Sexual Coercion, Resilience and Young Māori:
A scoping review

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Disclaimer
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Purpose and scope of the report

The goal of the Ministry of Women's Affairs (MWA) for women in Aotearoa/New Zealand is: Women having real choices and using their strengths to maximise social and economic success.

MWA has three key priorities outcomes: regarding leadership, engagement in the economy, and reducing violence against women. This project fits under the outcomes of reducing the damaging impact of violence against women, in particular sexual violence.[1]

This report provides an overview of what is known in Aotearoa/New Zealand, particularly Māori perspectives, and internationally, on sexual coercion/violence, resilience and healthy relationships, particularly for indigenous peoples, with an overall focus on rangatahi and rangatahi wahine. The report provides a cohesive critique of the field, describes a recommended methodology for research with young people and outlines stakeholder engagement as a sound basis for future partnerships in research and prevention efforts.

In November 2009 the Ministry of Women's Affairs contracted Te Ropu Whariki, the Whariki Research Group, based with the SHORE and Whariki Research Centre at Massey University to carry out the eight-month study.

The review drew on literature, consultations and conference and workshop presentations. The research idea was developed from the review material and discussed with the Ministry of Women's Affairs, researchers, and others working in the field. Further consultations, interviews with rangatahi and web searches enabled the methodology and methods to be tested and refined and examples of some aspects of the research to be demonstrated.

Implications for the resilience field

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[1] http://www.mwa.govt.nz/news-and-pubs/publications/soi-general/statement-of-intent-2010-2013

Although resilience has received increasing attention in Aotearoa/New Zealand, there is very little research here (or overseas) in relation to resilience and sexuality. Resilience most comfortably lends itself to more individual approaches, although some framings suggest that, in an attempt to make it all things to all people, it is being stretched beyond where it largely sits. Resilience is probably a more palatable approach to many as it presents few challenges to societal norms and structures. It is also more easily adopted as a way of addressing seemingly tangible and more amenable conditions of individuals and families, rather than tackling change at the wider societal level. However, a focus on resilience may detract from these broader approaches.

Māori concepts of health, encompassed by the term hauora, are holistic and include potential and strength, not just withstanding assaults. In the face of colonisation and multiple assaults at multiple levels, realising the potential of rangatahi Māori will require more than the survival skills of dealing with adversity. Māori concepts are about the potential and wholeness of Māori people and may provide more appropriate and effective framings than resilience.

As a source of strength for Māori through positive connections, whānau can provide important contributions to the internal assets of individuals. The wider environment provides the external assets that contribute to whānau both thriving and struggling. The recent government commitment to Whānau Ora acknowledges whānau as a building block of Māori society. It provides a way of dealing with some of the concerns that resilience focuses on, as well as looking more widely at societal structures and responsibilities.

Changing adversity requires seeing it as unfair, inequitable, unacceptable and amenable to change. If we want to change conditions such as racism and sexism, we need a critical analysis and an intolerance of the conditions and the adversities they create. ***We need to address the causes of sexual coercion and not see resilience as anything more than a way of dealing with the unacceptable.*** This is consistent with various international

understandings of sexual rights, including those referred to in the section on rights. These are not about individual or collective resources to deal with violations, but are about international and national responsibilities to uphold rights and create environments where people are as free as possible from violations.

In Aotearoa/New Zealand, a focus on dealing successfully with adversity, rather than addressing the conditions that perpetuate inequitable adversity, is contrary to the rights underpinned by the Treaty of Waitangi. The Treaty recognised Māori tino rangatiratanga (sovereignty) and guaranteed to tangata whenua the same rights as British citizens. The government, in its role as Crown in the Treaty, has a responsibility to ensure that Māori are not persistently exposed to higher risks than the rest of the population, and that research approaches counter rather than exacerbate existing inequalities between Māori and non-Māori.

Implications for cultural approaches

The belief that young people need particular forms of cultural connection to promote their health and their secure cultural identity has gained some traction over the years. However, it has both positive and negative implications. Research that sets out to study diverse forms of connections and their links to Māori identity and well-being has not been conducted. It is, therefore, difficult to say with any certainty that some forms of connection, such as the more traditional cultural markers, are more health promoting than others. Proceeding on the basis that this has been established may present problems. For example, although useful and health-promoting programmes may be developed, they may not work for all; rangatahi who fall outside of what is considered an authentic or healthy notion of being Māori may be judged as falling short and in need of culture, regardless of the strength of their identity or their aspirations for their own well-being.

Implications for the sexual violence field

Māori and violence

There is a growing body of literature that discusses Māori and violence, taking two main forms. The dominant view, strongly represented in the media, is that violence is the fault of Māori, and Māori culture, that there is a code of silence among Māori about the issue, and that by implication, Māori condone violence. This view is often presented somewhat simplistically and contributes to stereotypical notions about patriarchal Māori society that are unhelpful when trying to address concerns around sexual violence. In contrast, many Māori writers challenge these perceptions, pointing to broader factors that impact on Māori and misinterpretations. They argue that violence is not part of Māori culture and that there are strong values and tikanga to guide Māori understandings and approaches to sexual violence. Greater discussion and examination of violence and Māori in today's society is needed to provide a more considered and evidence-based approach.

Gender roles and sexuality

Sexual coercion/violence cannot be viewed separately from gender roles, particularly dominant notions of masculinity and femininity where heterosexuality is the norm, males are active agents seeking sexual activity and women are passive, responsible for giving or withholding consent. These framings lend themselves to the incorporation of coercive behaviours as 'natural' and normalised expressions of sexuality that are unlikely to be recognised as coercion or deemed unacceptable.

Missing from much of the literature around sexual health and young people, in particular, are notions of healthy sexuality and sexual relationships (apart from critiques of what is seen to deviate from norms) and sex as pleasurable, rather than risky and problematic. Rangatahi Māori are surrounded by these ideas as well as various negative representations of Māori and are provided with few positive and affirming alternatives. It is a concern that rangatahi Māori voices are missing from the literature and as a result their experiences

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of relationships, gender and sexuality and how these impact on sexually coercive behaviours are not evident.

Implications for an approach based on determinants of health

The disproportionate rates of violence (and other negative outcomes) among colonised peoples and others who are not members of the dominant culture cannot be explained solely by pointing to the supposed patriarchal nature of these groups or to characteristics of each culture. The commonalities of indigenous and other marginalised peoples suggest that there are underlying determinants that are affecting these populations more broadly.

Along with socio-economic disadvantage, colonisation and racism are increasingly being examined as providing pathways that produce a range of disparities. As colonised people, Māori may be viewed as in 'battle mode', making decisions – consciously or unconsciously - about what assaults to respond to and which to ignore. Where assaults are not able to be directly addressed or dealt with in ways that promote rather than demote health, the impacts may 'spill over' through stress, trauma and frustration (some of the pathways suggested in relation to racism and health) into interpersonal arenas.

To compare rates of any health-related behaviour, including sexual coercion, between colonised and colonising peoples, without taking colonisation into account, risks the creation of deficit models of the behaviour in question. These blame indigenous culture or people for the behaviour, fail to include the existing system as a variable which influences outcomes, do not acknowledge crucial determinants of the behaviour, and are likely to be ineffective, or at worst, harmful.

Implications for prevention

Although there is a strong and growing interest in primary prevention, most of the literature focuses on dealing with sexual violence when or after it has

happened. Resources and knowledge about primary prevention are under-developed. There are few evaluated primary prevention projects.

Education and a focus on individual behaviours are strong themes in prevention efforts. There are concerns around implementation and their relevance to young people and there is little evidence to suggest that they are likely to make significant contributions at the level of population health gains.

How the issue is framed - whether more individualistic notions of risk and resilience are used or more holistic concepts and wider determinants of health - has profound implications for how interventions are designed, particularly at what level and with what analysis the issue will be tackled. Because the causes of and pathways to sexual violence are multiple, complex and operate at many levels, from individual through to wider contexts, there is a need to engage at all levels, contextualise interventions, be theory driven, and focus on structural factors.

For Māori, diverse environments - whenua, marae, whānau and other systems and sites such as community and educational settings - are, potentially or in practice, the places that provide sustenance and where Māori draw their strength. Well-being, including sexual well-being, cannot be realised without the wider environments and environmental conditions that support, strengthen and validate Māori.

One size does not fit all and we need approaches - whether we call these comprehensive, ecological, primary, public health or holistic or utilise Māori concepts such as kaupapa Māori, mana motuhake, mauri ora or whānau ora - that are informed and driven by diverse rangatahi Māori understandings and aspirations. To realise this fully, rangatahi Māori need to be involved in research that builds evidence to underpin the development of initiatives.

Implications for research

The review highlighted a number of gaps in research around rangatahi Māori and sexuality. A proposal for research examining how young Māori people understand and make sense of diverse and competing messages around gender and relationships, including an exploration of the saliency of Māori concepts in today's context, arose as one way of addressing these considerable gaps in knowledge and to provide an evidence base to inform policy and interventions.

The suggested participatory research framework privileges rangatahi Māori voices and analysis, and will provide understandings of rangatahi relationships and where they learn about and make sense of these. This is one of a range of possible research projects. This project has been suggested because it brings rangatahi voices to the fore and, as an in-depth qualitative approach, could provide a sound basis for identifying further research and prevention approaches and provide stories behind the few statistics that are available.

