

Positive and Negative Behaviours of Independent, Adolescent Youth Participating in a Community Support Programme

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In New Zealand, adolescents between 16 and 18 years of age, who are unable to live with parents because of family dysfunction or conflict, are eligible for the Independent Youth Benefit. In attempting to reduce benefit dependency in these young people, the Department of Social Welfare has designed an innovative community support programme. We have previously evaluated the programme, concluding that the approach was successful for some, but emphasising that little is known about the emotional and lifestyle needs of such adolescents.

To explore these further, a questionnaire was administered and 235 usable forms were returned. The responses, reported in this paper, revealed that some teenagers no longer under parental care are engaged in activities known to be high risk (for psychological and health problems), the degree to which they do so being related to anxiety, depression, and low self-esteem. Yet for many, their day to day concerns seemed quite typical of adolescents, focused on financial survival, employment, relationships, and appearance. Self-reported delinquent activities were associated with low self-esteem, infrequent positive activities, and negative opinions of the programme.

The findings suggest that negative affect limits adolescents' responsiveness to the development of constructive activities which mediate favourable outcomes (e.g., continuing in school, obtaining further training, seeking and gaining employment).

It is widely recognized that teenagers in New Zealand present a particular challenge for mental health and social services. Activities that place adolescents at risk for health, legal, and psychological problems are as prevalent in this country as they are reported to be Britain, the United States, and other industrialized nations (Achenbach & Howell, 1993; Furnham & Gunter, 1989; Moffitt & Silva, 1988). For New Zealand teenagers particularly high rates of mortality from accidents and suicide have also been reported (Drummond, 1996). With respect to juvenile offending and conduct problems, the careful longitudinal studies carried out in Dunedin (e.g., McGee & Williams, 1991; Silva & Stanton, 1996) and Christchurch (e.g., Fergusson, Horwood, & Lynskey, 1994) have documented the kinds of developmental pathways traversed by young New Zealanders that often lead to serious social dysfunction.

These studies have tended to implicate family variables such as abuse and neglect in the emergence of a variety of behavioural difficulties. Often, parental separation and divorce lead to conflict with step-parents or new partners (Heaven, 1994). Thus, it would seem that adolescents who are seriously alienated from their immediate families might be specially vulnerable. In New Zealand, if teenagers between the ages of 16 and 18 have experienced irreconcilable differences with parents and have left home, are no longer being financially supported by their families, and do not have a job, they are eligible for a special benefit (administered by the Department of Social Welfare) known as the Independent Youth Benefit (IYB). Younger than that, children in these circumstances will come under the care and protection of the Children and Young Persons and their Families Service, but by the age of 16 such teens are essentially on their own (known in the USA as "emancipated minors").

There are no descriptive data regarding the lifestyles and behaviour of adolescents in this situation. However, anecdotal reports from police, school officials, and social services have suggested that youth receiving the IYB are likely to be a high-risk group in terms of negative outcomes such as delinquency and crime, low educational attainment,

and poor health (related to drug and alcohol use, unprotected sex, and limited domestic skills). In an attempt to counter these difficulties, the New Zealand Income Support Service (NZISS), which is responsible for administering the IYB, designed a pilot programme in 6 sites to provide a range of counselling, educational, and support activities. The framework for the programme was a grass-roots intervention provided by or brokered through the benefit officers of NZISS. This community-based support programme was called BOOST.

Each BOOST site (NZISS office) had written their own programme within certain general guidelines they had been given. As a result, they differed somewhat in the activities offered and the nature of their programmes, especially as some were very rural regions and some urban. All sites, however, provided at least the following mandated elements: (a) contact with and referral to community youth programmes; (b) working with schools and guidance counsellors to encourage returning to school, or helping participants seek specific job training; (c) creating opportunities to take part in various self-improvement programmes; (d) referral to medical, dental, and other professional services if needed; and (e) supportive interactions with NZISS staff. The BOOST programme sites all had access to special funds that would allowed them to pay for these additional activities if necessary. Participation was encouraged through "activity agreements" that were worked out with the teenagers according to their own individual goals and needs. These were written contracts specifying the positive activities which the teenagers agreed to undertake. While some staff had limited training in social services, most of the staff, who were selected on the basis of their expressed interest, simply relied on their previous experience with young people.

