers within colonisation, this paper explicitly links these experiences to the historical trauma experienced by indigenous people. For example, large scale confiscations and theft of land and resources experienced by *hapū* and *iwi* (tribal collectives) Māori through the process of colonisation have resulted in not only the destruction of the economic foundations of future livelihood, but are also manifest in current rates of poverty amongst Māori and in the disruption of socially and culturally based healing and resilience into current generations

(O'Malley, 2016a). The Pākehā settlers who acquired the land and material resources taken from Māori, have reaped individual, collective and intergenerational rewards from that procurement. The accumulated effects over generations have dramatically improved the economic, social, and political wellbeing of current descendants, both materially and structurally. Pākehā worldviews and the institutionalisation of Pākehā cultural norms in our national, governmental and civic institutions have served to reaffirm and entrench models of mental and social wellbeing.

This is not to dismiss out of hand the individual and collective efforts of the settlers to make use of and improve those resources through generations, in what is sometimes referred to as social mobility. However, equally it behoves us to acknowledge the strength of indigenous people in surviving and being resilient in the face of such historic and contemporary adversity. Conceptually, it is necessary, to provide a broader appraisal and acknowledgement that current disparities between indigenous and settlers have been affected by historical acts that were traumatic for one group and provided a collective windfall for the other. Gratuitously dismissing these historical dynamics with commonplace talk such as "the past is the past", "you can't turn back the clock" and "get over it", as is often used to refute Māori claims for the remedy of colonial wrongs, is to further injustice and prolong the detrimental effects this places on all affected groups and the nation as a whole. In parallel with our tendency to over-emphasise disadvantage and neglect privilege in analyses of the current social order, there is a propensity to fail to attend to the antecedents of contemporary manifestations of societal privilege.

So how might we develop a social theory or framework that helps articulate historical privilege in ways that explicitly link to historical trauma? Returning to the three elements of historical trauma outlined earlier, we can examine their presence in the literature to assist in the development of a similar framework to understand historical privilege. These three elements centre on i) an act(s) of trauma ii) experienced by a collective, and iii) affecting multiple generations.

Historical Privilege - Definition

How might we define a concept such as historical privilege, mirroring that given for historical trauma, within the context of colonisation? A working definition might be: "The complex and collective **structural advantages** experienced over time and across generations by a group of people who share an identity, affiliation, or circumstance". These structured advantages may include financial and economic rewards, as well as legal, social and cultural freedoms that were denied to the others. As we work through some of the other core elements of historical trauma, a useful framework emerges (see Table 1 for summary).

1.   *Historical acts of trauma and contemporary reminders of historical trauma*

This is perhaps the most straightforward in terms of theorising an equivalent in terms of structural advantage for non-indigenous people. As outlined in the example above, colonisation is a process whose primary purpose is the forced transfer of power, resources and status from one group to another (Billig, 1995; L. T. Smith, 1999). At its heart it involves historical acts of dispossession for indigenous people: dispossession of their lives through acts of war and violent destruction of people and property, and the dispossession of lands and other material resources often resulting in starvation and material poverty. Indigenous people were also often expressly prohibited from practicing their own cultural traditions (Voyce, 1989) resulting in the dispossession of long held models of collective healing and the social and cultural structures that maintained social order.

Current expressions of racial discrimination in all aspects of the social world, from discrimination in employment and housing (R. Harris et al., 2012a; Statistics New Zealand, 2012; Wilson et al., 2005), to the general disparaging of Māori language and culture in contemporary New Zealand society (Ballara, 1986; Baxter, 2012; Cook, 2015; Nairn et al., 2006; New Zealand Herald, 2004b; Wetherell & Potter, 1992) act as everyday reminders to all New Zealanders of the second class status of Māori people and the widely-held view that Māori people, language and culture are inferior.

1(a) Historic windfalls and dramatic increases in fortune

The historic acquisition of land and resources through outward aggression, force of war and disease and the justification of dispossession by dubious legal means created unprecedented boons of wealth and power for Pākehā settlers, particularly those involved in the military forces in the first instance (Belich, 1986; Dalton, 1967; King, 2003; Wells, 1878). British commanders, military officers and local militia were at the forefront of acquiring the wealth dispossessed from the natives, some of them later holding extraordinary powers in the new social order as governors, land court judges, local government officials, businessmen and traders of property. Indeed these acts of reward in wealth, power and opportunity were offered as the key motivational factor in securing their services to start with. For some who had come from an environment where upward mobility of any sort was severely limited by class and social position, the power of these enticements cannot be overstated (King, 2003, p.174; New Zealand Waitangi Tribunal, 1996; Parker, 2003). These handouts of power, prestige and material wealth result in important dividends that these men were able to pass on to their families and future descendants.

Additionally, the enticement of cheap land, much of which was obtained through dubious legal transactions, and later through large-scale confiscations of land from Māori deemed to be in 'rebellion', was an underlying premise to attract and increase non-military immigration from Britain. The sale of confiscated and other Māori lands, the individualising of title through the Māori Land Court and the enormous profits gained through the on-selling of Māori land by the Crown and other parties, provided a fundamental economic benefit to settlers from the dispossession of Māori.

1(b) Contemporary reminders

Contemporary markers also exist to remind the affected groups of historic privilege. The removal of indigenous language names and the colonial 're-naming' of landmarks, lakes, rivers, mountains, coastlines, seascapes, forests and other important sites serve as everyday reminders of the colonial project (Hendry, 2005; Kearns & Berg, 2009). The naming of sites, institutions and even residential streets

after these early colonists, many of whom held abhorrent views about non-whites and women, remain to this day (Belshaw, 2005; Karaitiana, 2016; Kightley, 2016; King, 2003, p.172; Phillip, 2014; Tuckey, 2016). The practice of examining the colonial foundations of significant sites, and 're-claiming' the original names (and the resistance from some to those efforts) is a growing area of interest all over the globe (Acosta, 2015; Belshaw, 2005; Brattland & Nilsen, 2011; Chauke, 2015; Coughlan, 2015; Sparrow, 2015; Television New Zealand, 2015).

As we have argued elsewhere (Abel, McCreanor, & Moewaka Barnes, 2012; Belinda Borell et al., 2009; Angela Moewaka Barnes et al., 2012; H. Moewaka Barnes et al., 2014), acts of explicit ethnic discrimination and denigration often serve as implicit privilege for whites. Accordingly, never having to be concerned about what opportunities may be denied you because of your anglo-sounding name marks a contemporary manifestation of the 'normal' social order based on the historical imposition of Pākehā governance, institutions, language and culture.

1(c) Remembering and Forgetting

By definition, a fundamental function of the historical trauma concept involves an active sense of remembrance, commemoration and recognition of the historical acts of trauma and their current day effects. This assists the affected groups to realise the importance of memory in the representational construction of historic trauma to generations who may not have been present for the original act(s) (A. Young, 2004). Remembrance is of fundamental importance to indigenous people on at least two fronts. As argued in the historical trauma literature, indigenous people are continuously representing their position in relation to past injustice, while simultaneously resisting the master narrative of leaving historical traditions and cultural practices behind in order to integrate better into 'mainstream' society that has been a major element in our social and policy environment over generations. Failure to conform to settler expectations in this way marks indigenous people as troublemakers, "haters and wreckers" (New Zealand Press Association, 2004), and as

being 'stuck in the past' and not fit for the modern world (Ballara, 1986; Angela Moewaka Barnes et al., 2012).

There are acts of collective remembrance in historical privilege which also use memory as a representational construction to those in the present. That is to say, the construction of collective remembering shapes and reinforces collective identity (Murray, 2013, p.31). Whereas historical trauma constructs memory of loss and oppression as well as healing, resilience and survival, historical privilege tends to use memory to construct representations of progress and nationhood, the hardworking pioneer, or of events that contribute to a collective 'coming of age'. In Aotearoa New Zealand, no other act of commemoration perhaps encompasses this use of memory as constructed representation better than recent commemorations of Anzac Day (McConville, McCreanor, Wetherell, & Moewaka Barnes, 2016; Mein Smith, 2016; Ministry for Culture and Heritage, 2005; O'Malley & Kidman, 2017; Wetherell, McCreanor, McConville, Moewaka Barnes, & Le Grice, 2015). Indeed, the populist catch phrases used in commemorations of the day lead with "Lest we forget" and mark the anniversary of the landing of New Zealand and Australian soldiers on the Gallipoli peninsula in modern day Turkey in 1915 (Ministry for Culture and Heritage, 2005).

These constructions of collective remembrance, for the dominant group, are relatively rare and carefully constructed to reinforce particular narratives about collective identity and ignore, mask, or 'forget' memories that might detract or challenge these representations. For instance, in Aotearoa New Zealand, public debate is ongoing with regard to the enormous discrepancy of allocated resources, media coverage, governmental commitment and general public regard between Anzac Day commemorations and those devoted to commemorating the New Zealand Wars, fought between indigenous and settlers over dominion of the land itself, the later stages of which, overlap the outbreak of WW1 (Godfery, 2015; Maori Television, 2016; McConville et al., 2016; McCulloch, 2014; O'Malley, 2016b). Anzac Day, with the routinely scripted narratives of pride and reverence, the extensive public recognition presented by both mainstream and Māori-controlled media, and the

well-tended and maintained memorials and cenotaphs present in towns across the country, can be contrasted quite effectively with the general forgetting of those acts and dates of remembrance concerning the New Zealand Wars (for an excellent comparative analysis, see McCulloch, 2014). Additionally the general disrepair, disregard and compromised access to the physical memorials of those sacrificed in the New Zealand Wars is not lost on astute observers. Such was the concern, particularly from the young, about the way these disparate enactments of remembrance and forgetting were playing out in the standard story of race relations, that in 2015 students from Otorohanga College in the Waikato region, and with much local and national support, petitioned Parliament to commemorate the New Zealand Wars more respectfully (New Zealand Parliament, 2015; O'Malley & Kidman, 2017). The response from central government has been mixed. The Minister of Māori Affairs, after working closely with iwi (tribal) representatives, confirmed October 28 as "Raa Maumahara National Day of Commemoration" (Rotorua Daily Post, 2016) and was able to secure moderate funding for initiatives. However, National recognition of Raa Maumahara as a public holiday and the formal inclusion of the New Zealand Wars in the national education curriculum, both key elements of the petition, were rejected. Primary responsibility for these commemorations has been devolved to local governments and interested communities, so issues of equivalence with the national reverence accorded Anzac Day remain.

The Anzac Day example demonstrates the great care needed in remembering, primarily to protect the "master narrative" (Haebich, 2011, p.1035) from dilution or deviation and manage any shame or discomfort the dominant group might experience as a result. Again, master narratives about Anzac Day give some useful insights about the power of memory in identity construction. The men that served at Gallipoli in 1915, experienced a trauma directly and as the participants in a disastrous military campaign, their memories of the campaign likely included sorrow, guilt and even shame, as these are common psychological effects of defeat and abandonment (Noonan, Sharpe, Freddi, Márkus, & Heller, 2007, pp.113-114). Yet acknowledgement of such despairing affects is almost at complete odds with interpretations held by the descendants of these servicemen and the nation more

generally, who appear to embrace the trauma narrative because the memory has not been constructed as one of shame or regret, but rather of pride – a psychological state usually seen in victors. The master narrative of nation building, independence and citizenship through sacrifice is particularly present in recent observations of Anzac Day, and only seems to intensify with each annual commemoration. In this way Anzac Day is presented to those who never experienced the trauma themselves as honourable and reinforces identity as 'real' New Zealanders.