Achievements of the project and suggestions for the future

Sexual violence (SV) is seriously under-researched in Aotearoa/New Zealand and there is a dearth of research and literature in relation to SV and rangatahi Māori. In looking at what we know about rangatahi and sexual coercion, this report is a step in beginning to address these gaps. It provides a basis for looking at where we need to get to – a strong knowledge base, informed by rangatahi voices, that provides evidence for a way forward based on the challenges we face today.

Attendance at the various forums and the stakeholder engagement has revealed a sector characterised by a considerable number of groups with enthusiasm, commitment and knowledge. Many, such as Māori members of Te Ohaaki a Hine-National Network Ending Sexual Violence Together (TOAH-NNEST), are using Māori concepts and values to develop models and approaches applicable today. Māori providers operate locally, regionally and

nationally. They include consortiums such as Amokura in Te Tai Tokerau; Te Puawai Tapu, a national Māori public health organisation; metropolitan services such as Tu Wahine Trust in Auckland and regional organisations such as Tu Tama Wahine o Taranaki; Kite Rapu i te Ora Trust in Opotiki; and Te Atawhai Tangata in Invercargill. This provides a sound and encouraging basis for further developing partnerships for building knowledge and designing primary prevention interventions

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1 0 Introduction

1.1 Purpose of the report

The Ministry of Women's Affairs' (MWA) goal for women in Aotearoa / New Zealand is: Women having real choices and using their strengths to maximise social and economic success.

MWA intends that its commissioned research develops an evidence base for policy advice and interventions on issues that impact on women. MWA also aims to share mutual information with NGOs, business and other external parties to help ensure their policy is grounded in women's experiences.

MWA has three key priorities; leadership, engagement in the economy, and reducing violence against women. This project fits under the outcomes of reducing the damaging impact of violence against women, in particular sexual violence.

In September 2009, the MWA published the results of a two-year research project entitled *Restoring Soul: Effective interventions for adult victim/survivors of sexual violence.*[2] This research was the first of its kind in Aotearoa/New Zealand in over 20 years. Key findings included the significant number of survivors who had a history of repeat sexual victimisation, often begining at a young age, and frequently associated with other forms of violent victimisation. Many of these survivors had prior social or intimate relationships with their attackers. The research project also found a lack of research in the areas of respectful relating, resilience and healthy sexuality, combined with a growing impetus towards exploration of strengths-based approaches. These findings framed the proposal for the next research project for MWA.

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[2] The Ministry of Women's Affairs. (2009). *Restoring Soul: Key findings from Strong and Safe Communities – Effective Interventions for Adult Victims/Survivors of Sexual Violence.* The Ministry of Women's Affairs

In 2009, MWA submitted a funding application to the Cross Departmental Research Pool to complete a three-year project in this area, with the working title *Staying Safe, Bouncing Back – healthy sexuality, respectful relating and resilience in young people.* MWA was funded to complete a one-year exploratory pilot research project to cover the following three outcomes:

- a complete literature review on previous work done in this area
- a clear methodology created to be used in any future research in this area
- the establishment of relationships with Māori for future research in this area to be accomplished with a strong Māori component.

MWA decided that on the basis of the size of the project, and its relatively exploratory nature, it would be critical to ensure that the research was Māori-centred and completed by Māori researchers. In November 2009, MWA contracted the Whariki Research Group to complete this project.

After discussion, it was agreed that the concept of resilience and resilience in relation to Māori needed greater critical examination than was currently happening. The idea that particular forms of Māori cultural markers were protective factors appeared to be based more on assumptions than on evidence and, although resilience was seen as having an important role to play in developing healing models, sexual coercion was unacceptable. In addition, Kaupapa Māori approaches have transformation as a central concept; the project, therefore, needed to move beyond individual ways of dealing with coercion to include an examination of wider determinants of sexual coercion in relation to Māori health and well-being. As a result, the review of resilience shifted to a more critical examination of Māori and resilience to provide a basis for developing research that would contribute to stopping sexual coercion. The project overall was to take a primary prevention approach, consistent with Kaupapa Māori values of transformation and based on the premise that sexual coercion is unacceptable.

1.2 Scope and structure of the report

The overall aim of the project was to find out what is known in Aotearoa/New Zealand, particularly Māori perspectives, and internationally, which can inform our understandings of sexual coercion, resilience and healthy relationships, particularly for indigenous peoples, with an overall focus on rangatahi and rangatahi wahine. Specific objectives were to provide a cohesive critique of the field, develop and test a research methodology and foster stakeholder engagement as a sound basis for future partnerships in research and prevention efforts.

The initial title of the project Staying Safe, Bouncing Back – Resilience in Young People was based on the idea that:

> Unwanted or coerced sexual contact often occurs in the 'grey zone' of pressure and coercion. While it is not the extreme end of sexual violence, it is sexual violence. Some young people bounce back, where others may suffer disruptions to their development which may hinder their ability to fully participate within their communities. It is intended that this project will provide a platform to explore the 'grey zone' of pressure and coercion in sexual relating, and what resilience means for young Māori in responding to this (Ministry of Women's Affairs, 2010).

After being selected as the preferred providers, Whariki discussions with MWA resulted in a shift in the framing of the research. The interest in the grey zone of pressure and emotional coercion remained, but the resilience focus shifted from bouncing back, to greater critical engagement with the notion of resilience in relation to Māori and in relation to particular markers of culture being associated with resilience. In line with Kaupapa Māori approaches, a primary prevention gaze was also brought to the review.

Specifically the review focuses on:
- the current state of knowledge and gaps
- what questions this poses
- areas for exploration.

In relation to resilience, the following question was posed:

> In relation to both internal assets (individual characteristics/resilience) and external assets (collective/structural/societal), what promotes healthy relationships for young Māori and enables resistance to unhealthy choices, pressure and coercion?

In addition the review asked:

- What do we know about resilience, particularly in relation to Māori and other indigenous peoples; how useful is it as a concept for prevention?
- What do we know about the nature and causes of sexual coercion?
- What Māori knowledge bases and values are there to guide us?
- What is the state of knowledge on sexual coercion prevention approaches for Māori?
- What could a research methodology look like that would address some of the knowledge gaps?

The scoping review began by examining the following areas:

- resilience
- rangatahi and sexuality
- violence and society
- sexual violence/coercion
- prevention.

Standard literature searches were undertaken, events were attended and discussions took place with advisor Nicola Gavey and MWA to identify other relevant documents and to ensure that the project was covering the area effectively. Examination and critique of these areas enabled knowledge gaps to be identified and ideas developed for a potential research methodology to address some of these gaps. Stakeholder engagement further informed and refined the review and development of the research methodology.

Structure of the report

The following document builds on current knowledge, highlighting strengths and weaknesses (particularly gaps) in knowledge as a basis for the identification and methodological development of an initial research project. It is also intended as a resource, providing an overview of the current state of knowledge on sexuality, resilience, violence and prevention in relation to rangatahi Māori.

The field is large and although this review provides a way forward in many areas, it raises issues that merit more exploration. The field of indigenous resilience and the notion that particular forms of traditional markers may be associated with better outcomes for Māori is under-explored. A more thorough review of the evidence, including theoretical underpinnings and an examination of the research tools and findings that have emerged to date is needed; however, this was beyond the scope of this project.

Chapter 1 provides an account of the scope, significance and terminology of the research, framing the issues in relation to rights and prevention. The processes and results of stakeholder engagement are also documented.

Chapter 2 examines the concept of resilience and what we know about the field in relation to Māori and other indigenous peoples. This involves some critique of resilience as a more individual concept rather than a primary prevention approach, and an examination of the assumption that particular forms of cultural activities or markers are related to increased resilience.

Chapter 3 examines sexuality, particularly notions of masculinity and femininity, and influences on young people's experiences and constructions of sexuality and gender, with an emphasis on what little we know of Māori sexuality. It includes a brief overview of pre-colonial concepts around women, men, gender roles and sexuality and the advent of very different concepts that were imposed as a result of colonisation.

Chapter 4 looks at the ways that various forms of violence are condemned or condoned by society, highlighting the need to look at interpersonal violence within the wider context of colonisation and patriarchal structures. This chapter also examines themes around Māori and violence, particularly the idea that Māori condone violence, are silent and have a patriarchal culture that supports violence against women.

Chapter 5 describes coercion - particularly in relation to masculinity and femininity, its relationship with notions of consent as well as the nature, drivers and impacts of coercion. Considerable gaps in knowledge are highlighted, particularly for rangatahi Māori, as well as potential areas for research and intervention.

Chapter 6 describes various approaches to prevention, including definitions of primary, secondary and tertiary prevention. An overview of some of the interventions that fall within different levels of sexual coercion/violence prevention follows. The strengths and gaps in our knowledge of what works are highlighted to direct efforts to, or away from, particular approaches.

Chapter 7 provides a brief overview of the areas covered in the report, highlighting the strengths and the considerable gaps in our knowledge.

Chapter 8 describes the rationale, and approach to a research methodology suggested to fill some of the gaps identified in the review. This is followed by a description of the research design, methods and processes. It also provides accounts of the feasibility and testing of the methodology as well as examples of rangatahi voices and some preliminary indicative analysis.