A formal evaluation of this programme was conducted in 1995 and has been described elsewhere (Evans, Hansson, Hungerford, Nikora, & Robertson, 1995). Essentially, our evaluation revealed that the programme had qualified success, with approximately half of the adolescent clients returning to school, commencing a training programme of some kind, or finding at least part-time employment. Obviously some teenagers in the scheme did not benefit, and many continued to engage in the high-risk behaviours that are thought to lead to an array of social difficulties in the future. It seemed important to gain more information regarding the diversity of these clients (called "customers" by NZISS). The present study, therefore, was undertaken to provide further descriptive information on some of the characteristics of this particularly vulnerable group of young people which might allow for greater understanding of their psychological needs. Such data would be important for tailoring future interventions to the specific nature of their strengths and difficulties.

Method

Participants

The participants were adolescents aged 16 and 17 who were enrolled in BOOST, an innovative programme designed to provide a variety of supports in conjunction with

participants' receipt of the Independent Youth Benefit. To be eligible for the IYB, young people are required to demonstrate that they can no longer live at home. Screening using specified criteria of family breakdown was conducted by psychologists in Special Education Services, under a contract with NZISS. As the programme operated in 6 widely geographically-distributed pilot sites (the Income Support offices in Kaitia, Henderson, Palmerston North, Wanganui, Dunedin, and Invercargill), only teens eligible for the IYB who were living in those districts were enrolled in BOOST. For such individuals, participation in BOOST was mandatory if they wished to continue to receive their benefit.

Questionnaire

Most of the questionnaire items were derived from an instrument that has been widely used in the United States to investigate youth attitudes, behaviours, and needs (Cooperative Extension, 1990). Instead of being a norm-based instrument, the items have high face validity and attempt to identify practical, everyday aspects of teenagers lives—what they do, what they worry about, how they spend their time, and so on. Modifications were made to the American questionnaire to ensure that the language and items were appropriate for youth in New Zealand, and the final version was reviewed by a number of high school students in the Hamilton area for comprehensibility and reading level. Other items were added specifically to assess participants' experiences with the BOOST programme.

All items, except for the inventory of high risk activities (which had a simple yes/no format), were scaled on 5-point scales from "a lot" to "never", or from "strongly agree" to "strongly disagree". Items were sometimes in the negative form to reduce response sets. To examine interrelationships among the participants' answers, the following scales were derived from the items in the questionnaire.

Anxiety

This was not a clinical measure of anxiety, but reflected the number of worries about everyday problems experienced by young people, containing 17 items such as "I worry about having enough money to live on"; "I worry about how I look"; "I worry that my reading or writing level will hold me back in life." Scores on this measure were normally distributed, with a Cronbach alpha for the scale of .77.

Depression

There were only 3 items in this scale, but each one of them would indicate a significant mood problem. The items were: "I feel sad or hopeless for days at a time"; "I have repeated thoughts about killing myself or made plans to do so"; "Most of the time I am happy with myself" (scored negatively). The limited range of possible scores (3-15) yielded a negatively skewed distribution (mean = 4.5, SD 3.6) with an alpha of .82.

Self Esteem

As our general research programme is interested in positive

rather than negative behaviours (Evans, 1993), the 9-item self-esteem scale was designed to represent attributions that are the antithesis of depressed mood, with some items reflecting an internal locus of control ("Being successful at something depends on how hard you work at it, not on luck"), some reflecting perceived self-competence ("I am able to do things as well as most other people"), and some reflecting positive self-image ("Most people I meet like me"). Scores were normally distributed with an alpha of .56.