This highlights the complexity of memory as an important representational construction of collective identity. Care is required in these constructions as remembrance, for both those that are remembering historical trauma as well as those remembering acts of privilege through sacrifice, are not without risk. For the privileged Murray (2013, p.x) argues there is a risk of commemoration becoming "escapist nostalgia", and for those remembering historical trauma that there is a danger of the memory construction actually keeping the trauma alive in current generations (A. Young, 2004). This has impacts on the pathology of that stress on current members of the collective in that the remembrance of trauma in particular is carefully managed to centre on healing and resilience.

Contemporary markers of historical privilege manifest not only in a small number of carefully constructed acts of overt recognition, but more commonly as sustained collective 'forgetting'. Murray (2013, back cover) summarises this dichotomy in reference to contemporary South Africa.

> "When the past is painful, as riddled with violence and injustice as it is
> in post-apartheid South Africa, remembrance presents a problem at
> once practical and ethical: how much of the past to preserve and
> recollect and how much to erase and forget if the new nation is to ever
> unify and move forward?"

In Aotearoa New Zealand, the complexity of forgetting and remembrance are not dissimilar to Murray's description. Active forgetting helps the current day recipients of historical privilege assuage contemporary feelings of guilt and shame and assists

them to forego significant acts of collective responsibility that may be drawn forth from reminders (often by Māori activism) of the historic pain of colonisation and the contemporary suffering that continues for those impacted by historical trauma. In the current environment this collective act of forgetting often manifests as very low levels of knowledge amongst Pākehā descendants of Māori histories, language, culture and people in general, and also of their own colonial history and its impact on current understandings of nationhood. Indeed, Haebich (2011) suggests that collective forgetting, far from being a benign state actually creates a climate where ignorance can flourish, accounting for a general lack of knowledge about particular phenomena, a gap readily filled with misinformation, hearsay and imaginings that given constant repetition (by government and the media for instance) come to be taken as fact. She argues that "an epistemology of ignorance" (p.1035) is required to examine these practices and their connections to constructions of authority, representation and collective identity. Stanner (1969) argues that the disremembering by non-indigenous about the harm indigenous people have been subject to through the process of colonisation can be understood as:

> "…a structural matter, a view from a window which has been carefully placed to exclude a whole quadrant of the landscape. What may have begun as a simple matter of forgetting of other possible views turned under habit and over time into something like a cult of forgetfulness practised on a national scale." (p.25)

This negotiation between remembering and forgetting can be complex and, forgetting particularly, takes many shapes as described in depth by Connerton (2008). The fundamental purpose and key common denominator of this collective forgetting for the dominant group is to shape and maintain aspects of group identity (Wessel & Moulds, 2008), carefully selecting from the past and adapting and enhancing those into the future. This is fundamental in the maintenance of a master narrative. In Aotearoa New Zealand, McCreanor (2009) refers to this master narrative as the "standard story" of Māori/Pākehā relations. It is these active states of collective forgetting, what Connerton (2008) describes as repressive erasure, prescriptive forgetting and humiliated silence, that allowed Pākehā to believe for so

long that Aotearoa New Zealand had the "best race relations in the world" (McCreanor, 2009; O'Malley & Kidman, 2017; Ranginui Walker, 1990).

2. Historical trauma is an experience shared by a collective rather than an individual

The importance of the trauma being a shared experience of a collective is fundamental to the concept and differentiates it from the more common approaches to addressing trauma in individuals such as PTSD (Post Traumatic Stress Disorder). This not only alters the pathology of the trauma, but also broadens its application and invites innovative multi-level approaches at redress and healing because it places the shared identity at its heart. For instance, strengthening positive markers of the shared identity (i.e., an identity as resilient, survivors) can be understood by the collective efforts of indigenous people to revive their language and cultural traditions. The appropriateness of historical trauma as a concept also aligns well with indigenous epistemologies of collective ownership/guardianship of land and resources, and collective engagement with law/lore and order. The place of an individual within wider kin groups of whānau, hapū and iwi is fundamental to a Māori worldview (M. Durie, 1994). Indeed the words "tribe", "clan", "band" are inherently collective and historical trauma reflects this, often in homogenising ways, i.e. "Māori" and "natives" rather than tribal identities.

2(a)   Historic privilege is an experience shared by a collective rather than an individual.

This becomes a little more problematic to mirror as the acts of historical privilege often functioned within a capitalist, patriarchal paradigm that saw British men as primary beneficiaries. The colonial division of power put whānau hapū and iwi as representatives of collective Māori on one side and "The Crown" as the representative of the non-native settlers and their individual and collective interests on the other. So while we might argue that the material wealth of land transfer from Māori to Pākehā was felt most initially at an individual or familial level, the Crown provided the 'collective' support for individualism and acted in establishing the

structural, legal, economic, social and cultural systems that necessitated and then justified the dispossession of Māori people. It reinforced in all citizens that not only was Māori dispossession a required process for the future of the colony and therefore white settlers, but also argued it was fundamentally beneficial to Māori to be assimilated by a superior civilisation (Belich, 1986; Augie Fleras & Paul Spoonley, 1999). The continuing colonial rhetoric that Captain James Cook "discovered" Aotearoa, or that settler ownership of Te Wai Pounamu, the South Island of New Zealand could be justified under the notion that the island was "terra nullius", speaks directly to such structural negotiation of dispossession and the negation of indigenous history.

3. Historical trauma is shared across multiple generations

The final core element in construction of historical trauma frameworks involves the effects of trauma across many generations. This multi-generational aspect of historical trauma is essential in the conceptual differentiation between historical trauma and other terms such as collective or group trauma. It also differentiates from intergenerational trauma, which is most directly related to trauma experienced and transferred amongst generations of the same family rather than necessarily including broader collectives of shared identity. In some instances the trauma can affect descendants long after the original acts of trauma have taken place. This would seem particularly pertinent to the early understanding of historical trauma as experienced by Holocaust survivors, their children and families (Evans-Campbell, 2008, p.323). However as the literature clearly points out, with regard to indigenous people the acts of historical trauma enacted through the process of colonisation exceed the term 'historic'.

> "Settler nation-states did not establish themselves for temporary
> economic gains to be left behind when profits evaporated; conversely,
> settlers occupied Indigenous lands in order to claim ownership over
> them. From this perspective, it can be recognised that settler
> occupation was, and continues to be, an ongoing process. The
> incursion of white settlers into Indigenous territories can thereby be
> more accurately viewed as iterative and evolving courses of action that

have never ceased, rather than isolated events that happened as different points along a fictive linear timeline that gets called "history"." (Gahman, 2016, p.316)

This notion of colonisation as an ongoing process (Kauanui, 2016) doesn't negate the significance of historical acts of trauma, but rather broadens and deepens the application of historical trauma to the ongoing experiences of indigenous people. This recasting of 'history' also aptly applies to historical privilege.

3(a) Historical privilege is shared across multiple generations

The intergenerational transfer of wealth, power, social position and status may also help deepen the understanding of historical privilege as affecting descendants long after the historic acts of acquisition have taken place. There are two areas of literature that do make important contributions to this in terms of understanding historical privilege – upward (social) mobility and inheritance.

Upward Mobility

The relationship between the income of parents and the future prosperity of their children is a complex phenomenon that incorporates many areas of academic enquiry. Terms like *social mobility*, *intergenerational mobility*, *economic mobility*, and *social and cultural capital*, all speak to the notion that where one starts in life is important to where one ends up. While many areas of social life will have an influence on upward mobility, such as access to social networks, social status, patterns of parenting, race, gender, physical ability and so on, much of the upward mobility work has focused on income and financial resources. As the income received by parents to invest in their children's future becomes less fairly divided amongst rich and poor, the outcomes for those children across the life course and into subsequent generations increasingly reflects that inequality. Too often 'merit' may not be the cause of class and racial distinctions but rather the result (Bowles & Gintis, 2002; Ermisch, Jantti, Smeeding, & Wilson, 2012; McNamee, 2009), framing a self-perpetuating cycle of privilege, social and cultural capital and inheritance. This cycle of meritocracy is fundamental to understanding a concept like "The American

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Dream": the idea that any individual made of the "right stuff" (McNamee, 2009, p.25), talent, right attitude, strong work ethic, and high moral character can achieve almost unlimited success.

In the New Zealand context, commentaries on the power of meritocracy as explanation for current disparities in wealth, opportunity and wellbeing are abundant (Baxter, 2012; Augie Fleras & Paul Spoonley, 1999; Vocational Training Council (NZ) Polynesian Advisory Committee, 1978; Wetherell & Potter, 1992). Yet as much of the forgetting literature highlights, forgetting the importance of non-merit factors (like the structural privilege attained by Pākehā as a result of Māori dispossession) is a far from benign state, but rather a structured act resulting in even greater emphasis on having and inheriting "the right stuff". The life stories of successful individuals from meagre beginnings (like former Prime Minister, John Key) also serve to reinforce the perception of merit as primary to success.

Yet upward mobility does not encapsulate historical privilege as laid out in this paper, because: a) it is largely concerned with the wealth and social movement of individual or family units, rather than large groups that share an identity or circumstance; and b) most literature looks across two generations of mobility from parents to children, not across multiple generations as later articulations of historic trauma posit. So let us turn some attention to the concept of inheritance more generally.

Inheritance

Again, it is appropriate to think of inheritance as the privilege equivalent to the intergenerational transmission of historical trauma stressors amongst indigenous people because, by definition, it is about the intergenerational transfer of wealth and power. Bowles and Gintis' (2002) ground-breaking research into the area of inheritance found that intergenerational transfer of wealth was not only important, but rather the *most significant factor* in the current socio-economic position of descendants. They argue that the correlation between inheritance and current economic status was on average three times greater than originally posited when inheritance was studied in the 1960s. In addition to economic wealth, other factors

of inheritance include cognitive skills, non-cognitive personality traits valued by employers, income-enhancing group memberships, superior education and health status. They conclude that cognitive skills and educational achievement have been over studied in the intergenerational transfer of wealth while income-enhancing group memberships like race, gender, geographical location, height, physical appearance and other non-cognitive behavioural traits have been underexplored.

There is also some applicability to collective forgetting in terms of the intergenerational transfer of wealth and socio-economic conditions. The financial and social position of descendants resulting from the handing down of wealth and power strikes many as inherently unfair, so while there is a tendency to be proud of one's heritage ("I come from four generations of farmers", etc…), there is also a kind of constitutive forgetting (Connerton, 2008) about where that intergenerational wealth began. This obscures the role of historical privilege in material inheritance in favour of master narratives about the accumulation over generations of a particular value base, work ethic and a sense of "playing by the rules". Indeed the notion of getting ahead through hard work is a primary trait of the Pākehā ethnic group (Vocational Training Council (NZ) Polynesian Advisory Committee, 1978). Individuals who believe success in life is related to "hard work" and "taking risks" are more likely to oppose more equitable redistribution of economic resources, while those who believe success is more likely due to "money inherited from family" and "connections and knowing the right people" tend to support redistributive measures (Fong, 2001). Recent survey findings into New Zealand attitudes and values have shown dramatic differences in the number of non-Māori New Zealanders who support more equitable redistribution of resources compared to Māori (Grimes, MacCulloch, & McKay, 2015). The re-emergence and intensification of the 'upward mobility through hard work' master narrative is a direct result of intergenerational privilege that has been exacerbated through the implementation of a neo-liberal agenda which began in the 1980s (J. Kelsey, 1995). As with the social mobility literature however, much of the understandings illuminated from inheritance studies relate to the intergenerational transfer of social goods and privilege within individuals and families and do not take significant account of the effects of historic, structural and

institutional advantages experienced at a broad population level that are as fundamental to the functioning of historical privilege as historical trauma is to indigenous people.