The concluding chapter draws out key points in relation to the questions that this review set out to explore, followed by suggestions for the future based on a brief overview of what the project achieved.

1.3 Stakeholder engagement

Processes

The lead Whariki researcher attended a number of events over the course of the project.

➢ *Strong and Safe Communities – Effective Interventions for Adult Victim/Survivors of Sexual Violence,* 5 November 2009: The Ministry of Women's Affairs.

➢ *Ngā Kaupapa Muna – The Unspoken Issues, the Critical and Sensitive Issues Symposium*; 9 November 2009: Nga Pae o te Maramatanga.

➢ *Sexualities against the Grain:* A one-day symposium Friday 19 February 2010: The University of Auckland. Hosted by *The Gender & Critical Psychology Group* (Department of Psychology, The University of Auckland) & *Feminism & Psychology* (Sage Publications, UK)

➢ *Knowledge Day Hui: Sexual Violence Primary Prevention Sector Capability Building,* 28 April 2010: Rape Crisis Auckland Inc., Crowne Plaza, Auckland.

These events provided an opportunity for networking, hearing from a wide range of local and international speakers and gaining insights into the field. Discussions were also held with a range of stakeholders with expertise in the area, including alcohol and Māori, rangatahi and sexuality, Māori and violence, rangatahi and sexual violence and rangatahi and well-being. Stakeholders included kaumatua, education and prevention providers, researchers and sexual health educators working with rangatahi, whānau and Māori communities, in rural, town and metropolitan areas.

Topics for discussion included:
- scope and coverage of the project
- main themes emerging
- research and knowledge needs
- methodological development
- potential use of information and ongoing engagement.

Scope of the project

The researcher provided an overview of the scoping report, including the main themes and findings. Discussions provided an assurance that the range and content of the review was appropriate to the scope and aims of the project. Specifically stakeholders affirmed that the review provided good coverage of the area and focused on areas of particular interest and importance.

Content of review

Stakeholder engagement took place as the project progressed and this enabled the content to be added to and refined over time. Stakeholders suggested additional sources of information and provided material that was incorporated into the review. Input from kaumatua and attendance at the events detailed above was particularly useful in providing information that was not available from written sources.

Methodological development

A key role of the stakeholder engagement was to ensure that the methodological development was based, not only on identified gaps in the literature, but on identified needs of those working in the sector.

Consultation with stakeholders and interviews with rangatahi reinforced the need for research that privileged young people's voices (both male and female), involved young people in analysis, and covered a diverse range of experiences and insights. Other comments were that mana-enhancing methodologies and robust discussions were needed.

Stakeholders were able to speak from their experience about the best ways of engaging rangatahi, and rangatahi provided some particularly useful insights into the processes and methods that could be used in the research. Overall there was strong support for:

- rangatahi involvement in the research and analysis
- privileging rangatahi voices

- ensuring that the research did not further stigmatise Māori or rangatahi Māori
- processes that were appropriate for rangatahi Māori
- Māori-led research.

Potential use of information and ongoing engagement

Interviews with rangatahi and discussions with stakeholders demonstrated strong support and interest in the topic. These stakeholders believed that the topic of sexual coercion and rangatahi was of considerable interest, and that there was either very little being done or that what was being done could be done much more effectively; this was particularly so for a number of sexuality education programmes in schools. The need to develop Māori-specific approaches that embraced Māori concepts and contexts was also strongly supported. A recurring theme was that there was a need to have these types of conversations.

Stakeholders wanted copies of the report when it was made available and some indicated an ongoing interest in being involved in the research; others offered to assist with the research processes.

Overall the process revealed considerable interest, skills and commitment and demonstrated a strong basis for ongoing developments in the field.

1.4 Terminology

In this document we use the term *rangatahi* to generally cover young Māori 12-25 years of age.

The term *sexual coercion* is a broad over-arching concept, covering a continuum ranging from physical acts of sexual violence to verbal and non-verbal acts and emotional pressure; this report focuses more on non-verbal pressure and emotionally coercive behaviours.

Victim/survivor is used interchangeably with both 'victim' and 'survivor' to indicate that the experience of sexual violence is frequently an ongoing state (Ministry of Women's Affairs, 2009a).

Perpetrator is used for an individual who commits sexual coercion.

This report uses the term *sexuality education* unless quoting others who use the term *sex education*. Sexuality education assumes a wider scope.

1.5 A question of rights

This project sits within an international context of agreements and declarations, to which the New Zealand Government, and therefore its agencies, are committed.

> Local work on sexuality and rights requires very careful and deliberate research. Part of the task is to show how local forms of repression or acceptance can be usefully and accurately captured in the discourse of international human rights. Giving careful attention to the tension between local and general understandings of sexuality can assist us to say what is in fact respectful of diversity in a rights project (International Council on Human Rights Policy, 2009: 49).

Broadly, sexual rights are described as the right to make your own decisions about being sexual, to have protection, to decide what you do and don't engage in, to ask questions and communicate, to be given appropriate information and healthcare and encompassing principles of mutuality, privacy and equity (Palo Alto Medical Foundation, 2010b).

Aotearoa/New Zealand has committed to many international conventions and declarations, several of which are relevant to sexual rights. They include the United Nations Convention on the Rights of the Child (defined as under 18), which New Zealand signed in 1993. The Beijing Declaration and Platform for Action, Fourth World Conference on Women, in which New Zealand was a

participant, determined among other things, to 'Prevent and eliminate all forms of violence against women and girls' and 'Ensure equal access to and equal treatment of women and men in education and health care and enhance women's sexual and reproductive health as well as education' (United Nations Division for the Advancement of Women, 1995). Successive governments have also continued to state their commitment to the implementation of the United Nations Convention on the Elimination of All Forms of Discrimination against Women (Ministry of Women's Affairs, 2006).

1.6 Why sexual coercion is an important issue for Aotearoa/ New Zealand

As well as having a commitment to international conventions, Aotearoa / New Zealand has its own framework for a range of human rights, including health and well-being. It has been argued (see, for example, Robson and Reid, 2001) that the Treaty of Waitangi encompasses not only goals of health equity, but social and health rights, which go beyond health needs.

In the late 1990s the government strategy on sexual and reproductive health focused on promoting 'responsible sexual behaviour to minimise unplanned pregnancies, reduce abortion rates and the incidence of sexually transmitted diseases and HIV/AIDS' (Aspin, 1997: 3). This demonstrates a focus that critics argue denies young people's experiences and the role of desire and negotiation and instead defines sexual health as largely avoiding danger and risk – abortion, unplanned pregnancies and sexually transmitted infections (STIs). Māori concepts at the time saw sexual health as part of a holistic approach, embracing wairua, hinengaro, tinana and whānau 'underpinned by appropriate and adequate education and respect for one another' (Te Puni Kōkiri, cited in Aspin, 1997: 3). By 2001, the government's strategy included promoting 'the right of every New Zealander to make their own decisions about their sexual behaviour, free from discrimination, coercion and violence' (Ministry of Health, 2001), although it still focused on prevention of pregnancy and sexual ill-health.

Sexual coercion is a widespread problem with considerable impacts and often long-lasting effects. Most attention has been paid to more violent forms of sexual coercion. Addressing coercion in its more mundane and everyday manifestations may lead to greater insights into the spectrum of sexual coercion and violence.

Sexual violence prevention has broader links to violence prevention in general and to violence against women. Because of this, factors that contribute to sexual coercion may also contribute to a wide range of health and social problems such as gender inequity, abusive relationships, unplanned pregnancies, STIs, and low self-esteem and efficacy.

1.7 Why sexual coercion is an important issue for rangatahi Māori

Adolescence and young adulthood are perceived as key stages in development (Hird and Jackson, 2001: 28), a time when young people are at greater risk from sexual violence, are at a critical development point and are more easily influenced by interventions (Auckland Sexual Abuse HELP, 2002; Carmody, 2009). Young New Zealanders in general experience high rates of STIs and abortions; the most common STI, Chlamydia, can cause infertility in females. Young adulthood is also a time when cultural expectations and norms, including ideas around masculinity and femininity are particularly powerful (Auckland Sexual Abuse HELP, 2002). These expectations and norms are associated with coercive behaviours, which in turn are associated with increased risk taking and a range of negative outcomes.

There are considerable disparities between Māori and non-Māori populations, including socio-economic disparities and disparities across a range of outcomes, including sexual health status. The Māori population is youthful and experiences high rates of sexual victimisation, a young age of first pregnancy and concerns around sexual violence and violence more broadly.

Rangatahi Māori are commonly framed as a problem, an 'at risk' population that is part of a violent culture. This combination of experience of sexual

victimisation and stigma from the dominant culture at a key stage in development makes sexual coercion an important issue for young Māori. Youth development is one area where strengths rather than deficits are a focus. However, issues of sexual relationships are not much covered in this field and, despite being profoundly affected, rangatahi are seldom heard on this issue.