Social Support

Many research studies in recent years have confirmed the beneficial effects of social support in combating otherwise negative experiences for youth and other vulnerable groups (see Evans, 1993; Peterson, 1991), so it was considered important to assess the level of support enjoyed by the adolescents. The scale might more accurately be referred to as *perceived* support, in that it asked questions, under the heading "Good things in your life," about having friends, role models, being in touch with one's own culture, knowing sympathetic teachers or other adults to whom one could turn in moments of difficulty. With a possible range from 9 to 45, the mean was 18 (SD = 5), with an alpha of .63.

Positive Activities

This scale was labelled "How do you spend your time?" and asked participants to estimate how much time they spent engaged in a range of everyday self-care (cooking, cleaning, shopping) and typical teenage leisure activities (watching TV, playing a sport, hanging in town) or social responsibilities (helping family/whanau with chores; doing volunteer work; homework). Originally, we wished to obtain a snapshot of how these adolescents filled their day. For the present analysis, we identified the 10 items we consider to be socially positive or constructive, and gave each participant a score based on the number of such activities regularly engaged in (rated at least "sometimes" or above). This reflected the diversity of positive activities engaged in, rather than an estimate of the total amounts of time spent in beneficial pursuits. With a possible range from 0 to 10, the mean was 5 (SD = 2).

Perceptions of BOOST

These 14 questions addressed the degree to which each teenager perceived that they were successfully supported by the programme ("The BOOST programme has helped me get a job"; "The BOOST staff really understood me"). It also dealt with general positive attitudes towards the programme ("I would not recommend the BOOST programme to my friends"; "I don't think the BOOST staff were very sensitive to my cultural background"—both scored negatively). Scores ranged from 14 to 52 (maximum possible 70), with a mean of 31 (SD = 10) and an alpha of .89.

Risk Activities

Fifteen items were included that reflected behaviours which have been labelled "high risk" in the literature on adolescent development. These items covered drinking and substance

abuse, unprotected sex, experience of racial discrimination, family violence, and sex abuse, as well as interest in gang membership. Responses were in a yes/no format and the "risk" score was simply the total number of items endorsed (0-14); the mean was 4, with a SD of 2.7.

Delinquent Activities

As only some risky activities will bring young people into conflict with society (e.g., the judicial system), a sub-scale of the risk items was developed to measure anti-social behaviour by separately scoring endorsements of the 5 activities that are illegal (drug use, stealing, etc.). These items were more global than those of the Moffitt and Silva (1988) scale, but incorporated the most serious from their list of 29 illegal activities.

Programme Status

As the participants were still involved in the programme at the time the questionnaire was administered, it was not possible to evaluate long-term outcomes like getting a job or getting off the benefit. However, the current status of each adolescent could be judged as either positive (if there were specific accomplishments such as returning to or continuing at school, finding a part-time job, and participating in training), or negative (such as continuing to be unemployed, staying out of school, or being suspended from the programme for noncompliance). Status was rated as neutral when an outcome was known but we considered it to reflect no change in the client's previous situation. Coding was based on these criteria and carried out independently by two of the researchers. There were disagreements on only 2% of the clients' classifications and these were resolved by discussion. Unknown outcomes (status) were coded when there was insufficient data in the BOOST programme records to make any judgment. This could occur because the individual had moved out of the district or had only just started in the programme.

Outcomes were not the focus of the present analysis, as questionnaires were distributed after the programme had been in existence for only 8 months. Potentially, this was long enough for changes in status to have occurred but, in fact, new teenagers were being enrolled in the programme all the time and successful longer-term clients were being "graduated" from it. It was not practical to administer the questionnaire sequentially, say after each adolescent had been on the IYB and in the programme 6 months, thus the current programme status rating did not take into account differing degrees and durations of programme involvement.

Procedure

The questionnaires were printed in a user-friendly format with some graphics and encouraging comments (e.g., "That's it! Finally done!"). They were mailed to all 790 BOOST participants in the 6 sites with a covering letter explaining that the questionnaire was voluntary (they were under no obligation to complete the forms) and confidential, and that none of the individual information would be used to identify anyone personally. As we needed to know each participant's

name in order to match questionnaire answers to current status (outcomes), the questionnaire was not anonymous. Completed questionnaires could be returned to the University of Waikato using an enclosed Freepost (reply paid) envelope. Those individuals who had not returned a questionnaire within 4 weeks, were sent a second copy, asking again for their assistance and re-emphasizing the confidential nature of the questionnaire.