In this sense the ongoing nature of the colonisation process, as outlined by Gahman (2016), is also important to acknowledge here in terms of these effects on collectives that share a broader identity than family. If we apply this to historical privilege we see that rather than these windfalls and intergenerational accumulations of wealth, power and social positioning across multiple generations being understood as fundamentally a thing of the past, the ongoing nature of colonisation as a process of settler privilege can be seen in the current conceptualisations of what might be considered "normal" in New Zealand society, what constitutes "mainstream". In current generations this contributes to the almost invisible nature (B. Borell, 2005) of what it means to be a Pākehā New Zealander in Aotearoa, and the structural and institutional support that enable it.

Table 1: Key elements of historical privilege

Key elements	Historical trauma	Historical privilege
An act(s) of trauma	Acts of trauma experienced through process of colonisation	Acts of historic windfall and dramatic increases in wealth, power and social status
Ongoing reminders of those acts	Recurring experiences of discrimination	Naturalisation of group superiority through structural, institutional and cultural favouritism
Experienced by a collective	Affected groups may share a particular identity, affiliation or circumstance	Individual and familial wealth acquisition supported by governmental action
Experienced across multiple generations	Trauma affecting multiple generations of descendants who may not have witnessed the original act(s) themselves	Historic boons in wealth, power and social status are passed to and added on by subsequent generations of settlers.
Remembrance/Forgetting	Remembrance and commemoration are inherent with an underlying importance on healing, resilience and recompense.	Collective forgetting is more common. Remembrance is carefully constructed.

Conclusion

My reading of the literature has not brought forth a concept that adequately mirrors historical trauma for the privileged by encompassing all the core elements present in the historical trauma literature. This paper has begun to examine and frame how an understanding of privilege, that is equivalent to the decolonising power of the concept of historical trauma, may be described. The current social status and general wellbeing of Māori has been deeply affected by historic acts of trauma and ongoing experiences of dispossession, denigration and discrimination. Acceptance is needed that those dire consequences for Māori have produced levels of advantage and privilege for the descendants of all settlers to Aotearoa, only possible through the ongoing process of colonisation. These dual processes, that are influential in most domains of contemporary society, have produced and entrenched "social gradients" (Commission on Social Determinants of Health, 2008), with their attendant inequities, within and between Māori and Pākehā populations. If we are serious about addressing the ill effects of colonisation on one population, equitable acknowledgement of the privileging effects consequential to another must also be part of the conversation.

Discussion

Three main ideas are put forward in this thesis. First, Kaupapa Māori approaches to non-Māori research topics can make important and insightful contributions to mātauranga Maori. Second, cultural hegemony is maintained through structured forgetting, silence and the vigorous suppression of dissent that in turn produce levels of ignorance about how society works that affect empowerment and equity for all New Zealanders. Finally, these hegemonic structures are amenable to change through the illumination of these hidden and silenced parts of our society, both at the individual and collective level. Next I describe the place I have reached in my work with each of these ideas, and further questions that may be amenable to research efforts.

Where to with Kaupapa Māori theory

For academics, "Kaupapa Māori research" is a common discourse that encapsulates Māori involvement in a range of academic and civic activities. Over the last few decades it has become almost paradigmatic of the ways in which Māori research is carried out, both in distinguishing it from non-Māori research and, critically, for authentic engagement with Māori communities. It is frequently drawn on to symbolise an aspect of exceptionalism in terms of the general regard of indigenous people in New Zealand.

Kaupapa Māori is a term many New Zealanders will have heard. Irrespective of accuracy, some New Zealanders (particularly in the international arena) feel a sense of pride in the level of visibility of Māori in state affairs and the national identity compared to indigenous people elsewhere (Godfery, 2014). Indeed, Māori have been key players in the development, formation and ongoing implementation of actions to empower indigenous people, including the United Nations Declaration on the Rights of Indigenous People (Charters & Stavenhagen, 2009; Jackson, 2005). At home and abroad, Kaupapa Māori serves as an important standard in new

governance structures for the relationships between indigenous and settler peoples, particularly in the global north (Grosfoguel, 2006; Skerrett, 2017), where important milestones are being achieved for ongoing development in the status, aspirations and progress of indigenous people.

As with all lines in the sand, maintaining the gains made and standards set by Kaupapa Māori practitioners, while important should not capture all our epistemological effort. A "worldview" is hardly that if we are only gazing at ourselves. We must also give attention to content that may not seem directly relevant to Maori, as this too forms part of a Māori worldview. For critical Kaupapa Māori theorists like Pihama (2001a), Cram (2001) and Moewaka Barnes (2000), these expanded application are inevitable and welcome. Kaupapa Māori continues to march forward, not only in terms of its global reach, but also in its depth, affordances and application at the local level. The knowledge gained in this thesis (as outlined in Chapters 1 and 2 and evidenced through other chapters) offers my small contribution to those ends.

I have also sought to expand the breadth of Kaupapa Māori research by recognising the epistemic leadership of Māori theorists involved in visual arts and culture. These Māori leaders have been at the forefront of debates about Māori identity, authenticity and innovation from the earliest colonial times (Neich, 1983, 1993; Nin, Kedgley, & Nicholas, 1998). Contemporary Māori working in visual arts and culture have been unceasing in these efforts (N. Borell, 2013; Pataka Porirua Museum of Arts and Cultures, 2002; H. Smith, Solomon, Tamarapa, & Tamati-Quennell, 2002; Tamati-Quennell, 2017), and yet we tend to see these leaders as 'artists' and not 'theorists'. Our celebration of their contribution to the Māori worldview centres on how their work unsettles, appeases and delights our senses. However, the challenges to our thinking from their research have been acknowledged much more sparingly. In Chapter 5 of this thesis I offer my ideas about the potential benefits of further cross-over analysis for the expansion of Kaupapa Māori epistemology.

By expanding the application of Kaupapa Māori theory to research participants who are not necessarily of direct and immediate relevance to the Māori community, my

work toward this thesis has raised the obvious question of how far this line of research/theorising can be extended. Some Kaupapa Māori projects that focus on inequities tend to assume that the research should be directed at those in 'need', and so needs to be 'Maori' focused or centred in order to redress the balance. The conventional understanding of a Kaupapa Māori project assumes that it will be on a topic of immediate importance to Māori communities, that research processes be culturally appropriate to Maori, that a significant proportion of the people involved, either as researchers or participants, will be Maori, and that benefits from the project will be appropriately disseminated to Maori. However, if a research project does none of these things, how might we claim it as Kaupapa Māori at all? The Privilege project did not involve a subject of immediate relevance to Māori communities and most participants were non-Maori. While the overall control of the project was managed by Maori, most of the research team (which comprised two Maori, two Pākehā and one Samoan researcher) were non-Māori who benefited most from the workforce development outcomes of the project.

Further, if the research project employs a Māori epistemological frame but applies this to a non-Māori topic, therefore not involving Māori as research participants, in assuring the ethics of data collection, in the design, or in dissemination or consultation, then what criteria might be used to make any claim for the research as a Kaupapa Māori project?

Many Kaupapa Māori theorists have grappled with the appropriate criteria for designating research as Kaupapa Māori within a given context (Baxter, 2012; Anaru. Eketone, 2008; Hoskins, 2012; Mahuika, 2008; Ani Mikaere, 2007; Pihama, 2001a, 2001b). I would offer some additional considerations based on the ideas, theories and outcomes of this thesis.

Indigenous Authority

As discussed in Chapter 4, the place and positioning of Māori researchers in non-Māori or mainstream academic research is often a heavily negotiated space involving discussions of power, context, knowledge, experience, utility and group affinity. This

is to ensure that the ethical obligations to Māori involved as researchers, participants or affected communities can be maintained, whilst also enabling Māori to maximise potential benefits that may arise from the research. Similar negotiations are happening in Kaupapa Māori projects as well. The ongoing consideration of the place and position of non-Māori researchers and participants in Kaupapa Māori research endeavours is one example (Barnes, 2013; Cram et al., 2006; Hoskins & Jones, 2012; A. Jones, 2012). What role should non-Māori have in a Kaupapa Māori project, and at what level of seniority? What roles and responsibilities are appropriate for non-Māori in these projects? How might their input be appropriately managed so that they do not inadvertently overwhelm the voices of Māori in the project? Given that the values inherent in Kaupapa Māori research require that consideration be given to cultural as well as professional supervision for Māori research staff, what culturally specific support might non-Māori researchers require? These considerations are of varying importance in a Kaupapa Māori project with Māori subject matter. However, they become critically important in Kaupapa Māori research concerning a non-Māori subject and involving non-Māori staff. An indigenous project looking at non-indigenous subjects may not necessitate an entirely indigenous team; in fact, the ethical and practical implications of appropriately matching ethnicity between the research team and subjects should be embraced. Authority, however, should reside with indigenous people. Accordingly, leadership of the project, control of the project resources, processes and dissemination outcomes should be subject to indigenous practices of consensus and conscientised decision making.

As the Principal Investigator of the Privilege Project, I had to consider elements of professional practice in the conduct of this research that were new to me. While in general academic structures may be sufficient to support most Pākehā researchers, for those working in the critical space of improving Māori Pākehā relations, or those working within Māori authority in Kaupapa Māori research projects, appropriate cultural as well as professional support is a crucial consideration. Indigenous authority; leadership and control were key foci in the running of the Privilege project, so in this regard the research aligned with much Kaupapa Māori commentary. A point of departure, and where I think we may have made a contribution, that due to

the research content being largely non-Maori, the notion that Kaupapa Māori elevates a 'Maori' voice about Māori issues, is challenged.

Transformation

Most Kaupapa Māori scholars believe successful Kaupapa Māori projects involve or encourage some form of transformation (M. Durie, 1994; H. Moewaka Barnes, 2000, 2008; L. T. Smith, 1999, 2012). This emphasis on the utility of research in affecting change is fundamental to Kaupapa Māori research. This approach explicitly challenges the notion that knowledge can be free of its political and historical context, and that knowledge should be generated irrespective of its potential utility. This focus on utility has become all the more important as funders of research seek to enhance value for money and best use of scarce resources, while at the same time end users of research seek evidence to support action on the ground to improve peoples' lives. Māori have been at the forefront of challenging research practices that at best have been of no benefit to Maori, and at worst have been actively disempowering (Health Research Council, 1998). Aligned with the requirement that research has utility as an instrument of transformation is the implication that Māori people and communities will be the immediate and primary beneficiaries of Kaupapa Māori research endeavours. This approach has yielded numerous benefits to the Māori community. Another fundamental aspect of Kaupapa Māori research is to recognise power and context in the development of research questions and approaches. Thus exploring issues affecting Māori people without acknowledging the context of colonisation and inequitable distributions of power between Māori and non-Māori is, as Stanner (1969, p.25) argues, to observe the subject as "…a view from a window which has been carefully placed to exclude a whole quadrant of the landscape". Kaupapa Māori research that examines this 'landscape' is therefore a legitimate and valuable task, even if, by definition, the landscape is largely a non-Māori subject. Our research project about societal privilege sought to do this.

Further questions for Kaupapa Māori theory

With regard to the development of Kaupapa Māori theory, ideas related to 'mandate' and 'permission' remain. I have encountered numerous Māori students and junior

staff members who feel reticent about claiming their work as Kaupapa Māori, even though they are clearly addressing issues of power, identity, representation and positioning of Māori people. Some have sought guidance or even 'permission' from me to make such claims. This reticence seems to come from a sense of, or being told directly by a more 'culturally connected' person, they are not sufficiently culturally competent to claim they are doing Kaupapa Māori research; for example, not being fluent in te reo Māori and the relevant tikanga, even when these skills are at best peripheral to the research questions being explored. Who then can give these kaimahi permission to claim Kaupapa Māori as their research theory when they are researching areas of critical importance to Māori people, but where the project does not involve, or may even challenge, taken for granted notions of Māori identity? How does one position oneself to challenge the status quo? How is mandate sought and obtained for one's position in this sense? And finally, who may endorse such a position and on what basis?