1.8 A primary prevention approach to sexual coercion

This review was informed by presentations and discussions at four events that took place during the course of the project, listed in section 1.3. These events demonstrated a strong push and commitment from providers, researchers, local and national bodies and community members to address the high levels of sexual violence in Aotearoa/New Zealand. In addition, the attendance of international speakers showed strong alignment with global concerns

As part of this commitment, the Taskforce for Action on Sexual Violence (TASV) provided a report to government in July 2009 which incorporated the views of Te Ohaaki a Hine-National Network Ending Sexual Violence Together (TOAH-NNEST). TOAH-NNEST is an umbrella NGO organisation that has provided a co-ordinated voice across the sexual violence sector in the areas of prevention, services for victims, offender treatment and the criminal justice system.

In the area of sexual violence prevention, the focus was on gathering evidence to inform prevention efforts that would likely be successful in the Aotearoa/ New Zealand context. Details of the specific projects undertaken can be found within the report. One of the recommended future actions is about investing in Māori-led solutions:

> The prevalence, incidence and nature of sexual violence affect Māori in ways different to those of non-Māori. Prevention

strategies need to have resonance and practical applicability within dynamic and changing Māori communities and contexts.[3]

This project is intended to be complementary to the research and prevention models discussed in the Taskforce Report. One of the key goals of MWA is to build evidence and share information to enhance efforts to prevent sexual violence for Māori women.

Primary prevention has had the least attention in literature and in interventions that deal with sexual coercion. Because of this, and the importance of not only assisting victims to recover, but reducing the number of victims overall, this review has particularly examined the literature in light of how it might inform primary prevention approaches.

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[3] http://www.justice.govt.nz/policy-and-consultation/taskforce-for-action-on-sexual-violence/the-taskforce-report; page 21

2.0 Resilience

2.1 Introduction

In the field of health and well-being, including sexuality and sexual health, we tend to know more about the risk factors than the protective factors. Resilience in general has become of increasing interest in Aotearoa/New Zealand. A number of resiliency projects are being conducted, including a literature review of whānau resilience (Te Puni Kokiri), projects funded under the International Collaborative Indigenous Health Research Partnership (ICIHRP) and *Pathways to Resilience*, a research programme being carried out at Massey University and funded by the Foundation for Research, Science and Technology. However, there is little available literature on resilience and sexuality, including the question of why some people do better than others after sexual assaults.

In this chapter we examine the concept of resilience and what we know about the field in relation to Māori and other indigenous peoples. This involves some critique of resilience as a more individual concept rather than a primary prevention approach and an examination of the assumption that particular forms of cultural activities or markers are related to increased resilience.

2.2 What is resilience?

Owing much to ecology, developmental psychology and psychiatry, the most commonly provided definitions of resilience revolve around notions of successful or 'positive adaptation despite adversity' (Fleming and Ledogar, 2008: 7; Kirmayer et al., 2009; Kalil 2003, cited in Te Puni Kōkiri, 2009). In health and well-being, the ways that people respond to risk and how people make choices to protect themselves against adversity, are central concepts in resilience (Te Puni Kōkiri, 2009: 4).

Early studies of resilience (Rutter, 1987) sought to explain the success of certain young people against overwhelming odds. As a reaction to the shortcomings inherent in framings of risk, the move towards a more

strengths-orientated approach to development, emphasising hope and potential, has seen resilience theory attracting significant interest (Howard et al., 1999). Resilience has evolved to include a range of factors that recognise not just the 'absence of pathology' but well-being (McClure et al., 2008: 83).

Bennett uses a bucket with holes metaphor to represent the concept of resilience (Te Puni Kōkiri, 2009). The idea that the holes are challenges that need to be dealt with (plugged) is useful in conceptualising responses and resources that individuals and families use in the face of adversity. The idea that resilience involves both adversity and healthy struggling against that adversity raises a number of issues. Along with the notions that positive development can occur as a result of challenge (Ware, 2009) and that 'resilience is demonstrated by successfully overcoming challenges' (Kalil 2003, cited in Te Puni Kōkiri, 2009: 17) comes the question of why some deal with adversity and others do not.

2.3 Internal and external assets

The question about dealing with adversity has increasingly involved gaining insights into protective factors rather than the risks. In relation to this, resilience looks at internal assets individuals possess, that enable them to bounce back from adversity.

Benson et al. (2004) stress the importance of both internal and external (community) developmental assets that surround or are embodied in young people. Increasingly, attention has been placed on strengths and characteristics of developmental contexts, social environments (Blum, 1998) and connection to family, school, peers, community and other institutions as pathways to better outcomes for young people (Resnick, 2000).

Although resilience may be able to provide ways forward in building the strengths of individuals to face adversity, different populations and groups have differential access to internal and external assets and face different levels of adversity. For Māori, colonisation has meant that institutional

decisions are being made for, rather than by, Māori and it can be a struggle to 'access…the institutions of Māori culture which provide strength and a source of psychological, spiritual, cultural and physical well-being' (Lawson-Te Aho, 1998 cited in Pihama, 2008: 17). External pressures may also mean that people who live in areas of relative deprivation where, for example, 'drugs, gangs and violence are prevalent… have less room for error than do middle class parents for whom being over- or under- protective is less likely to have catastrophic results' (Robertson and Oulton, 2008: 16).

As a source of strength for Māori through positive connections, whānau can provide important contributions to internal assets of individuals. The wider environment provides the external assets that contribute to whānau both thriving and struggling. The recent government commitment to Whānau Ora acknowledges whānau as a building block of Māori society (Hamilton-Katene, 2010). It provides a way of dealing with some of the concerns that resilience focuses on, as well as looking more widely at societal structures and responsibilities.

2.4 Resilience and individuals

Even when encompassing factors such as family, and more external assets like community environments, resilience research still measures these at the level of the individual, focusing on how the individual responds, rather than on what the individual is responding to (Kirmayer et al., 2009; McClure et al., 2008). Meanings of resiliency and approaches reflect the researcher's positioning, and range from individual psychometric approaches to psychosocial measures and wider. A major criticism of this is that it tends to 'downplay or ignore higher-level systemic and structural issues that may be the root causes of individual suffering and hold potential for more effective interventions' (Kirmayer et al., 2009: 70).

2.5 Resilience and inequities

More recent approaches emphasise the global, cultural and other contextual factors that impact on resilience (Ungar, 2008) and the importance of access to multiple resources (Te Puni Kōkiri, 2009).

Class, power, gender and ethnicity are often ignored in resilience framings that assume people are able to be reflexive and make rational choices around risk (Lupton 1999, cited in Te Puni Kōkiri, 2009). However, the 'international literature shows resilience for indigenous people generally has roots in a history of colonisation' (Te Puni Kōkiri, 2009: 7). The more individualistic approaches that are a strong focus of resilience do not fit easily with primary prevention approaches that aim to address inequities. *As a society we need to ask what types of challenges are acceptable and what happens when challenges are inequitable and ongoing.*

2.6 Resilience and discrimination

There is growing research and literature on discrimination and the role it plays in producing and reproducing inequities. Discrimination operates through multiple pathways from socio-economic to stress and trauma and is implicated in a number of adverse outcomes (Harris et al., 2006; Kearns et al., 2009; Williams and Mohammed, 2009). In Aotearoa/New Zealand, where there are significant inequities between Māori and European populations, the role of racial discrimination as 'a social determinant and fundamental driver of such inequalities' (Harris et al., 2006: 1429) is an important and under-researched field.

Wexler et al. (2009) sound a more positive note, proposing that marginalisation and identity can foster resiliency by creating a sense of individual rather than collective struggle. Using this framing they propose that resistance to oppressive or discriminatory forms of adversity 'may foster more positive health outcomes' (Wexler et al., 2009: 566). However, stress caused by racial discrimination may operate differently from other forms of stress, and

may not be amenable to conventional stress management strategies (Williams and Mohammed, 2009: 40).

2.7 Resilience and culture

Although adaptation is a part of resilience, the ability to preserve culture and community is also seen as a positive feature of resilience. Due to the role that communities play in the lives and values of their members, relationships and networks are often mentioned as important aspects of indigenous concepts of resilience. This, however, must be applied where relevant, as one approach will not fit all communities (Kirmayer et al., 2009). In First Nations communities in America, Hallett et al. (2007, cited in Kirmayer et al., 2009: 86) found that 'the preservation of indigenous languages had the strongest correlation with lower youth suicide rates…however, this effect of language may reflect the distinct context and variability of groups in BC'.

Pharris et al. (1997) write that, in the United States, some research has shown 'lower suicide rates generally…in tribes adhering to more traditional ways of living' (LaFromboise and Bigfoot, 1988 and Orenstein, 1994 cited in Pharris et al., 1997). While it might be tempting to say that traditional ways are the answer, it may also be about the ways tradition fosters supportive networks and relationships. The key point being that a broad range of positive connections, both traditional and non-traditional, may be strong contributors to resilience. In line with this argument, Kirmayer et al. (2009) reported on studies that showed indigenous people who saw family and community ties as essential to their thriving showed higher levels of resilience. In relation to educational success and resilience in young Māori women, Merritt (2002), found that a range of connections played an important part – school connections, friends and whānau, including aunts and grandmothers. These studies indicate the potential for underlying values of whānau, collectivity and belonging to translate into other settings and that there are diverse ways of supporting young people that may or may not fit the 'traditional' framing.