Two individuals objected to the questionnaire and returned them unanswered with a note of protest. Because this is an extremely transient group of young people, many questionnaires were returned "no longer at this address". In the end, 235 usable questionnaires were returned, representing 30% of the total available sample. Questionnaires were scored, open-ended comments were recorded, and the data were entered onto Excel files for transport to and analysis using the SPSS-X statistical package.

Results

As our major interest was in behaviourally-referenced information, not on average scores, and as the scales have no norms for New Zealand adolescents, we will first report some simple descriptive information on these teenagers and then consider how the variables inter-related for these particular participants.

Descriptive Information

Demographics

The mean age of the sample who completed the questionnaire was 16 years 8 months (of the overall group, 16 years 10 months). Although BOOST participants overall

were 52% female, a disproportionate number of females (63%) answered the questionnaire. In terms of cultural or ethnic group, the numbers responding matched the original distribution: 48% were European/Pakeha, 21% were Maori, 18% were of mixed Maori/Pakeha descent, and 13% were New Zealand-born Pacific Islanders and Asians, or recent immigrants. A small group of 8 adolescents identified themselves as "White Power". Of those identifying themselves as Maori, only 3 did not know their iwi. A large percentage were living with flatmates or friends (45%) or a relative (34%), but some were living in a hostel (8%), alone (4%), or had no fixed abode (2%). They had been out of the parental home for an average of 7 months (range from 1 month to 2 years). Forty percent were still attending school (according to BOOST staff records, 47% of the overall group were in school or involved in training courses); 17% had part-time work, and 5% reported they had recently found employment. Five percent reported that they were the parent of a child.

Anxieties

The most serious worries among these adolescents were having enough money to live on (mean rating of 4.0, with 5 = worries a lot, 1 = never), not being able to get a good job (3.5), getting along with parents and family (3.2), and how they look (3.2). Being pressured to have sex or do drugs, being bullied, getting along with people in other cultures, or being held back by lack of educational skills, were all rated below 2.00 (seldom a worry).

Social Supports

Some social support items received ratings which indicated that they were, on average, true for this group of teenagers.