Where to with structures of hegemony

Ethnicity continues to be an important marker of population disparities in everyday life in Aotearoa New Zealand. Our small nation houses some of the world's foremost experts in understanding the processes, pathways and effects that racism contributes in driving the ethnic disparities apparent in our social and public health data. There is a robust literature in New Zealand which exposes not only the lived realities of ethnic inequities in most areas of life, but also clearly acknowledges the elemental role of colonisation, as history and as an ongoing project, in the current situation. Most of the literature has tended to focus on those most negatively affected by inequity, as this demands immediate attention if we, as a society, are to give genuine effect to the values of fairness and equality we claim to uphold.

However, I argue that this focus on the disadvantaged, and meeting their pain with a public response, has resulted in an inflated level of scrutiny and blame apportioned to them as individuals making poor choices. Even when researchers go to great effort to impart structural analyses and approaches for redress, these are often dismissed

in favour of more individualised explanations based on lifestyle and behavioural choices (Hodgetts et al., 2004). It is my hope that approaching inequities by considering privilege as another manifestation of racism, and exploring how this too undermines the social order for all, will give some weight to the importance of structural analyses in inequity debates: inequity truly is a systemic issue and not about good and bad people. While this thesis works to understand privilege within the sites of race, ethnicity and culture, it is my wish that readers consider these processes of dominance and subordination, marked and unmarked, explicit and implicit, remembrance and forgetting, and apply them more broadly.

In this thesis, I have grappled with some of the effects of this inequitable arrangement to expose not only the unfair outcomes created for Māori and for racial minorities, but, more particularly, the effects this arrangement may have on dominant group members themselves. It is widely accepted that entrenched forms of racism – whether formal in nature, such as apartheid or segregation, or informal, such as unconscious bias and stereotyping – can be understood as detrimental in different ways and to varying degrees by both the marginalised and the advantaged. I have argued that gazing at racialised society with a focus on societal privilege reveals a similar layering as well as nuanced personal, civic and societal effects that, while disproportionately affecting marginalised groups, in absolute terms undermine social order for all.

My examination of the literatures of collective forgetting (Connerton, 2008; Haebich, 2011; Mills, 1997; O'Malley, 2016b; Stanner, 1969; Wells, 1878; Wessel & Moulds, 2008), silence and suppression (Montoya, 2000; Sheriff, 2000; Sue, 2014) and how these produce and reflect epistemologies of ignorance (Sullivan & Tuana, 2007) has been vital to developing a deeper understanding of the construction of privilege. I have come to a nuanced understanding of the ideological foundations and hegemonic goals of ignorance as I have theorised its effects on both marginal and dominant group members. I elucidate some of these positions in Chapters 4 and 5.

I have also examined frameworks in the literature that describe aspects of racism in society and apply a privilege lens, attempting to focus on those frameworks using a critical privilege perspective. Chapter 2 considers the viability and effect of layering concepts of privilege within the racism frameworks, while Chapter 5 seeks to create a privilege equivalent of the concept of 'historical trauma' as it has been used in anti-racism research.

Where to with challenging hegemony

I have also tried to illuminate ideas and areas for future consideration by other researchers. The process of mirroring concepts and frameworks related to disadvantage in examining privilege is an important methodological tool for further study to understand privilege. That is, new wheels need not be developed from scratch, but frameworks that illuminate racism may be re-purposed for privilege using a different gaze, with different populations in mind.

Developing a public discourse that seeks to establish that privilege, like racism, is detrimental to all is a daunting task. Neo-liberal values, now so prevalent in Western democracies, with their championing of individual rights, merit and responsibility (Dudas, 2005), make the challenge of illuminating inequity as a structural issue more difficult, even though such analyses are needed now more than ever. Added to this broad resistance, is a distinct distaste on the part of the empowered to engage positively with any need to change their personal circumstances or established cultural imperatives. Chapter 4 is devoted to examining the discursive challenges and dangers for dominant group members in terms of the invisibility of their own centrality, their seeming dis-satisfaction with this arrangement and their general discomfort with the othering of marginalised groups using commonplace discourses and the marked identities to which they relate.

Beginning with my first successful seeding grant application from Nga Pae o Te Maramatanga in 2006, I have presented seminars, guest lectures, conferences and public talks on this topic many times. These presentations began as simple

explanations of our research questions and approach, but have grown and developed into, at a minimum, four two-hour workshop segments: Structural analysis – racism; Structural analysis – privilege, Understanding Pākehās – discourse of dominance; and Unconscious bias and implicit associations. I have also explored related ideas about using a privilege lens to analyse ethnicity data and applying these learnings to current events and news. Over the seven-year time frame that I have been working on this doctorate requests from colleagues, students, iwi organisations and other community groups for me to share my understanding of these issues have ballooned, so much so that I have needed to halt all speaking and teaching engagements completely for large amounts of time in order to prioritise work on this thesis and other research projects. The demand for teaching this 'other side of racism' has not abated and I now have regular spots in certain post-graduate papers in a number of programmes at different universities around the country. Where time has permitted, I have also held workshops with different professional bodies to examine how these learnings can be applied to organisational structure and culture. These dissemination activities are illuminating and giving voice to the silent and hidden aspects of our society. Additionally, the educational accomplishments gained through the delivery of workshops and professional development and training activities are encouraging recipients to consider implementing some of the learnings in their professional and personal lives.

I introduced this thesis with a quote from renowned Native American theorist Vine Deloria Jr, from an interview he gave in 1997 (McLeod, 2015). He is describing what he sees as the driver of the fascination or fervour amongst some whites with the religious practices of the 'other'. He claims that these momentary experiences of cultural appropriation fill a need in whites for a deeper sense of authenticity. Many indigenous people will have some experience with what Deloria is speaking to. For instance, we often hear from Pākehā people how lucky Māori (and other non-Pākehā) are to 'have a culture'. Deloria argues that whites' aspirations for emotional and spiritual authenticity are stymied by their individualistic paradigm, and so they are trapped in a cycle of desire for authenticity and inability to enact it because of the lack of a definable collective meaning and identity. This thesis argues that this

cycle is an effect of wāhi ngaro; that collective authenticity in identity has been forfeit as a result of dominance. Illuminating pathways for Pākehā to better understand themselves as a group rather than purely as separate individuals will go some way to constructing the definable community(s) that Deloria refers to, and create more embracing perspectives of identity to benefit all New Zealanders.

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Appendices

Appendix 1: Statements of Contribution

MASSEY UNIVERSITY
GRADUATE RESEARCH SCHOOL

STATEMENT OF CONTRIBUTION
TO DOCTORAL THESIS CONTAINING PUBLICATIONS

(To appear at the end of each thesis chapter/section/appendix submitted as an article/paper or collected as an appendix at the end of the thesis)

We, the candidate and the candidate's Principal Supervisor, certify that all co-authors have consented to their work being included in the thesis and they have accepted the candidate's contribution as indicated below in the *Statement of Originality*.

Name of Candidate: Belinda Borell

Name/Title of Principal Supervisor: Professor Helen Moewaka Barnes

Name of Published Research Output and full reference:

Borell, B., Moewaka Barnes, H., & McCreanor, T. (2017). Beyond the Veil: Kaupapa Maori gaze on the non-Maori subject.

In which Chapter is the Published Work: 4

Please indicate either:

- The percentage of the Published Work that was contributed by the candidate: 90%

  and / or

- Describe the contribution that the candidate has made to the Published Work:

_____   07/08/2017
Candidate's Signature   Date

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MASSEY UNIVERSITY
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TO DOCTORAL THESIS CONTAINING PUBLICATIONS

(To appear at the end of each thesis chapter/section/appendix submitted as an article/paper or collected as an appendix at the end of the thesis)

We, the candidate and the candidate's Principal Supervisor, certify that all co-authors have consented to their work being included in the thesis and they have accepted the candidate's contribution as indicated below in the *Statement of Originality*.

Name of Candidate: Belinda Borell

Name/Title of Principal Supervisor: Professor Helen Moewaka Barnes

Name of Published Research Output and full reference:

Borell, B. (2014). When the marginalised research the privileged: One Maori group's experience. International Journal of Critical Indigenous Studies, 7(2).

In which Chapter is the Published Work: 1

Please indicate either:

- The percentage of the Published Work that was contributed by the candidate: 100%

  and / or

- Describe the contribution that the candidate has made to the Published Work:

_____   07/08/2017
Candidate's Signature   Date

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Principal Supervisor's signature   Date

MASSEY UNIVERSITY
GRADUATE RESEARCH SCHOOL

STATEMENT OF CONTRIBUTION
TO DOCTORAL THESIS CONTAINING PUBLICATIONS

(To appear at the end of each thesis chapter/section/appendix submitted as an article/paper or collected as an appendix at the end of the thesis)

We, the candidate and the candidate's Principal Supervisor, certify that all co-authors have consented to their work being included in the thesis and they have accepted the candidate's contribution as indicated below in the *Statement of Originality*.

Name of Candidate: Belinda Borell

Name/Title of Principal Supervisor: Professor Helen Moewaka Barnes

Name of Published Research Output and full reference:

Moewaka Barnes, H., Borell, B., & McCreanor, T. (2014). Theorising the structural dynamics of ethnic privilege in Aotearoa: Unpacking "this breeze at my back". International Journal of Critical Indigenous Studies, 7(1).

In which Chapter is the Published Work: 2

Please indicate either:

- The percentage of the Published Work that was contributed by the candidate: 20%

  and / or

- Describe the contribution that the candidate has made to the Published Work:

B. Borell	07/08/2017
Candidate's Signature	Date
H. Moewaka Barnes	7.8.17
Principal Supervisor's signature	Date

MASSEY UNIVERSITY
GRADUATE RESEARCH SCHOOL

STATEMENT OF CONTRIBUTION
TO DOCTORAL THESIS CONTAINING PUBLICATIONS

(To appear at the end of each thesis chapter/section/appendix submitted as an article/paper or collected as an appendix at the end of the thesis)

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Name of Candidate: Belinda Borell

Name/Title of Principal Supervisor: Professor Helen Moewaka Barnes

Name of Published Research Output and full reference:

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STATEMENT OF CONTRIBUTION
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Appendix 2: Copies of papers as published

When the marginalised research the privileged: One Māori group's experience

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Abstract

Since the introduction of academic research as a tool of imperialism and colonisation, indigenous people have responded to the intent, processes and implementation of its insights about their lives and experiences in a range of ways. While many of these responses have been reactionary, greater epistemological innovation is opening up new ways for indigenous researchers to understand and interpret their social world. Recent efforts have even sought to apply indigenous frameworks to the lives and experiences of their colonisers. This paper outlines one such initiative and attempts to demonstrate how this may provide valuable insights for participants, indigenous researchers and the academy itself.

Keywords

Indigenous people, critical race, whiteness studies, colonisation, academic research, ethics.

Introduction

The western scientific tradition has, up until relatively recently, positioned indigenous peoples as oddities or exotic groups from which to draw information and later, as a group, with problems to fix or change. As problems, they have also been the focus, not only of inquiry, but also of policy and interventions from colonial powers and administrations imposed on them. Conducting research <u>about</u> indigenous people has had the effect of emphasising the exotic and different (and supposedly inferior) nature of the natives, justifying assimilation, theft of lands and resources, and the inherent inferiority of indigenous languages and culture (Adams 1977, Battists 2000, Moewaka Barnes 2008, Moreton-Robinson 2004, Said 1978, Smith 1999). It reinforces the, apparently, superior knowledge produced and framed by the dominant culture as universal truths, objectively sought and attained. Said (1978) describes the link between the creation of knowledge about the one-dimensional and fundamentally inferior 'other' to the implicit justifications for imperialist ambitions involving the domination and exploitation of indigenous societies.

