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Developing Psychologies: An ethical necessity

na Marewa Glover Te Whare Wananga o Waikato Department of Psychology

Tena koutou katoa. Ko Puketi te maunga. Ko Hokianga te awa. Ko Ngapuhi toku iwi. Ko Ngatokimatawhaorua toku waka. Ko Marewa Glover toku ingoa.

I am a Masters student at Te Whare Wananga o Waikato where I am also undertaking the Community Psychology Diploma. I am currently writing my thesis on Maori women's experience of male- partner violence, using case studies.

Previous research I have undertaken included an evaluation of the implementation of parallel development in the Te Awamutu Women's Refuge Collective, of which I am a member. Parallel development is a policy designed to allow Maori, and women of other cultures, to develop Refuge services appropriate to their needs. It is effectively a partnership between Maori and non-Maori women in Refuge.

The Hamilton Abuse Intervention Pilot Project which I have also had some involvement with, is likewise pursuing a parallel development model, where Maori work with Maori, non-Maori with non-Maori. Hence this paper entitled Developing Psychologies: An ethical necessity.

Despite a growing acknowledgement of cultural and subcultural differences world-wide psychology in New Zealand is still mono- cultural in its teaching content, methods and work practices. In the last year I have heard repeatedly, that you can count the number of fully qualified Maori psychologist on two hands.

Slowly there will be more of us, and we will, slowly, develop kaupapa Maori psychology, but in the meantime Maori users of psychology, be they students, clients or communities requiring research assistance, are still being served by predominantly non-Maori professionals.

At the moment Maori are diagnosed and treated in a non-Maori way. They are the subjects of research done in a non-Maori way. And I put it to you that if your work with Maori is done in a non-Maori way, then it is done in a way that is culturally inappropriate. And to continue working with Maori in a non-Maori way is to continue the process of colonisation. A process that has had devastating psychological outcomes for Maori, and it is a process that is ongoing for us.

Given the negative effects of colonising practices on Maori, can psychology practitioners ethically continue to work in a way that perpetuates damage? Our Code of Ethics says we can't.

Particularly I would like to highlight clauses 1.5, 2.1 and 2.2.

1.5 says this:

Psychologists are sensitive to cultural and social diversity. They recognise that there are differences among people, such as those that may be related to age, sex, or socioeconomic and ethnic backgrounds and, when necessary, they obtain training, experience or advice to ensure competent service or research relating to such persons.

2.1 says:

Psychologists recognise the boundaries of their own competence and provide only services for which they are qualified by training and experience. They refer matters outside their areas of competence to appropriately qualified persons. and 2.2:

Psychologists who are practitioners select the most effective intervention under the particular circumstance and with full regard to all known undesirable side-effects.

An initial objection to my argument could be, and often is, that Maori are not different. They went to the same schools, eat the same food, speak the same language - we are all the same now. Psychologists, according to Clause 1.5 won't raise this objection because "they recognise that there are differences among people."

Assuming they do recognise such differences, then before working with Maori they will "obtain training, experience or advice to ensure competent service or research relating to such persons." Where from? Appropriate training is virtually non-existent in Pakeha institutions and lucky you if you have access to tribal sources.

Assuming the psychologist has not accessed such sources. Does he or she subsequently decide that they have reached "the boundaries of their own competence" as per the requirements of clause 2.1? Do they then "refer matters" on to "appropriately qualified persons?" And who are those qualified persons?

Or, do they conclude that under the "particular circumstances" at hand they will use "the most effective intervention" regardless of "all known undesirable side-effects." Maybe loss of identity, spiritual deprivation and the many other ill-effects of colonisation are not "known undesirable side-effects"?

Finally what are the ethics of turning away people, when you, rightly or wrongly, perceive that there is nowhere else for them to go?

I would like to conclude by saying that it is my wish that we as a discipline examine more closely our role in the ongoing process of colonisation of Maori - and I hope that we will in the future look at ways we can work to protect and preserve our and other indigenous cultures.

Engari, Kia manaakitanga, with respect I say, Tena Koutou, tena koutou, tena koutou katoa. Thank you.

References

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