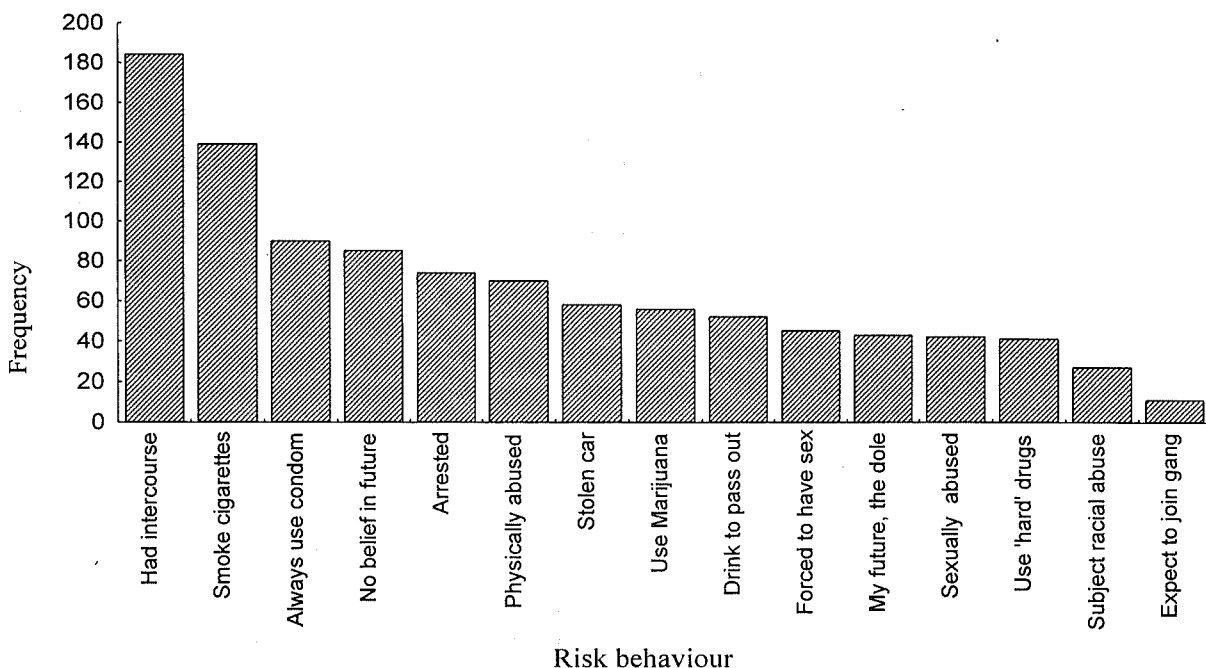


Figure 1. Frequency of risk behaviours for participants from BOOST programme.

These items were: having at least one or two close friends; having an adult to help with serious personal problems; knowing positive role models; having at least one helpful teacher; being in good health. However, for each of these items there was about 10% of this group of young people who strongly disagreed that the item was true for them. Two items were consistently reported as not being true for most respondents: being able to count on neighbours in an emergency; and having fun things to do in the community.

Use of Time

According to the respondents, most of their leisure time was spent in the following activities, listed in order of most frequent mentions: cooking; cleaning; shopping for necessities; reading (or pursuing a hobby); watching TV (and videos); being with a girlfriend or boyfriend; and hanging out with friends. Items relating to entertainment (other than TV) were not frequently reported. It was clear from their written comments that many leisure pursuits are unavailable or too expensive: even going to movies was not a frequently reported item, with 14% claiming they never spent time this way; similarly hanging in town or at a shopping mall was reported as never done by 20% of the group. Activities related to work and study were also not frequent occurrences. Twenty five percent of the respondents reported that they never studied or did homework, or exercised for fun (but only 18% report never playing a sport).

High Risk Activities/Experiences

In terms of experience with other agencies, this group of teenagers had previously experienced a variety of difficulties: 28% had had dealings with CYPFS, 35% with the police, and 15% with the courts. Thirty percent had been suspended from school, usually two or three times, although some claimed to have been suspended up to 25 times. The usual length of suspension was 9 days.

With respect to specific behaviours (see Figure 1), the most frequently reported items (in percentage of all respondents) were having sex (80%), having sex without a condom (59%), smoking daily (58%), being arrested by police (31%), being physically abused by parents (31%), regular use of drugs such as cannabis (24%), and getting drunk enough to pass out (22%); seventeen percent reported sexual abuse by an immediate family member. The distribution in terms of number of risk activities engaged in by each participant is shown in Figure 2.

Opinions About BOOST

Overall ratings of the intervention programme were positive, with items endorsed in the *agree/strongly agree* range being: "The staff at BOOST respect me as an individual"; "I let my friends know that I am in BOOST"; "BOOST motivated me to get more education"; "I know other teenagers who would benefit." The two items with the highest item/total score correlations ($r_s > .69$) were "I feel lucky to have been part of BOOST" and "BOOST improved the way I think about myself."

Gender and Ethnic Differences

Mean differences for boys and girls were examined by *t* tests. Few statistically significant differences ($p < .05$) were observed, except for depression, with boys (mean = 5.3) having higher scores (more depressed) than girls (mean = 3.3), and girls having higher self-esteem scores (mean = 24) than boys (mean = 22). With respect to delinquent activities boys reported engaging in twice as many as girls, and that difference was statistically significant.