Aotearoa, New Zealand, has been no exception and has a well-recorded history of the ways in which the creation of knowledge about the 'natives' has been an important tool in the colonial project (Pember Reeves 1899, Ward 1839). Some argue that research has, at best, been of no use to Māori and, at worst, actively disempowering (Cram 2001, Jackson 1996, Ramsden 2002, Smith 1999). Smith (1999, 1) notes that the word 'research' is "inextricably linked to European imperialism and colonisation", leaving Māori with a deep suspicion of research and the uses to which it has been put by diverse Pakeha authorities; a similar pattern to indigenous peoples internationally.

Māori have had a range of reactions to research conducted <u>about</u> and in their communities (Cram 2001, Rankine and McCreanor 2004, Stewart 1997), but the overwhelming response has been distress, dissent and despair at the inaccuracy and inadequacy of processes, findings and outcomes. Moewaka Barnes (2008, 42) points out that feminists and indigenous peoples have offered key critiques of western knowledge, its methods of production and its links to imperialism and marginalisation. Power imbalances between the researcher and the researched, fundamentally alien (and alienating) research practices and the separation of research practitioners from the production of research positioned as 'truth' have been central elements in these critiques. In a schema that seeks to position different types of research involving Māori and Māori responses to them, Moewaka Barnes outlines a continuum of experience from Māori as being solely researched 'on', to exemplars of partnership and mutual respect. Māori responses to the former have included compliance, resistance, rebellion and the internalised denigration of indigenous culture (Moewaka Barnes 2008, 141). Rather than seeing this as a rationale for Māori change, she argues for non-Māori development, in order to advance *their* practice when researching in Māori spaces, pointing to a mismatch between measured changes in practice, but few changes at broader conceptual and systemic levels.

The invitation to the research community to shift the focus of research from the marginal to the dominant signals an innovative opportunity that could produce far more accurate, grounded and applicable understandings of trenchant social issues.

In this paper, I firstly discuss the challenges and questions posed in shifting the power balance in health and social research. This is followed by an examination of the issues and implications of shifting the gaze in Māori-led projects, supported by two key examples of how these dynamics can play out in practice through ethics and assessment processes and paradigms.

Practical changes in the conduct of research projects involving Māori have arisen, in large part, from the increase of Māori people in the academy, as students and faculty members. Responding to criticisms around power relations and ethics, research endeavours have sought to position Māori as researchers, initially at least, in the lower echelons of the research process, often at the site of data collection, as interviewers, community liaisons, cultural consultants and translators. These arrangements frequently elicited exchanges between Māori researchers and Māori 'subjects' of research and often encompassed additional research practices, compared to conventional processes of health and social science. Foremost among these were establishing relationship/connectedness, fielding challenges about usefulness or safety of research, the relevance of research questions and what reciprocal obligations, if any, were appropriate with the researched community beyond the current project. While some of these shifts in the conceptualisation and conduct of research involving Māori have been dramatic in a practical sense, the mainstream academic members' perceptions of the inferiority, or even existence of Māori science, methodology and epistemology, remains largely unchanged (New Zealand Herald 2003).

The involvement of Māori as researchers in subordinate positions, while fulfilling the needs of mainstream research projects in, for example, facilitating recruitment of Māori participation, has, at times, created compromised spaces for the Māori researchers involved. This has led to more direct challenges *down* the research chain, in terms of greater input into the analyses and interpretation of research findings, and pathways of dissemination. Challenge and change *up* the research chain has been generally slower and more problematic for mainstream research and Māori-led and controlled projects

remain relatively scarce. For example, the Health Research Council of New Zealand, the country's largest health research funder, has an annual *indicative* allocation to Māori research of 10%, although actual allocation is closer to 3% (HRC annual reports 2006-2010).

Indigenous controlled research

Māori have responded to their place in the business of research in numerous ways. As outlined above, significant change has been achieved, in an operational sense, in the ways in which research about Māori is conducted. Symbiotic with the emergence of Māori at all levels of academic pursuits, and their gradual elevation into leadership roles in teaching and research, the critical mass of Māori academics and the importance of nurturing connections with customary practices of knowledge creation has acutely challenged the inherent legitimacy of non-Māori control of research involving Māori (Cram 2001, Moewaka Barnes 2008, Pihama, Cram and Walker 2002, Smith 1999). The growth of Māori ontologies, epistemologies and methodologies into western academic settings continue to impact significantly on what counts as knowledge and practice in our society.

Kaupapa Māori methodology (Bishop and Glynn 1999, Eketone 2008, Pihama 2001, Smith 1997, Smith 1999) developed from the academic field of education and was initially an important pedagogical tool. Its early and most prominent theorists asserted that Kaupapa Māori research (research using Kaupapa Māori methodological tools and practices) related to Māori identity, philosophy, language, culture and autonomy. Pihama (2001) expanded this frame when she posited that Kaupapa Māori research projects were essentially decolonising, insofar as they were inherently involved with power and the political positioning of Māori people and knowledge. There can be little doubt that the development of Kaupapa Māori methodology has had positive effects on the perception and outcomes of research activities in Māori communities. Through the emergence of multiple bodies of work and communities of practice, there have also been impacts in terms of increasing the Māori research workforce and creating more equitable and respectful relationships with non-Māori colleagues. In this sense, it has been instrumental in moving research practices and relationships towards the empowering end of Moewaka Barnes' schema (Moewaka Barnes 2008).

'Ghettoised' or 'romanticised' research

Research projects that indigenous people are leading and controlling can be categorised either as:

- research to reduce the disparities that indigenous communities experience, relative to wider populations (Ajwani et al. 2003, Robson and Harris 2007); or

- the research will be attempting to transform the indigenous experience and, thereby, uplift indigenous wellbeing, perhaps involving the reclamation of elements of 'traditional' culture (Durie 1994, 2004).

A central notion is that the framing of indigenous research in Aotearoa, New Zealand, is often phrased as 'by Māori for Māori'. Although this makes explicit the importance of reciprocity between indigenous communities and indigenous researchers, I argue that it may reinforce the notion that Māori-led research must, of necessity, centre on Māori participants in order to claim legitimacy within Kaupapa Māori and other Māori-centred domains. One critical effect of this dynamic is to focus the gaze of Māori researchers away from the non-indigenous sector, effectively hiding key determinants of outcomes for Māori.

It has also had the unexpected outcome of pigeonholing indigenous control of research as being only naturally legitimate to those projects largely or exclusively involving indigenous people. One notable exception has been the body of work around social and health disparities, for example "Hauora" (Pomare and De Boer 1988, Pomare, Keefe Ormsby and Ormsby 1995, Robson and Harris 2007), which has been monitoring, among other outcomes, mortality experiences between Māori and non-Māori New Zealanders since 1955 (Pomare et al. 1995). Hauora has reported these data within a Treaty of Waitangi[1] framework that emphasises health as being a protected entitlement in its own right, and affording Māori the same rights and privileges as other Crown subjects. In this instance, a Treaty framework allows the monitoring of Māori health outcomes relative to other New Zealanders, highlighting Crown failures to address determinants of health and meet its obligations to Māori as the indigenous people of New Zealand.

The changing nature of the gaze (from indigenous to dominant, rather than dominant to indigenous) has illuminated assumptions that exist in the academy about who will be doing the research, who will be the researched, who says the research is important or a waste of time, what processes are appropriate, what funding streams and other types of support are available and what difference such studies can make in the long term.

The academy generally seems enthusiastic and supportive of Māori research projects that keep Māori people and issues at the fore. This is the natural and accepted place for indigenous inquiry within the academy. It sits comfortably within the colonial paradigm of indigenous as different and inferior, and frequently charges leaders of Māori communities with the development of internal solutions, disengaged from wider contextual environments, such as the economic, cultural and social marginalisation, stemming from the fundamental racism of colonial practice. Adding to the comfort of the academy, Māori leadership and control of Māori research, while improving best practice for Māori communities engaged in research, nonetheless may effectively replace the surveillance and monitoring function that non-Māori research, up to that point, had conducted directly. In this sense, indigenous-controlled research is more likely to apply a Māori gaze to understanding and remedying Māori marginalisation, deprivation, difference and disproportionality than to apply the same level of scrutiny to Pakeha normative centrality and privilege.

For all the reasons above, Kaupapa Māori research that seeks to reduce disparities, by turning our gaze away from Māori disadvantage and focusing it on the non-indigenous members of society, is rarely considered as the locus of indigenous research.

Whāriki journey

The Whāriki Research Group began as a collection of Māori individuals, many from unconventional, academic backgrounds, contributing, in particular, to various evaluation projects involving Māori communities. As the number of Māori being recruited increased, it became prudent for these few individuals to form their own collective based on shared values, expertise and experiences as Māori. Whāriki's early direction was to improve engagement and practice for Māori communities involved in projects conducted by the Alcohol and Public Health Research Unit (APHRU) for the University of Auckland. Over time and with symbiotic commitment of both groups to the Treaty of Waitangi, a co-governance structure was developed. This relationship of governance and practice based

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[1] The Treaty of Waitangi is an agreement signed in 1840 between representatives of the Crown and Māori chiefs that outlines the protection of indigenous rights, resources and governance.

on the Treaty recognised that it was fundamentally relevant to both Māori and non-Māori. In an environment where Treaty rights and obligations are understood almost exclusively as 'Māori business', rather than a reciprocal relationship with rights and obligations on both sides, a governance structure that ensured a joint approach to meeting duties and obligations was critical to Whariki's epistemological journey and future.

Any sustained examination of the particular and comparative health and social outcomes for Māori communities inevitably involves greater consideration of a comprehensive range of contributing factors, from common ideas at the site of the individual, familial, cultural to more critical analyses of institutional, structural, historical and political factors. This approach to conceptualising research complemented the ideological push-back of the victim-blaming type of approaches common for explaining ethnic disparities at the time and better reflected Whāriki's vision for Māori research. In this sense, Whāriki was able to develop from a Māori research group firmly focused on a 'by Māori, for Māori, *with* Māori' framework to a research group using Māori paradigms of knowledge and methodology development to examine issues of relevance to the social justice of Māori and non-Māori.

A robust analysis examining the health and wellbeing promoting or demoting elements in social environments, as opposed to individual or cultural circumstances, has remained at the forefront of the group's political positioning and forms the first point of focus for conceptualising and developing research projects. The analysis of racism as a social determinant of health has become increasingly acute in international literature (Jones 2000, Jones 2010, Krieger 1990, Krieger 2003, Nazroo and Karlsen 2001, Williams 1999, Williams and Mohammed 2009). The positioning of indigenous people within wider movements that correlated racism with adverse outcomes has also steadily increased (Jones 1999, Paradies, Harris and Anderson 2008, Paradies and Williams 2008, Robertson 2005, Robson 2008).

Being practised at examining social environments has also meant that the Whāriki group members were well positioned to apply international learnings about racism (Jones 2006, Paradies 2006, Paradies and Williams 2008) to the New Zealand situation. The opportunity to explore racism, not only where it manifests as marginalisation and social exclusion, but its flip side, to conferred advantage, social inclusion, its links with critical race theorising and whiteness studies, also became highly relevant analyses. The particularity of privilege as being a specific outcome for 'settlers', vis-à-vis the indigenous population, was a hitherto under-explored area that we sought to examine (Moreton-Robinson 2008).

This examination was informed from earlier articulations by 'Pakeha' research participants across a range of studies that seemed to indicate distinct experiences of society (Huygens 2008, Nairn and McCreanor 1991, McCreanor and Nairn 2002, Wetherell and Potter 1992). These experiences often seemed at odds with all others in the data sets, both in terms of the discursive treatment, as well as their norms, practices and expectations of society. Findings from such projects broadly point to a set of normative, discursive resources and practices that articulate and manifest through a construct of societal, institutional, interpersonal and psychological pathways and reproduce powerfully pro-Pakeha understandings of all aspects of Māori/Pakeha relations (Moewaka Barnes et al. 2012).