2.8 Māori culture and resilience

It is often suggested or stated that 'secure cultural identity' is a prerequisite to Māori mental health and is a protective factor in health in general. This has generated an interest in traditional markers as potential factors in resilience for Māori and for young Māori in particular (see for example Ware, 2009). In 1996 Durie et al. stated:

> Although it is not possible to describe strong and distinctive trends between health status profiles and cultural identity, the Manawatu-Whanganui Regional results are interesting in that they suggest a secure identity may protect health (Durie et al., 1996: 18).

This suggestion has been widely referenced and appears to have increased in its strength and credibility through reiteration and over time (see, for example, Durie, 1999; Waetford, 2008). Waetford cites Durie:

> A secure cultural identity is also important for the well-being of Māori requiring access to, and connection with te ao Māori including resources such as the Māori language, family networks and ancestral land (Durie, 1999 cited in Waetford, 2008:49).

Māori identities are diverse and there are a range of dynamic and multi-layered markers of identity and connections that need to be considered. Research to date has tended to rely on more traditional markers of Māori identity such as te reo and links to marae. Generally what are considered to be protective factors are associated with cultural ideals, in particular promoting values and behaviours that are seen as belonging to pre-colonial times. While we might, on some level, know or feel that these relationships make sense, the evidence, nationally and internationally, that certain forms of 'traditional' connections and activities are correlated to a range of positive outcomes is inconsistent. The complexity of the issues does not, however, stop a strong belief that what young people need are particular forms of cultural connections to promote their health and their secure cultural identity.

Acting on these suggestions or on our feelings that these 'traditional' markers must be health promoting has both positive and negative implications. We invoke judgement and develop notions of real or authentic Māori, promoting interventions that provide particular forms of connections; the Māori version of one size fits all. We acknowledge diversity and at the same time run the risk of essentialising what an authentic Māori looks like, what a healthy Māori looks like and what we need to do to achieve health for Māori. Research that sets out to study diverse forms of connections and their links to Māori identity and well-being has not been conducted, leaving a gap in our knowledge.

2.9 Indigenous critiques of resilience

Although of interest to a number of indigenous communities who 'wish to learn as much as possible from their youth and families who are doing well' (Chewning et al., 2001), some indigenous commentaries critique the relationship of resiliency concepts to failure. Critiques are aimed at the individual nature of resiliency and the way that, inherent in the idea that some succeed in the face of adversity, is the notion that others fail. A more collective and positive approach has been proposed that is 'closer to a sense of direction, wisdom or common sense – all positive attributes' (Burack et al., 2007 cited in Andersson, 2008: 4). Edwards et al. (2008) described 'the negative tone implicit in 'the capability of individuals and systems to cope and flourish successfully in the face of significant adversity or risk' (Reid et al., 1996/97 cited in Edwards et al., 2008: 113), preferring a strengths-based approach encompassing the positive resources of indigenous Canadian communities, such as spirituality and family strength.

2.10 Resilience and sexual behaviour

Clark et al. (2006) write that there is very little literature on 'the role of protective factors and resilience for Māori and other indigenous youth, particularly with regard to sexual and reproductive health'. Their study supports others in confirming the importance of strong and positive connections with families in healthy sexual choices and resilience. They also

reiterate that resilience 'is mediated by multiple domains in the wider family, social, economic and political environments'.

Some of the Māori men in the study by Fenaughty et al. (2006) who had experienced coercion, reported that their networks and support systems had assisted them to heal, including involvement in active processes to cleanse and heal their wairua.

Resilience studies found that perceptions of peer sexual norms around abstention were related to participants' abstention, and that 'parental knowledge of adolescents' whereabouts and friends was significantly related to sexually active students not having had sexual intercourse in the last three months' (Chewning et al., 2001: 278). The authors acknowledge, however, that the mechanisms are unclear and most risk factor (and resilience) studies do not 'explain the meanings of socio-cultural factors, nor…more complex factors influencing sexual behaviours such as those pertaining to the relationship' (Jackson, 2004: 125). In one study it was 'observed that knowledge of grandparents was a predictor of lower sexual risk taking' (Landau, 2007 cited in Kirmayer et al., 2009: 80). These findings also reinforce the importance of family connections in promoting youth well-being.

2.11 Summary

Resilience concerns itself with the ways people respond to risk and protect themselves in the face of adversity. It examines the ways we access and use resources to counter what we face throughout life - to resist, to survive, to heal and to rebound.

Resilience is about strengthening the ability of individuals and/or their communities to respond to and rebuff assaults. Resilience operates most comfortably as the flipside of risk, addressing itself to traits of individuals and focusing on responses and reactions rather than on the adversity itself. The impacts of wider societal conditions and the ability to stop modifiable

environmental assaults are critical components of sustainable change, which resilience alone does little to address.

Internal assets are the resources embodied in young people and external assets are those that surround them. These assets are drawn on in the face of adversity. However, disparities, such as those between Māori and non-Māori, demonstrate that various populations are likely to have differential access to both internal and external assets. Māori also face inequitable levels of adversity, and not all adversity is healthy nor should it be tolerated.

Although a growing field of interest, to date there is little written about resilience and Māori. What little indigenous resilience literature there is generally refers to communities, families and relationships as important considerations for indigenous resilience. Overall, considerable literature included in this review points to feeling valued, safe and respected, having strong social supports and a positive sense of connection and belonging as important pathways for better health outcomes.

Strong family connections are described as protective factors for Māori along with particular traditional markers associated with cultural ideals, in particular promoting values and behaviours that are seen as belonging to pre-colonial times. Suggestions that particular forms of Māori culture and markers of identity are associated with a range of positive health outcomes are not strongly or consistently supported by the literature. The key point is that a broad range of positive connections, both traditional and non-traditional, may be strong contributors to resilience. More research and critical examination is needed to review these suggestions and to provide a clear way forward.

3.0 Rangatahi and sexuality

3.1 Introduction

When sexuality researchers and theorists talk about the construction of sexuality through history, many fail to recognise or even acknowledge that, for indigenous peoples the histories they talk of are very different. To reform sexuality, these experts refer to the past and use analyses and, largely, negative critiques, to inform current and future developments.
In Aotearoa/New Zealand these are imported histories; Māori are more likely to look to the past and see values and models that might inform current approaches and redress balance to 'enhance our capacity to live together peacefully as a whānau and communities' (Grennell, 2006).

In this chapter we examine sexuality, particularly notions of masculinity and femininity, and influences on young people's experiences and constructions of sexuality and gender, with an emphasis on what little we know of Māori sexuality. We include a brief overview of pre-colonial concepts around women, men, gender roles and sexuality and the advent of very different concepts that were imposed as a result of colonisation. These illustrate the sweeping changes that have occurred in Māori society in a relatively short time and provide a basis for looking at Māori and gender roles and how they might be implicated in sexually coercive behaviours. This theme is continued in the next chapter, which looks at violence and its relationship to Māori society and gender roles.

3.2 Māori and sexuality

> Sexuality was enjoyed in many forms. People chose partners of either sex for pleasure, and same sex love was not condemned or vilified. Continuing one's line - having children - was nevertheless a priority. High performance and erotic skill were greatly admired, and accomplished individuals, both male and female, feature prominently in the chant poems of their time, their physical attributes and relevant behaviours fondly detailed (Starzecka, 1996: 32).

Most of the information we have on Māori and sexuality looks at the past. Māori scholars argue that Māori embraced sexuality and sexual diversity as normalised features of life (Te Awekotuku, cited in Aspin and Hutchings, 2007). Sexuality was not hidden or shameful and explicit waiata and moteatea exist about sex, in all its diversity (Kerekere, 2010). Te Awekotuku (2005) describes a moteatea for a young man who fell in battle.

> Ko te tama i aitia e tera wahine e tera tangata.
> A youth who was sexual with that woman, with that man.

The key word aitia was changed when the lament was published in Apirana Ngata's anthology to the less erotic 'awhitia', meaning hugs. She describes the lack of shame expressed by young Māori men who had sex with Reverend William Yate in the Bay of Islands in the 1820s: "They simply declared that they were unaware of any sinfulness in such practices and that Yate had not initiated them" (Te Awekotuku, 2005: 7).

Colonisation, including the language of colonisers, has played a significant role in the interpretation of Māori sexuality. The much quoted representation of Māori women by Joseph Banks as being 'skittish as unbroken fillies' and 'lascivious' (Salmond 1992, cited in Robertson and Oulton, 2008: 5) is an illustration of the ways in which Māori women were depicted within a Western gaze. However, Glavish has recently provided pithy summaries of cultural concepts about women that are very different from the colonial sentiments of Joseph Banks:

> We have forgotten the memories of the tapu of women; if we don't learn this tapu and pass it on to our rangatahi what erodes is the consciousness of that tapu (Glavish, 2010).

Women continue to be aligned to the moon and the earth, and as the keepers of te whare tangata, give birth to future generations. The strength of women

and her bond with children is also embedded in the likening of women to the puriri.

> The strongest tree in the forest is the puriri, it is female and shows the strength of women, it can even blunt a chainsaw or an axe, but it only takes a little mokomoko (a caterpillar) to get to the heart of the tree. This is likened to our children (Glavish, 2010).