Ethnic differences were examined by comparing participants of European origin (Pakeha) with all others of Polynesian origin (Maori, part-Maori, and Pacific Islanders, but not recent immigrants). There was only one significant difference on any variable, which was that the Pakeha

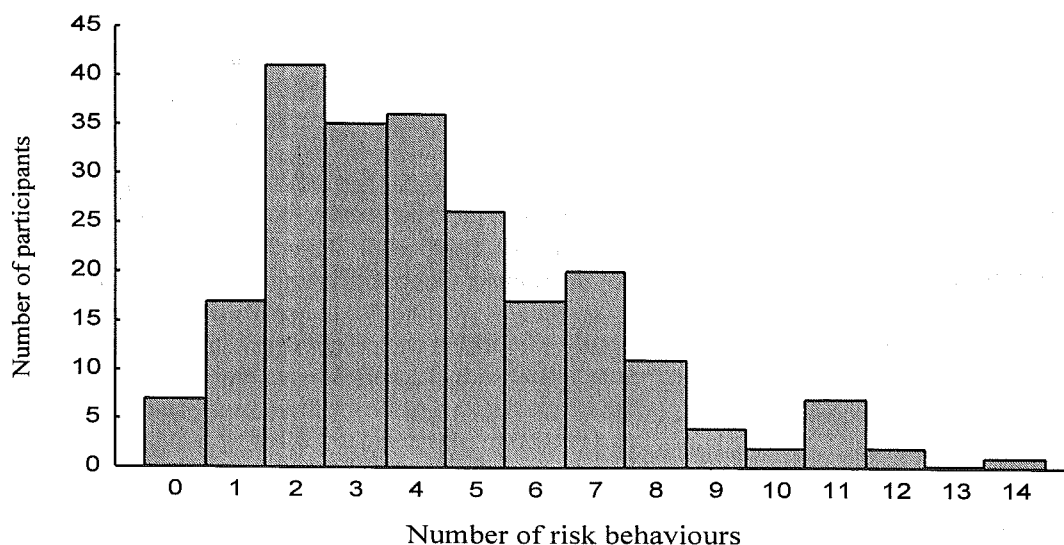


Figure 2. Distribution of total numbers of risk activities (ie., use of drugs, arrest, physical and/or sexual abuse, drinking, stealing) for participants involved in the BOOST programme.

Table 1
Correlation Coefficients for Youth Questionnaire Scales Administered to Participants from BOOST Programme

	Anxiety	Depress	Self/ Esteem	Social/ Support	Positive/ Act	Percept/ BST	Risk/ Activt	Delinq Activity
Anxiety	———							
Depression	0.59**	———						
Self Esteem	-0.13*	-0.45**	———					
Social Support	-0.18**	-0.32**	0.37**	———				
Positive/Act	0.02	-0.12	0.23**	0.23**	———			
Percept/BST	-0.04	-0.01	0.21**	0.23**	0.09	———		
Risk Activities	0.26**	0.32**	-0.29**	-0.21**	-0.21**	-0.16*	———	
Delinq Activities	0.13*	0.16*	-0.22**	-0.19**	-0.20**	-0.22**	0.80**	———

Note. * = Signif. .05 ** = Signif. .01 (2-tailed)

teenagers engaged in a wider variety of positive activities, however the actual differences were small (Pakeha mean = 5; non-Pakeha mean = 4), and reflects opportunities available in different geographic locations.

Interaction Among Variables

Intercorrelations among all the derived variables are reported in Table 1. As frequently found with more clinically-oriented measures, there was a substantial correlation between our measures of anxiety and depression. Depression was negatively correlated with self-esteem, as expected. Another cluster of reasonably large correlations was among self-esteem, social support, and positive activities. The largest correlates with high-risk activities were depression, anxiety, and low self-esteem. Since they were derived from the same set of items, the large correlation between high-risk activities in general and delinquent activities specifically is somewhat of a measurement artifact. Presence of delinquent activities was correlated with low opinions of the value of the BOOST programme.

Predictions

There were certain variables that we were interested in as outcomes or characteristics that might be considered dependent variables in this context: current status within the programme, and engaging in delinquent behaviours. Other variables might be considered more psychological characteristics (depression, self-esteem, and anxiety), and others considered moderator ecological/social influences (social support, use of time, opinions about the programme, and engagement in high-risk activities).

