Tihei Mauri Ora!

It is my great pleasure to write my first Editorial for the Journal of Indigenous Wellbeing, Te Mauri – Pimatisiwin. In doing so, I want to firstly pay homage to my very good friend Dr Patti LaBoucane-Benson and her husband Dr Allen Benson; Patti has been, of course, instrumental to the Journal’s progress in recent history, and the Bensons were also our whānau in Canada during my family’s time in Edmonton, Alberta from 2012-2016.

My return to Aotearoa/New Zealand from Canada last year heralded a return to my historical roots in many ways, but also new beginnings have sprung forth from this return. I relay this because this Issue falls within the time that the Māori world, at least, is celebrating Matariki; the New Year; a time to reflect on the past, think of the present, and plan for the future.

For me, Editorials are less about relaying current trends and more about thought provocation, thus, I ask the readership for some latitude! That is, I will use this editorial as the opportunity to be less empirical and more philosophical. When we speak of Indigenous wellbeing and the past, it is difficult not to refer to the devastation and inhumanity of colonisation. The fact is that colonisation wrought and continues to wreak havoc on Indigenous peoples’ lives and epistemologies. We don’t actually know accurate figures, but some estimates suggest that from contact to the 1900s up to 90% of the Māori population, for instance, perished. With this kind of devastation, the task for most, if not all, Indigenous people since has been to reclaim their humanity.

This is not a history we necessarily want to recall, yet it is similarly one we cannot suppress in relation to Indigenous wellbeing for if colonisation did anything it made Indigenous peoples unwell through the confinement of the Indigenous body, the subjugation of Indigenous political resistance, and the obliteration of Indigenous ways of knowing. For Māori, this goes back to one of the most significant Acts in my mind, in terms of wellbeing, the 1907 Tohunga Suppression Act, which banned the practices of tohunga. The preamble to the Act states,

Whereas designing persons, commonly known as tohungas practise on the superstition and credulity of the Māori people by pretending to possess supernatural powers in the treatment and cure of disease, the foretelling of future events, and otherwise, and thereby induce the Māoris to neglect their proper occupations and gather into meetings where their substance is consumed and their minds are unsettled, to the injury of themselves and to the evil example of the Māori people generally...

The Crown realised that tohunga were able to retain pre-colonial metaphysical belief systems through practices, ritual and systems of knowledge transferal that set them beyond the imperial scope of the colonising machine. Tohunga were of course also leaders of great metaphysical mana and, therefore, threatened the Crown’s desire to either have Māori die off or to produce brown citizens.
This leads me to the present, which is obviously related to the history of colonisation. Whilst the past is a place for recalling, retelling and reconstructing if necessary, the present is like no other place for it eludes the imagination of the past, and elides the dreaming of the future. It, thus, must be a place of either complacency or questioning. Questions that I presently think about in relation to Indigenous health and wellbeing include; if it weren’t for colonisation, would there be a need for a Journal of Indigenous Wellbeing? Would ‘Indigenous Health’ even be a category? The fact of the matter is that although Indigenous peoples themselves have made great strides in righting the wrongs of colonisation, and Journals like this one are a testament to that, the current discourses surrounding Indigenous health are very much focused on an apolitical and ahistorical altruism which enables the forgetting of the history that prepared for the manifestation of the Indigenous ‘health statistic’ in the first place. The skewed or hyper focus on health that we currently have is unfortunately a manifestation of the pathologising of Indigenous peoples through medical discourses.

Let’s be real: The present and never-ending statistics surrounding the health of the Indigenous body that serve to shame Indigenous peoples have a genealogy, which reasserts over-and-over-again that Indigenous peoples are a ‘problem’. As the French philosopher Michel Foucault constantly reminds us, such pathologising functions not to oppress, but rather to produce. Health research thus is the most prominent of all research fields focused on Māori, and produced by both Māori and non-Māori scholars. Through my research I have come to realise that the very framework of ‘Indigenous health’ is a multimillion dollar business in Aotearoa/New Zealand, at least, and serves to pathologise Indigenous peoples. That is the ‘health complex’ in Aotearoa/New Zealand has pathologised Māori to justify multimillion dollar budgets yet, as the statistics continue to demonstrate, has failed for over 150 years to actually elevate Māori health to that of non-Māori. So, in this present I question why health, why wellbeing as the health complex currently conceives of them?

Lastly, the future; for me the future is merely a manifestation of how we perceive the present or rather what we see as lacking in the present. In today’s society, generally I perceive that health, wellbeing, leisure and lifestyle have become increasingly about preparing and working the body to be a healthy citizen fit for work and consumption. Under these conditions citizens are urged, compelled to willingly engage in behaviours that avoid an unhealthy body; some foods are conceived of as dangerous; life is determined as something to be prolonged. Leisure and food become less about enjoyment and pleasure, and more conceived of as a love of labour, whilst life is conceived of as the avoidance of death.

For me, this relates to an idea I have been playing with, ‘dis-ease’; firstly, let’s unpack the idea of ‘disease’ by separating the prefix ‘dis’ from the core word ‘ease’; ‘dis’ as a prefix has a negative relationship with ‘ease’, and so the etymology of ‘disease’ would suggest a state of being without ease, comfort or contentment. Certainly, as we currently employ ‘disease’ to generally refer to ‘illness’ then if life has become the avoidance of death, then how at ease are we? That is, how can we enjoy life if the spectre of death is what underpins ‘health’?

The project, the future, thus is possibly to not avoid dis-ease but to seek ease; to reject the desire to be healthy in western scientific terms (i.e., to avoid death by avoiding illness), and rather to seek contentedness beyond colonial confines. Within this framework of dreaming of the future by rejecting the discourses produced by the past and promulgated in the present, we might begin to think of a ‘critical Indigenous wellbeing’ as a broader desire for Indigenous health sovereignty, where Indigenous health sovereignty moves beyond disease and towards ease.

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