We wanted to explore these experiences and the attainment of such an 'ideal status', and the personal- and population-level experiences that flow from it, by further applying our own world view to the issue. This was critical, firstly, as a means to give effect to the

Most forms of ethics invite applicants to consider how they will address concerns or requirements for particular groups. These groups usually represent 'others', in terms of power differentials between the researchers and the researched, and relating to a range of variables, including race and ethnicity, nationality and language proficiency, age and gender, and mental and physical capability. Considerations necessary to address potential risks are, unquestionably, useful for research projects involving them. The distinctiveness of these groups from the dominant 'norm' provides little clarity when the dominant norm is the focus of the research. There is no specific, dominant culture, safety section of ethics forms; the assumption being that the 'general' population information requirements serves as a proxy for dominant groups in relevant variables (for example, white, Pakeha, male, middle aged, able-bodied and English speaking), with no accounting required for their particularity.

When thinking about what information to provide to the committee, one might use an ethics request form with questions for 'other' groups and attempt to mirror those for a Pakeha population. Again, the shift of gaze is an important exercise. The ability to converse in English, knowledge of Pakeha customs and social groupings, connections with Pakeha cultural institutions (for example, Lions Clubs, Returned Services' Associations or Rotary Clubs), adequate processes of consultation, and connections to Pakeha cultural advisors and consultants should all be considered. This process of reflection on Pakeha cultural ethics has really highlighted how difficult those safety 'bottom lines' are to capture and how none of these considerations really address the cultural safety assurances that we want to fulfil, as an indigenous research group with the values that we have. Some of these safety concerns were addressed through the involvement of a largely bicultural team and sets of bicultural processes for analysing, writing and disseminating the data. In each instance, both the bicultural research team and its processes are organised as working under Māori authority. A shared culture of ongoing collaboration, inclusion and critique was fostered.

The final challenge that the project posed to conducting research involved the inter-relationship between being 'powerful', academic researchers and the status those positions hold in wider society, compared to the negative, social positioning attributed to being a Māori group; in a sense, researching where we should not. This is exacerbated by the range of reactions and responses from potential participants, from ambivalence and caution to anger and defensiveness of the topic area. For some, there was a level of surprise and possible discomfort with the terminology used in the project, such as 'privilege' or 'advantage', that was encountered in efforts to recruit participants in the initial stages of the project. Our decision to use the formal project title, "*Conferred privilege and structural advantage—the health implications*", on participant information sheets and consent forms was off-putting for some. The implied notion that potential participants were 'privileged' was so at odds with their sense of self, that explanations about the project's aims and the need for a diverse set of participants did little to assuage these fears. This general aversion to the idea that one is privileged is documented in literature (Kimmel 2010). That the project documents also clearly identified that a research group with a Māori name was controlling the study, which concerned some potential participants and drew unhelpful and racist comments targeted at members of the research team. While this is possibly a risk associated with researching group membership of dominant cultures and inequality more generally, for researchers working under the authority of indigenous control, the issue seemed to invoke specific racial overtones. In this sense, participation in the 'Privilege Project' itself could be seen to be interrupting the invisible nature of societal privilege and its underlying racial, ethnic and cultural nuances.

In the face of such reactions, the research team thought it prudent to adjust the title of the project to 'Health and Culture', which greatly enhanced recruitment and data collection.

Discussion

As a research approach for indigenous self-determination, shifting the conceptual gaze to include a focus on the advantaged can provide numerous benefits to the individuals, groups and institutions involved and provide a much-needed, discursive alternative for the general public about a range of important issues.

Moving from focusing solely on those experiencing a 'burden', by expanding a formal inquiry to include advantage across numerous social variables, centres analyses on structural, institutional and environmental factors that produce differential outcomes, rather than seek to blame or celebrate individual behaviour and personal circumstances. 'Victim-blaming' is further extrapolated by examples of individual success by minority group members, while collective oppression may remain unchanged, thereby enforcing the 'logic' that it is individuals, rather than systems and structures, that produce outcomes. In this sense, the approach of studying the dominant group is aligned intuitively with wider critical movements that place individual and collective experiences in an appropriate social, political and historical context.

At an institutional level, supporting efforts to broaden research enquiries can encourage a more embracing and inclusive academic environment. Opportunities to uncover new truths and develop complementary and conflicting perspectives may enhance innovation and diversity. Shifting the gaze invites the academy to genuinely acknowledge and move on from its role as a tool for imperialist interests and fulfil its role as the 'social conscience' of society.

There is much evidence that the 'standard story' of social life in Aotearoa (McCreanor 2012) draws upon deeply entrenched ideas and discourses that seek to blame the disadvantaged for their situation. These discourses are commonly entwined with historic and current representations of race and ethnic group membership, particularly of Māori, that reinforce national narratives about merit and worth. Shifting the gaze from disadvantage to advantage, and also drawing on national discourses about the racial and ethnic particularity of the advantaged, can open up a, hitherto under-explored, narrative to the social lexicon of New Zealand society. Our experience conducting research projects with dominant group members as participants and audience members in Aotearoa has illuminated that many dominant groups' members desire more nuanced and inclusive explanations, based on relevant information and evidence, as an alternative to entrenched discourses that place individuals outside of their context.

The research developments described in this paper have the potential to expand the application of Kaupapa Māori research. Māori modes of conducting research have seen a steady and sustained increase in formal, academic institutions. Application of these frameworks, however, tend to be towards projects that directly involve Māori people as participants or issues of direct relevance to Māori. Applying a Kaupapa Māori worldview to issues and phenomenon not directly related to Māori, or of immediate benefit to the Māori community, is a great challenge to the methodological development of indigenous frameworks in the academy. Research projects that shift the gaze of inquiry go some way to clarifying that challenge and inviting response.

Conclusion

The establishment and conduct of the Privilege Project follows a particular interest in the immediate environs of the academy and the clarity of its racial, ethnic and colonial positioning. However, it also critically engages with how those same structures have made the coupling of indigenous research with an explicit focus on the nature of indigenous 'difference' (in terms of addressing ethnic disparities or 'distinctiveness' relating to language and culture) itself, which sets limitations on the scope of the legitimate research interests of indigenous researchers.

If 'by Māori, for Māori' research is most naturally applied to those research questions of immediate and cultural interest to indigenous people, then we miss important opportunities to develop the epistemological framings, methodologies, tools and resulting analyses. These are implicit in the epistemological framings, such as Kaupapa Māori, but not often employed to understand, deconstruct and critique wider environmental structures and norms that frame the long term interests that indigenous people have to a more just society that better reflects their values and expertise.

This paper has sought to outline a particular context that has marginalised indigenous research activity, both within the explicit practices of 'by indigenous, for indigenous' research and within the wider academy. The conduct of the Privilege Project has shown, more clearly, the structural and discursive impediments to realising more fully the practical capabilities of indigenous, epistemological frameworks and concepts.

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Theorising the structural dynamics of ethnic privilege in Aotearoa: Unpacking "this breeze at my back" (Kimmell and Ferber 2003)

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Abstract

Colonial praxis has been imposed on the culture, epistemologies and praxis of indigenous Maori in Aotearoa, entrenching the settler cultural project that ensures the continuation of the colonial state, producing damaging disparities. This article theorises ways in which settler privilege works at multiple levels supporting settler interests, aspirations and sensibilities. In institutions, myriad mundane processes operate through commerce, law, media, education, health services, environment, religion and international relations constituting settler culture, values and norms. Among individuals, settler discursive/ideological frameworks are hegemonic, powerfully influencing interactions with Maori to produce outcomes that routinely suit settlers. In the internalised domain, there is a symbiotic sense of belonging, rightness, entitlement and confidence that the established social hierarchies will serve settler interests. This structure of privilege works together with overt and implicit acts of racism to reproduce a collective sense of superiority. It requires progressive de-mobilising together with anti-racism efforts to enable our society to move toward social justice.

Keywords

Theory, structural analysis, racism, privilege, social order.

Introduction

> The Maori people … want to have things both ways. They expect all the privileges of racial equality … but when some claim can be made for preferential treatment, they vigorously demand to be treated not as New Zealanders but as Maoris …" (*Observer*, 29 April, 1953 cited in Ballara, 1986, p117.)

In the context of the entrenched colonial society of New Zealand, this quote, from a newspaper editorial 60 years ago, is among myriad mundane expressions of the contempt with which the established social order has long judged Maori society and culture. Maori, the indigenous people of Aotearoa, are explicitly double-positioned as privileged through enjoying the same benefits as other citizens of colonial society, but also as having 'preferential treatment'. These notions of privilege reconstruct our history of injustice and colonisation, and fly in the face of most measurable indicators of Maori social standing and wellbeing (Robson and Harris 2007; Smith 2012; Walker 2004)

Such manoeuvres reflect the discursive component of what Billig (1995) has referred to as "banal nationalism", the practices and processes by which an illicit and unjust colonialism (Walker 2004; Smith 2012) has been imposed and maintained through all the instruments of

state upon the indigenous cultures of this land. Anti-Maori sentiment abounds throughout the written and oral public records from early contact to the most recent times (Ballara 1986; Colvin 2010) as a virulent contributor to a wider hegemonic discourse about relations between settlers and Maori (Reid and Cram 2005; Nairn et al 2006; Wetherell and Potter 1992; Moewaka Barnes et al 2012; Smith 2012; Walker 2004).

In this article, we offer a theoretical exploration of the concepts and discourses of privilege that have emerged iteratively from a study of the ways in which such conferred advantage is manifested in the field of population health in Aotearoa/New Zealand. The study has gathered data in multiple forms including policy documents, media reporting and individual interviews in the broad domain of health and wellbeing. While we do not draw directly upon these materials in our theorising of privilege, engagement with them has informed what we offer here.

Our position, somewhat contrary to entrenched 'common sense' in Aotearoa, is that it is accurate to describe the settler population (hereafter referred to by the Maori term, Pakeha) as privileged in this context. We suggest that a theoretical framework, similar to that applied to the structural analysis of racism, can be elaborated for what it is; a less obvious conceptualisation of privilege—at least for those who benefit. We are guided by the theorising of racism through structural analysis and its articulation as a social determinant of the health of marginalised population groups (CSDH 2007; Paradies et al 2008),although we extend the notion of privilege to patterns of systematic benefits, differentially distributed across social groupings. We argue that Pakeha privilege is more than the inverse of Maori marginalisation, but that it functions with racism against indigenous people, as a fundamental social determinant of health here and, with variations, in other developed colonial states. We see a multifaceted, multi-level phenomenon that operates to include, centre and rationalise settler ideologies, practices, agendas and the settler cultural norms at the expense of indigenous cultures, communities and peoples.

We begin by reviewing critical writings about racism and privilege, turn to offer a structural framing of Pakeha privilege and, finally, discuss implications for understandings of social determinants of health, health policy and practice in Aotearoa.

Background

Exploitation and oppression of social groups have become structured into human relations, and reactions of resistance, revolt and upheaval against established injustice have provided some of the defining moments in human history. Ethnicity, gender and class are, perhaps, the most obvious domains in which the effects of privilege on disparities in health and wellbeing are empirically established (CSDH 2007; Wilkinson and Pickett 2010). Social movements have taken up these concerns in an effort to rebut and change the established explanations and associated actions that reproduce inequality in society.

Academics have explicitly joined these debates about forms of injustice. Dorling (2010) summarises the understandings developed within social geography to argue that unequal outcomes, such as poverty, racism and oppression, are the result of deliberate, structured strategies. These are underwritten by discursive arguments in five key domains—elitism, exclusion, prejudice, greed and despair—that work to naturalise and legitimate inequalities.