Delinquency

To examine which variables best predicted self-reported delinquency, a step-wise multiple regression was carried out with delinquency scores as the dependent variable. Three variables related negatively to delinquency. They were, in order of magnitude: self esteem, positive activities, and positive perceptions of the programme (multiple $r = .32$, F

$= 7.2$, $p < .0001$)

Programme status

The degree to which all other variables might be able to predict current status in the BOOST programme was examined by performing a discriminant function analysis on the subjects who could be classified into one of two outcome groups (positive or negative). However the discriminant function could only classify correctly 55% of positive outcomes and 62% of negative, and this was not statistically significant.

Discussion and Conclusions

The limitations of self-report and questionnaire-based data are well-known. In the present study, some self-selection would have taken place, with those teenagers having the most dysfunctional behaviour being, perhaps, least likely to respond. However, the demographic characteristics of the respondents (age, ethnicity, educational status, and distribution across sites) were not markedly different from those for the total group. The lack of complete anonymity in the procedure may have reduced the numbers willing to complete the instrument or caused some level of dissimulation in those who did. There were, however, no obviously spoiled forms and only two self-declared refusals. Nevertheless, these difficulties have to be considered when weighing the significance of the findings.

The major purpose of the questionnaire was to obtain a descriptive "snapshot" of this particular group of young people, who are not clinical clients nor individuals who have been identified by legal violations. They are teenagers who have been required to live on their own at an early age and, as a result, are considered to be likely candidates for future benefit dependency and welfare, as well as correctional services. These young people certainly revealed considerable social disadvantage, with very high rates of sexual and physical abuse in their histories. At one level their lives are quite ordinary, with a variety of common daily worries, time spent in everyday activities, and strong indications of wanting to stay in school, obtain meaningful training, or

find employment. Conversely, some of these teenagers disclosed feelings of depression and hopelessness, and considerable involvement in activities generally considered to place them at risk for later legal, health, and adjustment difficulties.

Non-Pakeha New Zealanders are often stereotyped as having higher rates of these difficulties. To the extent that there was a disproportionate number of Maori teenagers in the group receiving the benefit, this degree of disadvantage in New Zealand society is confirmed. But once all the recipients of the IYB were considered as a group, ethnic differences did not emerge. Ethnicity is often confounded with socio-economic status, and cultural identity, but in this particular cohort one might argue that all the participants were in the same boat. Except for delinquent behaviours, as one would expect, gender differences were not substantial either. It could be considered surprising that boys were found to be more depressed than girls, however the few depression items were tilted towards suicidal thoughts.

For many of the adolescents, positive programmes clearly have the potential to make a difference, despite a high rate of factors that have given these young people a poor start to adult life. Nonetheless, the variables we selected to measure were not strongly related to our estimates of positive versus negative status in the programme (no significant discriminant function could be calculated). This may be because the current status classification was somewhat arbitrary and difficult to make, as the study included participants who had only recently joined the programme and for whom no particular changes could yet be anticipated. Client satisfaction (having positive perceptions of the programme) might be quite a useful intermediate variable to consider. Adolescents who saw the programme as beneficial had higher self-esteem, more social supports, and fewer high-risk and delinquent activities. Here, of course, we run into the limitations of cross-sectional analyses: we cannot tell if the programme raised self-esteem, or was received positively only by those who had a more constructive, hopeful outlook to begin with.

In terms of self-reported delinquent activities, it appeared that those engaging in such activities had lower self-esteem, fewer constructive daily activities, and were less likely to see BOOST as a valuable programme for them. They also tended to engage in a variety of other activities that are not illegal, but which place them at risk for poor health and continued social disadvantage.