Puketapu describes the balance between taha tane and taha wahine and voices concerns that males focus more on the 'hunter, gatherer, protector side, which we have spent all our time developing our behaviour around, and (less on) our taha wahine part, which is our caring and nurturing side' (Te Karaka, 2009: 6). He calls for better 'models of togetherness for men' than the pub (p.7) and for men to better understand themselves in order to have more positive roles and contributions to whānau. However, '…there is now an imbalance in terms of resources available to men. Now it's time for our men to stand up and develop solutions to their health problems and become 'part of the solution rather than being continually criticised as being the problem' (Te Karaka, 2009: 2).

Today, we try to recover and restore our knowledge, examining the ways that stories have been changed and translations have made aspects of sexuality, such as same-sex relationships, invisible (Kerekere, 2010). Desecration and mutilation of whakairo genitalia and the removal of carvings, some of which depict same-gender couples embracing, has also contributed to the reframing of Māori sexuality in line with more narrow and intolerant Christian views (Aspin and Hutchings, 2007)

Very little is written about Māori sexuality today; most of what is available looks at Māori as part of general or specific populations in relation to risk factors and outcomes such as unplanned pregnancies, Sexually transmitted infections (STIs) and sexual violence (Jackson, 2004). Jackson's (2004) review of published literature on young people's sexuality and sexual health revealed a gap in research on young Māori. In addition some studies in the

general arena were not particularly useful for Māori, or failed to mention Māori. As a result, the dominant framing of rangatahi and sexuality is as something problematic and risky, health having 'become a new term of judgement regarding sexual behaviour' (International Council on Human Rights Policy, 2009: 2).

3.3 Gender roles and relationships

> Ranginui and Papatuanuku are starting points for many Māori understandings of the roles of men and women. Papatuanuku can be understood as meaning that beyond one's thighs is the formation of people (Glavish, 2010).

Pre-colonial gender roles are well covered by a number of Māori writers, with the roles of men and women commonly seen in terms of balance and mutual obligations, not of one having dominion over the other (Glavish, 2010; Mikaere, 1994). Women had equally important roles, shared collective responsibility and occupied leadership positions, evidenced by waiata, whakatauki, haka, histories and the naming of whare tupuna, hapu and iwi. Collectivity and collective responsibility ensured value and respect for each person and for their contributions and the use of non-gender specific pronouns are 'a powerful indication that there was no hierarchy of sexes' (Mikaere,1994).

Today, constructions of masculinity and femininity provide oversimplified notions within which young people attempt to negotiate complex feelings and relationships (Hird and Jackson, 2001). In addition, dominant norms and discourses promote the idea that heterosexual relationships and heterosexual sex are natural, taking away the need for negotiation (Waldby et al., 1993 cited in Hird and Jackson, 2001). Hird and Jackson (2001) pointed out the complex contradictions around active and passive roles and how this presents a major challenge for negotiation in sexual relationships.

Young people have diverse reactions to dominant sexuality and discourse, with some resisting and challenging these notions and others positioning themselves within sexual notions of societal acceptability, such as monogamy and marriage (Carmody, 2005: 473).

Male and female dichotomies

Most studies on young people and sexuality tell us more about male sexuality than about female sexuality. Female sexuality is often described in relation to male sexuality and is framed as passive, rather than active - men initiate and women respond (Hird and Jackson, 2001); men seek consent and women give it or withhold it (Robertson and Oulton, 2008); men are more driven and women more ambivalent about their sexuality (Robertson and Oulton, 2008). These notions are set alongside supposedly negative representations of who people are when they fail to conform; such as stud versus wuss and slut versus angel (Hird and Jackson, 2001). Although girls and boys were aware of double standards, British male students described girls as leading their boyfriends on in order to 'enjoy the power and control' (Hird and Jackson 2001: 71).

Sexuality and desire

Hird and Jackson (2001) stated that their:

> …findings strongly suggest young women's sexuality is rarely explored in its own right, but almost always as a secondary desire, responsive to active male sexuality. We think the lack of narratives concerned with female desire is a reflection of the lack of access to, and use of, feminist discourses by young men and women… we need to work towards ways of encouraging young women to express a positive, desiring sexual identity in spite of a heteronormative narrative that reinforces the primacy of male sexuality…an assertive and autonomous sexuality (p.41).

Drawing on narratives from two studies, one among 'culturally mixed' groups of high school students in Aotearoa/New Zealand and one in Britain, Hird and

Jackson (2001) found that adolescent ideas around sexuality showed consistent Western gender constructions. Young women drew on limited feminine notions around male needs and desires and boys talked about being driven by hormones and desire. Both males and females felt that males had a stronger sex drive and positioned women as gate keepers. 'Male peers served as a form of sexual police' (Hird and Jackson, 2001: 31) with the number of girls that a boy had sex with being an indicator of his masculinity.

Young women commonly describe sex as 'it just happened' (Tollman, 2001 cited in Carmody, 2005), tying in with the 'dominant belief that good girls do not have sexual feelings of their own' (Carmody, 2005: 475). However, Jagose (2010) points out some of the complexities around the perception of female desire; namely that indifference to female pleasure, while nevertheless requiring its registration in the form of orgasm, is a part of dominant norms around masculinity and performance. It is not difficult to see how these framings link to the idea that the role of coercion is to persuade passive females who have little active desire of their own and that, once persuaded, female pleasure can be elicited by the male.

Controlling behaviours in relationships

Towns and Scott (2008, p.6) found that 'little research has been carried out on the social values and beliefs that contribute to young women's experiences of control, jealousy or possessiveness in relationships with a boyfriend'. Their study of young women, aged 18 to 25 years, predominantly of European New Zealand ethnicity with one identifying as Pakeha/Māori described a range of ownership behaviours, including possessive touching, monitoring, criticism and physical violence. Three discursive themes contributed to ownership practices: 'the culture of cool; the bitches and hos' culture and the mates' culture' (Towns and Scott, 2008: 8). Cool is the objectification of women as ideal possessions. The bitches and hos' culture reduces women's identity to their sex; sexually denigrating and misogynistic images and music contribute to these constructions. Peer group influences operate to ensure

that, as part of the mates' culture, men maintain their dominance and women remain as possessions or men face charges of being 'pussy whipped'.

Sexuality and well-being

These framings not only impact on the ways that young people construct sexuality, but have implications for well-being more broadly. Young women who see themselves as sexual objects may have lower self-esteem, as may those who internalise notions of femininity, where female desire is either absent or able to be bent to male desire and will (Impett et al., 2006). A further cause for concern is that sexual self-worth is linked to less sexual experience, less use of protection and the concern that girls 'may sacrifice their sexual health in the service of preserving relationships and engage in more sexually risky behaviour' (Impett et al., 2006: 132-133). Although most of the available literature refers to non-Māori, Clark et al. (2006, p.1) found that 'Māori youth who use contraception consistently are more likely to report getting enough time with a parent'.

3.4 Negotiating relationships

To provide more equitable ways of conducting relationships that acknowledge the needs of both participants, writers discuss notions of ethical sex and respectful and ethical relationships. Negotiation is a key feature of these relationships, along with mutuality, responsibility for each other and self-reflection (Carmody, 2005; Casey and Lindhorst, 2009; Fanslow et al., 2010). However, concerns have been voiced around the term 'healthy relationships', specifically that it reflects medical models, notions of surveillance and binary notions around what is healthy and what is not healthy (Carmody, 2009). Consistent with much of the health field, this often lends itself to a focus on what was unhealthy rather than healthy, and to approaches that do not easily encompass complexity. She argued that we need to go beyond replacing the healthy/unhealthy discourse with ethical/unethical discourse and need to encourage 'young people to reflect on their own behaviour … (and) their own ethical stance in relation to themselves and others' (p.9).

Sexual relationships are inextricably tied up with sexual behaviour and sexual health. The Palo Alto Medical Foundation (2010a) outlines features of ethical sex including: being comfortable with your body; understanding, being comfortable with and assertive about your sexuality and pleasure; communicating with and respecting others; mutuality and protection. These are similar to the types of things that are included in broader definitions of sexual health, such as the one by Tolman, Striepe, & Harmon (2003 cited in Impett et al., 2006) who argue that 'sexual health must include, among other things, the ability to acknowledge one's own sexual feelings, the freedom and comfort to explore wanted sexual behaviour and refuse unwanted behaviour, and the requisite knowledge and ability to protect oneself from sexually transmitted infections (STIs) and unwanted pregnancy.'

Achieving these ideals is not easy. Anglo-Australian youths valued self-care and care for their partner, mutuality, respect and active communication (Carmody, 2005) and had a number of ways of negotiating pleasure, including verbal and non-verbal, trial and error, trust and self-reflection. However, they also identified barriers such as shame, anxiety, self-consciousness, lack of experience and previous bad experiences. Danger was also described in a variety of ways by participants, including fears about performance, reactions to homosexuality and sexual expression outside of perceived norms (Carmody, 2005).