Within social psychology, Reicher, Spears and Haslam's (2010) critique of Allport's 'perceptual paradigm' of prejudice and the related 'contact hypothesis' approach to improving race relations is congruent with Dorling's position. Rather than being located in the characteristics and behaviours of individuals, Reicher et al argue that prejudice should be understood as a rich representational practice that is mobilised by leaders and institutions such as media. Racism does not arise through personal ignorance or error, but through the motivated social action of those whose interests it serves. Reicher et al conclude that its elimination will not come from education or contact alone, but from struggle; struggle to undercut racist discourses and practices, and to mobilise anti-racist alternatives.

From empirical studies in the economic domain of mechanisms of intergenerational transmission of wealth in the United States of America (US), Bowles and Gintis (2002) argue that cognitive and personality traits are insignificant in accounting for the established patterns that see the offspring of wealthy families enjoy economic success. Rather, they conclude that "wealth, race and schooling are important to the inheritance of economic status, but IQ is not a major contributor" (p. 22)

These generalised approaches to racism as a determinant of life outcomes is elaborated by Krieger (2003), who describes an ecosocial model of five pathways of embodiment through which racism produces health disparity: Economic and deprivation, harmful exposures hazardous conditions and toxic substances, socially inflicted trauma, targeted marketing of harmful products and inadequate or degrading access to healthcare. To these, she has critically added an historical factor: The impacts of colonisation on the health of Indigenous peoples (Krieger 2011), particularly via the loss and degradation of traditional lands.

The clear inclusion of racism among the social determinants of health by the World Health Organization, Commission on the Social Determinants of Health (CSDH 2008), together with the theorising considered above, represents a sea-change in thinking about issues of justice and oppression. Such thinking challenges the entrenched notion that the fairness of society is guaranteed by its democratic, meritocratic ideology, and asserts that alternative philosophical and theoretical underpinnings are necessary and desirable (Battiste 2000; Robinson 2004; Smith 2012).

The study of racism has noted interlocking and reciprocal relationships among societal, institutional and personal domains (Jones 2000). Paradies et al (2008) outline four dimensions:

- Societal—values, culture and sensibilities of one culture are imposed on another.
- Institutional—practices, policies and processes maintain avoidable inequalities across ethnic groups.
- Interpersonal—interactions between people reproduce inequalities.
- Internalised—attitudes, beliefs or ideologies are held by marginalised groups about their own inferiority.

This composite structures the life experiences of target group members (Ziersch et al 2011) in ways that accumulated over lifetimes and aggregated within marginalised populations, the sum of entrenched disparities.

Societal racism enacts marginalisation and produces stressful events that lead to direct harms of exclusion, psychological distress and physiological stresses affecting mental health. Institutional racism contributes to lower socio-economic status and poorer living conditions in which poverty, crime and violence are persistent stressors. Interpersonal racism stresses individuals and undermines their sense

of self-worth and value to society. Internalised racism evokes negative imagery, denigrates individual self-worth and damages social and psychological efficacy.

Colonisation and privilege

Bolstered by social and scientific theories of racial superiority (Goldberg 1993; Lorimer 1978), European colonisation of the lands of Indigenous peoples has routinely presumed its right to acquire the intellectual, human and resource capital (Said 1978; Smith 2012; Denzin et al 2008; Collins 2010) of such nations. One outcome has been that Indigenous populations within colonial states have been marginalised in power structures and economic development, with consequent sustained population-level disadvantage and disparities in key life domains (Battiste 2000; Denzin et al 2008; Robinson 2004). Notions of natural justice and other supposedly humanitarian ideologies of colonial societies mean that explanation is called for, accountability is required and transformation is indicated as being fundamental to achieving social equity and the elimination of disparities in health and wellbeing.

Data from Aotearoa show that health disparities between Maori and non-Maori/non Pacific persist when class and gender are controlled (Robson and Harris 2007; Robson 2008). Wilkinson and Pickett (2010) have pointed out that New Zealand is one of the most unequal societies in the Organization for Economic Cooperation and Development (OECD) and that health inequalities flow directly from this characteristic. As international comparisons demonstrate, high inequality correlates strongly with poorer outcomes across the social strata (Wilkinson and Pickett 2010) and, in the case of Aotearoa, the inequalities were laid down and are maintained by the colonial processes of marginalisation and exclusion of Maori (Smith 2012; Walker 2004).

Privilege and public health

Racism, as a key determinant of social outcomes, has helped to focus research and policy attention on sources of preventable damage wrought upon Indigenous and minority populations. However, the theorising and investigation of privilege is neglected and under-researched. As Paradies et al (2008) note, "the phenomenon of oppression is also intrinsically linked to that of privilege. In addition to disadvantaging minority racial groups in society, racism also results in groups (such as Whites) being privileged and accruing social power."

The dominant culture remains largely invisible and whiteness is "relatively uncharted territory" (Moreton-Robinson (2005, 79). Not only does this impact on the way people experience privilege and disadvantage, but the benefits accrue over generations. As Collins (2010) queries:

Were your fathers, uncles and grandfathers really more capable than mine or can their accomplishments be explained in part by the racism [that] members of my family experienced? Did your mothers stand silently by and watch all this happen? More importantly, how have they passed on the benefits of their whiteness to you? (p. 390)

Kimmell and Ferber (2003) characterise ethnic, gender and class privilege as powering a warm tailwind that propels the advantaged through life. Describing a number of dimensions of these invisible forces they assert that, "our task is to begin to make visible the privilege that accompanies and conceals that invisibility" (p. 6).

Turning our gaze from the marginalisation and exclusion that produces ill-health, privilege may be conceptualised as contributing to good health and wellbeing. For example, it is likely to contribute to the social gradient (Marmot and Wilkinson 2001) of a society and to the broad inequalities that are now widely recognised as being crucial social determinants of health (Wilkinson and Pickett 2010).

In Aotearoa, disparities between Indigenous Maori and settler Pakeha populations, which have been monitored for several decades (Robson et al 2007), can be used to demonstrate the effects of intergenerational privilege for the Pakeha population. Disparity discourses can be inverted to describe how Pakeha, as a group, continue to show higher rates of positive outcomes in education, employment, income and health. Pakeha are under-represented in negative data across most domains, including poverty and hardship, housing, contact with the justice system, and self-reported discrimination (Robson and Harris 2007). Pakeha levels of unemployment are a third of those for Maori, and the youth unemployment rate was half that of Maori (Ministry of Social Development 2007). Pakeha are less likely to be in the lowest quintile of household incomes and twice as likely to be in the highest quintile. Pakeha children are far less likely to live in poverty or in households on 'benefits'. Significantly fewer Pakeha families are living in severe hardship than those of Maori and Pacific Island people. Pakeha are more likely to own their home and less likely to be living in crowded housing or deprived areas (Robson and Harris 2007).

Non-Maori, age-standardised rates are significantly lower than those of Maori for most health indicators, including cardiovascular disease, cancer, respiratory disease, infant mortality, diabetes and suicide. Significant differences exist between non-Maori and Maori in mortality, morbidity and independent living. Life expectancy disparities range from 7.9 years for non-Maori/non-Pacific females and 8.6 years for non-Maori/non-Pacific males compared to their Maori counterparts (Statistics New Zealand 2008). Non-Maori report that they are less likely to experience racism in many areas, including work or job applications, renting or buying property, and health services (Harris et al 2006).

The differences arise primarily from life-course exposure to affirming conditions in the form of higher incomes, educational achievement, good housing, healthy diets, active lifestyles and better access to quality healthcare (Crengle et al 2005). These material conditions are, in turn, produced through a complex set of social determinants that produce inclusion by centring Pakeha culture and practices (Nairn et al 2006). Among social determinants, privilege is becoming increasingly acknowledged in how we understand population differentials and wider societal inequity (Paradies and Williams 2008).

Privilege discourse

Established discursive patterns apply commonplace notions of privilege to individuals and groups who are already marginalised. Studies (Borell et al 2009; Wetherell and Potter 1992) have deconstructed this phenomenon in which arrangements made to mitigate inequalities are described as privileged, unfair and racist. For example, designated seats in representative bodies, specific resource allocations (such as fishing quota), grievance settlements and budgetary support for growing Maori institutions are all targets for attack (Moewaka Barnes et al 2012). Other more superficial arrangements, such as Maori sports teams, educational affirmative action and Maori protocols in public life, are similarly criticised. An illustration of mobilisation (Reicher et al 2010) of this pattern is drawn from mass media items in Aotearoa:

A lot of benefits are specifically focused on Maori, such as education grants, loans and the Maori All Blacks. If you had a Pakeha All Black team people would be hitting the roof. (New Zealand Herald 2004)

In both public and private discourse, including politicians' speeches, newspaper items, magazine articles, historical texts, research interviews, talkback radio, informal interactions and internet sites, a 'privilege' trope is used to question the legitimacy of such arrangements and to argue for their removal. Rarely heard is the contextual information that the criticised arrangements have arisen either to confer advantage to the settler majority or to mitigate harms caused by the imposition of white ideologies and practices upon Maori via the supposedly culturally neutral, colour-blind workings of society (Moewaka Barnes et al 2012). The key effect of this discursive strategy is to create a classic 'elephant on the sofa' scenario in which, despite the obviousness of the phenomenon to the critical observer, the everyday realities of Pakeha advantage are effectively obscured to the unwilling or non-reflexive.

Theorising privilege

Despite the obvious linkage of racism and privilege, there is a growing interest in treating them, for research purposes, as phenomena in their own right. The rise of studies of whiteness (Moreton-Robinson 2005; Jensen 2005) and settler culture in Aotearoa (Bell 2004; Huygens 2008; Tuffin 2008; Wetherell and Potter 1992; Spoonley et al 2004) is evidence of the value of this distinction. A sense of the form and impact of such cultural capital can be derived from the structural analysis of whiteness produced by Peggy McIntosh (1990), who developed some 50 brief statements about everyday experiences to describe her own social position. Discursive studies have focussed on patterning in the talk of Pakeha people as a means of understanding cultural inclusion (Bell 2004; Huygens 2008), belonging and identity (Campbell 2005) alongside the ways in which such discourses serve to exclude and marginalise. Borell et al (2009) reported that key informant understandings of privilege revolved around the notion that privilege is multi-layered, invisible (to those that benefit) and closely related to class and culture.

We argue that privilege—the systematic accrual of advantage by a social or ethnic group—is amenable to the types of structural analysis that are applied to racism as discussed above. Such an analysis includes the characteristics of the dimensions of power in play at each level (societal, institutional, interpersonal and internalised) as being important influences on population level disparities in health and wellbeing. We will discuss each level and suggest how the structural dimensions of privilege may impact on health.

Societal privilege

The broad social mores of nations flow recursively through common sense to constitute what Bourdieu (1986) might have called the habitus—the myriad naturalised actions, practices, roles and norms that people enact in mundane social life—of the Pakeha cultural project (Huygens 2008). This latter enterprise is constituted in the patterned social transactions, especially in the dominant discourses, that facilitate and enact Pakeha understandings of the relationships, power dynamics, meanings and material outcomes in everyday experiences, collective identities and the cultural life of the nation.

Societal privilege entails the imposition of the values, epistemologies and sensibilities of settler culture upon that of Maori in ways that assume superiority and rights of domination in all spheres. Social life, with its prescriptive norms and practices, is produced and consumed through the lens of the Pakeha

cultural project, seamlessly remaking history, current social orders and futures in an unwaveringly colonial gaze (Spurr 1993).

As a scion of Western thought and practice, Pakeha worldviews, ideologies, norms and practices cohere to the notion of the meritocratic, self-determining sovereign and individual. The colonial ideology of majoritarian democracy—what Henry and Tator (2002) have called "democratic racism"—underpins resistance to social change at all levels, maintaining social inequality. In health, this is reflected in the persistence of the disparities outlined above and the seemingly unattainable character of health equity (CSDH 2007), across almost every domain (Robson and Harris 2007).