The BOOST programme is quite structured and uses the benefit (welfare payments) to increase compliance. In our evaluation study (Evans et al., 1995) some clients indicated that they resented this, and it would be interesting to know what personal characteristics make adolescents resistive of efforts to control them. The present data do provide limited guidelines for those trying to implement community-based programmes such as BOOST. As an overall conclusion, it would be fair to say that these participants have significant, day to day worries about how to manage financially, they spend their time in relatively mundane daily chores, and they are generally motivated to improve their situations. Thus, a focus on constructive activities, building a network of social supports, and

encouraging enough positive expectation for the future and their potential to achieve ("self-esteem"), will facilitate adherence to recommendations around education, training, and employment. Negative affectivity (depression and anxiety) is a characteristic of those engaged in high-risk activities who perceive little value in, or support from, the programme. Such adolescents may need more sophisticated individual therapy to help them take advantage of practical, skill-based interventions.

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When Racism Stepped Ashore: Antecedents of Anti-Maori Discourse in Aotearoa¹

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Anne Salmond (1991), in examining the voyages of Tasman, Cook, de Surville and du Fresne, draws attention to aspects of contemporaneous European theorising about "the other" She highlights two key strands of representation of unknown peoples, within the cultures from which these explorers set sail:

One was the image of the bestial savage, sometimes gigantic and physically monstrous as well as brutally cruel, which derived from mediaeval bestiaries and theories about demons. The other was the 'savage' as the innocent, happy child of nature, free of the corruptions of 'civilised' society, the Utopian inheritor of the biblical Garden of Eden." (p.95)

This double gaze was central to the worldview with which Europeans approached first interactions with Maori.

The idea that Pakeha came to this country with a specific view of Maori as 'other' is central to Angela Ballara's (1986) study of racial prejudice in the colonial context. She suggests that European immigrants arriving in this country in the mid-nineteenth century, came with a "set of ideas formed in Britain or other parts of her colonial dominions" (p10) about "the natives".

James Belich (1986) in his major reappraisal of the land wars of the 1860s and 70s, examines the ways in which Pakeha in that era accounted for the confrontations. He concludes that a "dominant interpretation", deeply rooted in ideas about British racial superiority, governed and shaped the Pakeha understanding of causes and outcomes. Despite the numerous reverses and weaknesses of the imperial campaigns and even a few skeptical reports at the time, the very detail of what happened in particular engagements was tailored toward a story of inevitable and unproblematic Pakeha victory over Maori.

Malcolm Nicholson (1987) reports on the material effects of Pakeha representations of Maori in the late nineteenth century. The research examines the relationships between different colonial discourses and the initiatives in Maori health which flowed from them. Images of Maori including "the noble savage", "the ignoble savage" and

"the romantic savage" have justified and supported different and often contradictory practices, sometimes concurrently.

For each of these scholars, there is a focus on the complex patterns of ideas, as expressed in the language and texts of the day, which provided the framework for the interpretation of what happened between Maori and Pakeha, and the justifications for particular courses of action. Belich and Ballara draw attention to the force of ideology in this working out of human affairs. Both Salmond and Nicholson provide much detail of the ideological formations which are engaged in the contests for power which mark the arrival and establishment of Pakeha in this country. I have been studying the contemporary language and ideas of Pakeha New Zealanders about Maori, and the role of these phenomena in the construction and interpretation of our social reality. Both Salmond's and Nicholson's insights seem to me to bear striking resemblance to a pattern central to the talk of Pakeha in the late twentieth century, in which apparently contradictory positive and negative characteristics are widely attributed to Maori.

In the present paper my interest is to examine a "dominant interpretation" at work in a historical context and in the contemporary setting to look at the similarities of the resources Pakeha marshal in talking about Maori. My primary focus is on texts that were available to those involved in the first waves of large scale colonial migration to this country and especially on one book published by the New Zealand Company in 1839. Will such materials carry precursors of ideas, phrases, images and usages which pervade our contemporary constructions of Maori/Pakeha relations? Will the insights of such study be of significance to the ongoing tension in the interaction of the two groups?

I construe this as a study of a crucial aspect of my own culture and its role in the processes of colonisation and subjugation of the Maori world. To examine the historical production of dominance through language, from within the dominating culture, is to be better able to understand the familiar expressions of those power relations in the contemporary setting.