3.5 Sexual exploration

Young people are at a time in their lives when curiosity and exploration are strong features of their development, including sexual development. Although risk framings predominate, some descriptions see sexual exploration as a generally unproblematic part of development 'where there is no need to use fear, threats or coercion where the activity (between similar age participants) is mutual and consensual'. In contrast, sexual exploitation is where 'one person coerces or is forceful with another or commits a sexual act on a younger, less powerful or intellectually disabled person' (Boyd & Bromfield,

2006, Stopitnow! 2007, Witten-Hannah et al., 2004 cited in Tiaki Tinana Project, 2008:14). For the young people in Carmody and Willis' (2006) study, casual sex had less to do with ethical conduct and negotiation; it was more about getting sex than who the sex was with.

Exploring sexuality 'exposes girls to a field of behaviour that is highly regulated by young men' (Hird and Jackson, 2001: 28). Age of first intercourse has been raised as a concern for a number of reasons; early age intercourse is associated with feelings of regret, higher risk taking, and coercive behaviours (Carmody and Willis, 2006). The Aotearoa/New Zealand Youth 2007 survey of 12 to 18 year olds found that 56 percent of Māori had ever had sexual intercourse and 40 percent were currently active, a larger proportion than in 2001; age of first intercourse was not asked (Clark et al., 2008). Although three quarters of the Māori students used contraception always or most of the time, Māori were less likely to report this than Pakeha/New Zealand European students (87.3 percent). In another study, most women (70 percent) who had sexual intercourse before the age of 16 regretted it (Dickson et al., 1998). Men were less likely to report that they should have waited longer (16 percent of males compared to 54 percent of females) and more likely to report that the timing of first intercourse (49 percent of men and 38 percent of women) was about right. The authors concluded that risk was shared unequally between men and women.

A study by Dickson et al. (1998) of coercion and first sexual intercourse among 477 men and 458 women in the Dunedin Multidisciplinary Health and Development Study found that 0.2 percent (n=1) of men and 7 percent (n=30) of women reported being forced on their first occasion of intercourse. For women, coercion increased the younger the age of first intercourse.

3.6 Talking and learning about sexuality

Young people are subject to multiple sources of information to inform their sexual development, from school-based programmes and curriculum, peers, family and a range of media. Experiential learning, particularly reflecting on

and learning from past experience (Carmody, 2005), is also a key feature. Research shows that friends are a common site of information, sons and daughters are more likely to talk to their mothers and discussions between fathers and sons are rare (Carmody and Willis, 2006).

3.7 Television viewing and sex

Television has been and continues to be a pervasive influence in young people's lives. Parental concerns about sexual content on primetime television in the USA and the observation that these are numerous and increasing has led to research on its impacts on young people. A particular form of sexual content, which Kim et al. (2007) describe as the Heterosexual Script, may be sought out particularly by young people 'engaging in their first relational and sexual experiences' (p.146). This may serve to reinforce and normalise particular stereotypical forms of sexuality, such as heterosexual attractions, and stereotypical male and female gendered behaviour.
In addition 'television offers mutually impoverished constructs of male and female sexuality, which may ultimately preclude boys' ability to say no to sex and girls' ability to say yes...male and female characters were either punished for deviating from or rewarded for complying with the heterosexual script. Boys/men who acted feminine risked being teased or labelled homosexual, and girls/women who expressed sexual desire risked being called a slut' (p.154). The script encourages females to negate their own desires and agency as they wait to be chosen by males. However, the effects of sexual content depended on what messages adolescents were viewing, the viewer's gender and the sexual outcome. Particular impacts were associated with viewing the Heterosexual Script and the viewer's gender (Tolman et al., 2007).

The gender norms, dress and dance styles of Black American hip hop have a strong influence on young men and women in Aotearoa/New Zealand (The Next, no date). American hip hop lyrics often talk about women as 'hos' or 'bitches'; there is some concern that as the genre becomes more

commercial in New Zealand, women will be increasingly depicted in scanty clothing doing little but dancing provocatively (McAllister, 2005).

However, the lyrics of locally produced hip hop rarely use these imported terms. In *True Balance,* Scribe talks about 'My Lady' and Che Fu calls on his 'sister' for help. Local Māori and Pacific hip hop lyrics and culture have already expressed concerns about sexual violence and included positive messages about breaking cycles of violence and abuse (The Next, no date). Local hip hop and international music videos (Dutt, 2002) have been identified as potential channels for interventions against violence aimed at youth.

3.8 The internet and sex

In addition to television, many young people now have access to immediate information and interactions globally. The internet is a powerful networking tool, with positive and negative implications. Pornography and the internet are described as shaping young men's attitudes, with the effect of pornography possibly being exacerbated by alcohol (Robertson and Oulton, 2008). Cherrington (2010) studied a number of internet sites, including blogs and pornographic sites, and found a range of concerning events, including an internet competition that involved getting a woman on campus drunk and filming her. She found that negative discourses around females, such as 'filthy sluts get what they deserve' are all too frequent on the net.

> Net porn is a pretty poor sex educator but it is being used as one (Cherrington, 2010).

3.9 Summary

Much discussion in relation to Māori sexuality has centred on pre-colonial society and the ways in which colonisation has undermined Māori social structures, values and ways of dealing with transgressions. Pre-colonial concepts of men and women emphasised the strength and importance of both; relationships between men and women were characterised by the idea

of balance and mutual collective responsibility. Within this context Māori have attempted to articulate stories and learnings from the past that demonstrate more diverse, inclusive and open attitudes to sex and sexuality, to inform and guide current and future generations. Contemporary scholarship on Māori sexuality is sparse and mainly located within the domain of health.
The dominant framing of rangatahi and sexuality is as something problematic and risky.

Sexual health often focuses on sexual ill-health - the examination and prevention of negative outcomes – and is particularly concerned with 'risky' sexual behaviour, such as unprotected sex. These approaches often lead to the framing of sexual exploration and initiation as problematic, something to be stopped rather than developed.

Dominant discourses and norms around femininity and masculinity are pervasive and are more about male sexuality than female sexuality. Female sexuality is often described in relation to male sexuality and is framed as passive, rather than active - men initiate and women respond. In addition, there is little information about desire and pleasure; particularly absent are discussions of female desire.

These dominant norms leave little room for the development of mutuality and negotiation in relationships, lending themselves instead to ideas that men seek consent and women give or withhold consent. Some literature suggests a greater emphasis on the ethical dimensions of sexual relationships, where the needs and desires of both partners are equally expressed and respected. The marginal and contested representations of Māori sexuality suggest that this is a domain of potential and concern that is in need of liberation from the constraints of colonial hegemony to enhance the well-being of Māori people and communities.

Young people learn from, and are influenced by, multiple sources, including peers, family, television, the internet, music and other forms of popular culture; experiential learning is also a key feature of sexual development.

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For rangatahi Māori, these studies raise questions: How do young Māori perceive gender roles? How do they resist and conform to dominant constructions? How do they negotiate and reflect on their relationships? What are the most influential sites for their sexual behaviour and attitudes?

4.0 Violence and society

4.1 Introduction

In this chapter we look at the ways that various forms of violence are condemned or condoned by society, highlighting the need to look at interpersonal violence within the wider context of colonisation and patriarchal structures. This chapter also examines themes around Māori and violence, particularly the idea that Māori condone violence, are silent and have a patriarchal culture that supports violence against women. In the context of colonial interpretations and transformations of Māori society, negative stereotypes are discussed, raising concerns around the representation of Māori, particularly in the media.

4.2 Violence and societal norms

Social structures contribute to sexual violence, gender-based inequities, social norms, violence such as war and 'a lack of community accountability for perpetrators of sexual violence' (World Health Organization, 2002 cited in Casey and Lindhorst, 2009: 103). Societal determinants of sexual violence include wider unequal power relationships related to heterosexism, racism, colonisation and economic factors, which among other things limit options and choice. We also receive mixed messages about the appropriateness and place of violence in society and we grow up surrounded by these contradictions (New Zealand Family Violence Clearinghouse, 2005).

> It is simply futile to attempt to combat interpersonal violence without addressing the fact that we live in a world structured by violence. It makes no sense to say that it is not OK for a man to hit his wife, but it is OK for him to bomb civilians in Iraq (Smith, 2000: 1-2).

Robertson and Oulton, when discussing the New Zealand study by Fanslow and Robinson (2004) and unpublished raw data from Robertson Simpson, Whiteman and Karapu (Robertson and Oulton, 2008: 17) concluded that 'The implication from these studies is clear: sexual violence is strongly associated

with domestic violence'. In addition, attitudes towards gender and relationships are linked to attitudes about violence towards women (Fanslow et al., 2010). Sanday (1981, cited in Casey and Lindhorst, 2009) argues that societies that were strongly patriarchal, tolerant of violence and had greater gendered workforce and political structures than other societies showed greater evidence of ''rape-prone' levels of sexual violence' (p.95). Constructions of male dominance and control and female subservience, including historically-based Western notions of women as property and marriage as ownership, constitute a 'rape culture' (Robertson and Oulton, 2008). 'Cultural Spillover' Theory hypothesises that where violence is sanctioned in some environments, this spills over 'into unsanctioned arenas, such as interpersonal relationships' (p.95). These sorts of ideas underpin - highly contested - accusations that blame supposed elements of Māori culture for being patriarchal and warrior-like and, therefore, contributing to high levels of violence among Māori. They refer to particular interpretations of the past, and rarely consider the complex and sweeping changes that have taken place as a result of colonisation.