Discourse, as articulated in politics, media, everyday debate and conversation, is fundamental to Pakeha culture, which is constantly articulating its achievements, anxieties, challenges and successes. Resurfacing privilege can be achieved through exploring statements of the kind that McIntosh (1990) developed:

- How fair and ethical is the society you live in?
- How well does your democratic system work to produce equitable outcomes for all citizens?
- How is your culture treated in stories of national life?

While most Pakeha are likely to argue positively on such points, many may acknowledge that there are many unresolved issues around Maori. Such self-critique is widely discounted by claims that Maori enjoy multiple initiatives, ensuring inclusion and access to resources, that they are on a positive trajectory in relation to equity and the country has done comparatively well. These features work synergistically to produce social, cultural, economic and religious environments that reproduce a sense of rights, expectations and diverse functional practices for those enculturated to, and comfortable with, such flows of power and resources.

There is a broad understanding within the Pakeha polity, reflected in dominant discourse, common sense and public opinion, that, while the detail may change through social movements, political evolution and bureaucratic reform, this fundamental structuring is a public good that produces just, healthy and sustainable social orders. Such arrangements are mundanely policed by popular adherence and institutional praxis, and are maintained by their own momentum: Ultimately, they are backed by force to maintain a unitary national sovereignty.

Institutional privilege

Societal, interpersonal and personal discourses, ideologies and practices of the Pakeha cultural project have become sedimented into institutions that were, themselves, imported wholesale from nineteenth century England (King 2003) and developed locally to meet the evolving needs of colony and state. The myriad mundane actions that are utilised in the conduct of relationships between citizens and state, in domains such as commerce, law, media, education, health services, environment, religion, international issues and so on, are profoundly and inescapably shaped by, and constitutive of, Pakeha culture. Maori values, practices and aspirations are, at best, minor chords in this symphony and most commonly patronised, ignored or obliterated. We suggest some questions that could be expected to promote debates around Pakeha experience:

- How does ethnicity impact on the way your judicial system deals with citizens?
- How impartial are your financial service systems in respect of ethnicity?

- How well does your education system meet the needs of all ethnic groups?

While there are some concessions to Maori praxis within Pakeha institutions, these are begrudging and often tokenistic, failing to reflect a broad Maori cultural project or produce changes to Pakeha society that shift ethnic relations in the direction of social equity. To paraphrase Paradies et al (2008), institutional privilege is constituted in requirements, conditions, practices, policies or processes that maintain and reproduce avoidable and unfair advantages to particular ethnic/cultural groups.

There is a comfortable congruence among Pakeha institutions that ensures their maintenance even when their orientations, objectives and goals may, at operational levels, be seriously conflicted. This coherence helps to maintain the sense of unity, commonwealth and national identity that is integral to the reproduction of social orders. Maori institutions are likely to be perceived by Pakeha as special and different. Negative perceptions may frame them as improper, illegitimate and irrelevant. Both sets of characteristics cast Maori institutions as marginal to everyday 'public' systems. In both routine and extraordinary interactions with the institutions of society, Pakeha experience the reassurance (and absence of anxiety) of familiar praxis and alignment with the objectives, processes and outcomes of institutional operations. Whatever their effectiveness, there is an overwhelming sense that these institutions are the natural way to serve the needs of society.

Interpersonal privilege

At the social level, privilege takes material form in the ways relationships between empowered and marginalised individuals and groups play out. Norms and practices are heavily entrenched and the interlocking nature of coloniser and colonised in a dialectic whole (Said 1978; Smith 2012) means interactions between Maori and Pakeha take on a certain stable, scripted formats. In the context of Pakeha power and dominance, this overwhelmingly favours outcomes that suit Pakeha. Underpinning such interactions is a certainty that Pakeha knowledge, processes and practices are valid, normal and naturally superior to those of Maori; in the event of conflict, Pakeha institutions will support and ultimately enforce this status quo. For example, Pakeha epistemological traditions, particularly the realm of Western science, are held to be pre-eminent and universal. Thus, recourse to particular types of scientific accounting is regarded as a 'winning argument' that will brook no debate, except in its own terms. Similar arguments apply in most domains, so interactions in law, political representation, employment, media, arts, sports and so on are all inflected with Pakeha meaning and practice. Such subjectivities may be surfaced by these questions:

- How conscious are you of your ethnicity or culture in social interactions?
- How fairly does your employer treat people of your ethnicity?
- How welcome and 'normal' do you feel in everyday public settings?

As with any social interaction in any sphere, there are complexities, contradictions and counter-examples that leave such analyses fragile and awkward when applied to everyday situations. In aggregate and in the presence of the entrenched patterns of Maori/Pakeha relations, there is, however, a naturalisation of Pakeha practice in this domain. Again building on Paradies et al (2008), we characterise interpersonal privilege as being constituted in interactions between people that maintain and reproduce avoidable and unfair advantages across ethnic/cultural groups.

Societal and institutional privilege underpins the Pakeha cultural capital available to social interaction through protective family, social and community networks of power, and access to resources. Each

person's connections are a conduit for the exchange and accrual of this cultural capital in the mundane practices of social life.

Interpersonal and 'within-group' hierarchies of power and influence exist, but advantages to Pakeha persist as measureable outcomes in domains such as wealth, health, education and justice. Individuals may fail, or rebel (and still 'pass'), but, at the population level, these effects aggregate to ensure that social and economic statuses are progressively enhanced for the privileged groups.

Internalised privilege

Pakeha take on board and incorporate into their identities political analysis and cultural perspectives that justify, enable and embody differential resource distribution and use. This is reflected in a symbiotic sense of belonging, rights, comfort and entitlement and in the confidence that established social hierarchies will serve their interests. Their active understanding of this, however, is likely to be at the level of a 'cultural unconsciousness', a sedimented set of norms, beliefs, discourses and practices that, together with overt, implicit and unconscious racism, mundanely reproduce a sense of superiority over Maori.

- How often do you question your sense of identity and self-worth?
- How much do your achievements depend on ethnicity and culture?
- How freely can you choose your life goals?

Internalised effects generated via the social processes suggested above converge with an inherited sense of self-worth that promotes and builds social and psychological agency and efficacy. An upshot of this is that there is little energy for concern over the life experiences of out-group members, since, if they are competent, they ought to be able to provide for themselves in an idealised egalitarian society.

The Pakeha individual is 'empowered' within a framework that produces both standards of achievement and justifiable outcomes in a self-fulfilling prophecy; the belief that personal, meritocratic advancement is a paramount goal of inherent social value. Internalised privilege entails the acceptance and adoption of discourses, beliefs or ideologies by members of privileged ethnic/racial groups about the value of one's own ethnic/racial group (Paradies et al 2008).

Discussion

We argue that there are potential gains from the naming and defining of privilege as a social determinant of population health and wellbeing, and that it is the turn to focus on privilege, as well as racism, in structural analysis. Challenging the hegemonic gaze, we see relevance in a number of domains of social life in Aotearoa, including policy, equity monitoring, beliefs/values, and identities.

Determinants of social and health inequity

Privilege structures, interwoven with those of racism, maintain inequalities and disparities between Maori and Pakeha. In health domains, colonial mechanisms, through the enactment of Pakeha cultural values, the norms and expectations of providers and clinicians, and the health beliefs and practices of those using such services, inequitably serve the needs and preferences of Pakeha and, thereby, contribute to health inequity (CSDH 2007; Krieger 2011).

As Dorling (2010) argued, the links between power and outcomes are relatively easy to understand; the challenges are around adjustments to the expression of power through inequitable structures, policies and the discourses that support them. Reicher's (2010) insight that prejudice is always mobilised might be reworked to say that privilege is not mobilised or 'forgotten', as suggested by Billig (1995). The task for those working for equity could be extended to include actions and discourses that articulate and critique the hidden hegemonies of privilege.

Giving up power and privilege for altruistic reasons is an unlikely aspiration for empowered groups (Ramsden and Spoonley 1993). However, as Wilkinson and Pickett (2010) pointed out, large social gradients are bad for everyone in a society, including the most privileged. For many Pakeha, collective identity is tightly fused with notions of equity; a 'fair go' for all is a strong value. Addressing Pakeha privilege highlights how precarious notions of fairness are for Maori and challenges the assumption that their benefits are universally accessible. Questioning such values can go some way to preparing Pakeha for a more open dialogue with Maori aspirations for self-determination. We hope that our theoretical framing of privilege in this way will contribute to better understandings of why collective work on reducing social gradients is critical to aspirations for social and health equity.

Structural analysis of Pakeha cultural beliefs/values

Structural analysis of racism has long been an important tool for Treaty of Waitangi education enterprises (Huygens 2008), but the additional focus on privilege may sharpen Pakeha learning experiences in this domain. Such analyses can help to shift focus from personal guilt reactions and defensiveness to a realisation that the privileged are also part of a racialised environment that discounts their humanity. Articulating the social positioning of Pakeha allows a more inclusive and nuanced sense of their ethnic identity and collective responsibilities for achieving social equity. We argue that collaborative and negotiated movements towards eliminating injustices brought about by colonial oppression require negotiated commitment by both the coloniser and the colonised (Freire 1970; Smith 2012). This perspective is strengthened in the work of Wilkinson and Pickett (2010), which demonstrates that countries such as the US, the United Kingdom and New Zealand, where social inequalities are extreme, have much worse health outcomes for all social classes than do countries including Japan, Sweden and Demark where inequalities are not as extreme.

Pakeha identity work

Through re-centring the analysis of health inequity as being a collective challenge for society, there is an impetus to promote and legitimise a more robust cultural identity for Pakeha people, as distinct from the current 'default to the West'. There is emerging evidence (Huygens 2008) that Pakeha feel a certain 'hollowness', most obvious in the appropriation of Maori icons to express distinctive identity (Fleras and Spoonley 1999). Addressing Pakeha privilege can highlight the Pakeha cultural project in ways that will enable it to contribute more effectively to the constructive development of Pakeha identities.

Having accurate and specific information that monitors society's performance for all groups is a basic right that has long been argued as being necessary to inform judgements, norms and practices about justice and equity. The invisibility of the dominant culture means that information about the cultural specificities of that group is consistently obscured from view. For example, questions that we developed to illustrate personal proximity to indicators of privilege in this country have been informally shown to demarcate major differences between Maori and Pakeha. They could become a

complementary tool to broaden and strengthen research that links racism and health (Crengle et al 2005; Harris et al 2006).

Policy frameworks

Finally, and critically, there are significant implications for policy settings that underpin social order. Te Tiriti o Waitangi, as the foundational document of the nation, encodes equity as being fundamental to the enactment of Maori rights and to good governance. Too often, in Pakeha common sense, Te Tiriti is framed solely as a Maori concern of negligible relevance to Pakeha (Moewaka Barnes et al 2012). The theorising of privilege that is suggested here challenges this view by putting the coloniser firmly in the frame of social equity. The articulation of Pakeha privilege with racism helps to foreground this. In the policy arena, such work helps to dispel hegemonic notions, such as the 'level playing-field', and offers constructive pathways toward policy changes through which health and social equity might be achieved.

Conclusion

We have described a series of conceptual elements of privilege that work synergistically with personal and collective identity. Pakeha norms, values, behavioural practices and naturalised expectations about rights, roles and rewards for group members are fundamentally promoting belonging, health and wellbeing. We do not mean to suggest that these should be seen as meaningfully separable in practical everyday terms, but feel that teasing them apart, as we have, can contribute at a conceptual level to a poorly understood, but critically important aspect of the structure of inequality. Nor do we contend that personal Pakeha dissent is futile; it exists (Huygens 2008; Walker 2004) and contributes valuable critique and resistance. However, more generally, the impetus for radical change of the kind that may produce just relations between Indigenous and settler people remains weak and compromised by the continual pay-offs of normalised population-level ascribed privilege.

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