The introduction of the English Acts Act, passed in 1854, made all English laws applicable in Aotearoa/New Zealand. Although there were various exemptions and debates, Māori relationships were by and large, increasingly subject to and seen as 'governed by the laws of the land' (Seuffert, 2006: 38). Durie (2004: 4) describes this as 'New Zealand's first race-based policy. Built on the presumption that English common law had a universal dimension, the culture, customs and conventions of Britain were imposed on all New Zealanders to the benefit of a few.' The law acted differentially for men and women; women did not have control over property once they married, women required more rigorous grounds for divorce than men (Sparticus Educational, no date) and marital rape was not recognised as a crime until the Crimes Amendment Act in 1985 (Harrison, 1997). Colonisation saw the assumption of regulatory responsibility by the Crown along with the transformation of Māori sexuality and relationships between Māori men and women.

The destruction of whānau and iwi structures was facilitated by English notions of family as a unit with a man at the head, leading to women's increased isolation at home. Women have continued to take leadership roles; however, despite the preponderance of women in many fields, it is not uncommon to find that the more senior positions are held by men.

4.3 Māori and societal violence

The idea that violence is linked to Māori culture and that Māori condone violence is a common theme in the media (Woulfe, 2007). Discourses use notions of the 'warrior gene', something inherently wrong with Māori; violence is a result of Māori culture; Māori condone/accept violence; Māori society is patriarchal and violence towards women is a 'natural' part of this (Marks, 2002; Woulfe, 2007).

Webb and Jones (2008) describe Māori violent behaviour as possibly being seen as 'misapplying traditional concepts and failing to adapt to social change by continuing to behave as a warrior in a peaceful society. Actions which Pakeha society would view as violence were, after all, once accepted in Māori society, within limits…for example, utu and muru involve causing psychological or physical pain, sometimes unto death, but this would not be seen as violence as long as it was constrained by complex social structures and norms' (p.1). However, the issue of who judges what to be violent and the role that societal norms and structures play is complex. Failure to adapt to social change could equally be applied to 'Pakeha society'. What we see as violence and what we view as acceptable violence reflect the norms that are reinforced by state decisions, legislation and structures as well as by supposed cultural norms. Falling within these domains are systems and conditions of incarceration and other forms of dealing with offences (e.g. capital punishment), the physical discipline of children, various sporting activities (e.g. physical sports such as rugby, and sports that inevitably inflict pain on others such as boxing), warfare and views around the acceptable use of force by, for example, the police or those dealing with suspected terrorists.

4.4 Māori attitudes to sexual violence

When sexual violence towards women occurred in Māori societies, the community responded collectively and there was support available for women (Pihama, 2008). 'Married' women did not belong to their partner, but remained part of a community, with their partner's whānau being charged with their support and well-being (Mikaere, 1994). The idea that men have a right to dominate women was not a feature of Māori society (Mikaere, 1994) and stories about interpersonal violence towards women in the past are not common. Even when looking a few generations back, the idea of rape was not widely understood or embedded in Māori language. As one kaumatua explained, she experienced difficulties when talking, in te reo Māori, about the concept of rape to her grandmother:

> I really struggled because there wasn't the concept, in our whānau anyway I couldn't explain it to two generations up from me (Glavish, 2010).

4.5 Constructions of Māori culture and sexual violence

Despite evidence pointing to condemnation of sexual violence, Robertson and Oulton (2008: 14) talk about how culture is sometimes used to justify violence. However, they argue that there is a difference between self-serving rationalisations in the form of 'imposter tikanga', for example the misapplication of the concepts such as Māori warriors, and the 'authentic, tika use of cultural constructs.' They cite 'Māori flagged in rape review' (Woulfe, 2007) as an example of such a misapplication.

In this media article Dr Wilson, a researcher with the Department of Corrections, links 'patriarchal societies – Māori in particular – with a pre-disposition towards raping women'. Dr Wilson apparently 'flagged' Māori culture and is quoted as saying 'It is interesting to note that Māori have a proverb that states 'for women and land men die'. The article goes on to say that Dr Wilson does not intend to mean that Māori still endorse the proverb, 'but they have in the past'. It would appear that Dr Wilson is interpreting the

whakatauki from the introduced concept of women and land as property, rather than land as a woman, as Papatuanuku, denoting very different positions on the status of women. Various other interpretations of the whakatauki are that without land and women, men are lost and that men will fight, make a stand, in relation to women and land (Glavish, 2010). Of course, all these interpretations are in English and do not capture the full meaning of the whakatauki, including the meaning of land as whenua and the complex inter-relations between wahine and whenua. Whenua is also the afterbirth; the whakatauki in te reo is, therefore, able to convey complexities about the importance and mutual accountabilities that men have to whenua and to wahine as the source of nurture and life for current and future generations. This interpretation of whakatauki within a Western gaze is a further example of colonial (mis)representations of Māori society that, using an entirely different set of cultural references, feeds negative stereotypes that may impact on rangatahi views of gender roles and violence.

4.6 Māori responses to violence

The need to feel shame and take collective responsibility is another accusation that is levelled at Māori as a whole. The 'public' gaze is put on Māori as a distinct cultural group, whereas for the dominant culture violence is framed as a societal responsibility, rather than a cultural one. The notion of a 'traditional code of silence' (Marks, 2002: 2) is challenged by Māori who, in addition to concerns around the police and justice systems, speak of whakama, shame and self-blame as being implicated in the supposed 'closed ranks' around perpetrators of physical and sexual violence (Tiaki Tinana Project, 2008). Jackson points out that there is a difference between being silent and not being public; for example refusing to speak to media does not necessarily mean that the issue will not be raised and addressed in other forums. There is a need to examine the role that the media plays in stigmatising Māori and to provide safe and effective ways of addressing violence within Māori communities.

4.7 Colonisation and violence

Pihama discusses the argument of the Second Māori Taskforce on Violence that family violence and whānau violence are not the same. Whānau violence is 'the compromise of te ao Māori values... (and) can be understood as an absence or a disturbance in tikanga' (Kruger et al. 2004, cited in Pihama, 2008).

Pihama argues that colonisation, including colonial ideologies, have severely impacted on Māori and that colonisation is a form of violence. A key point is that understandings need to be broad and include 'an analysis of wider historical, social and political influences'. Colonisers take upon themselves the power to say what violence is legitimate or legal and what is not. She raises a related issue - that the legal system fails to recognise its inclusion in the wider violence of colonisation and the ways that colonisation has impacted on Māori and on Māori systems.

4.8 Violence and oppression

Smith (2000) frames violence against women of colour as 'a special form of oppression' and talks about the use of sexual violence to subdue women and control their reproduction. Internationally and nationally, evidence about the impacts of racism is seeing it gain traction as a public health concern (Kearns et al., 2009). For Māori the processes whereby racism impacts on health 'entail the denigration, marginalisation and alienation of Māori philosophies and practices that sustained culture, technology, resource management, politics, human relations and spirituality, in this Māori space, for hundreds of years prior to colonisation'. (Kearns et al., 2009: 124). However, in Aotearoa/New Zealand, there is little commentary or research looking at the connections.

4.9 Summary

Violence is not a simple or uncontested phenomenon. Various forms and levels of violence are a part of society; some are recognised as violence,

some are condemned, and others accepted or condoned. Society sets the context for our views and responses to various forms of violence – what is and is not considered acceptable is determined by dominant norms, laws and institutions. Societal structures contribute to the problem and provide mixed messages; the unacceptability of violence is not a consistent message. Sexual coercion and more extreme forms of sexual violence operate within these contexts and are influenced by issues of power and gender.

Violence and sexual violence are features of the colonial representation of Māori society, where pervasive negative portrayals have come to dominate the landscape in profoundly unhelpful ways. Colonisation is described as a form of violence that introduced Christian and other ways of viewing sexuality and gender, and undermined Māori concepts. Pre-colonial values are examined in contrast to the present day situation, being described as inclusive, embracing diverse sexuality and valuing men, women and children. Colonisation and, in particular the enshrinement in English law of women and children as the property of men, brought a sharp contrast of values and practices to our shores, part of major shifts in power and the transformation of roles and relationships. Sweeping transformations have continued to occur in Māori societies including the removal, destruction and denigration of systems that support, enhance and promote well-being and value whānau.

The ways that Māori violence is constructed and interpreted today, particularly in the media, is an area of concern. Ideas that Māori should, but do not, feel collective shame and that they condone or keep silent about violence are dominant themes. Māori are singled out as collectively responsible and, in some constructions, inherently violent due to cultural factors; the notion of Māori as violent warriors is one such stereotypical construction. These framings ignore wider societal contexts, normalise or make invisible non-Māori violence and represent particular interpretations that can make it more difficult for Māori to address violence without the risk of further stigmatising. Together they disrupt and distort understandings of an inherently sensitive domain of social life in ways that make Māori recovery and re-entrenchment of their values in this area much more difficult.

5.0 Sexual violence/coercion

5.1 Introduction

Sexual coercion is a widespread problem, with considerable impacts and often long-lasting effects being documented as a result of sexual violence. Sexual pressure sits on a continuum with more violent forms of sexual coercion; however, literature on coercion in its more mundane and everyday forms is sparse.

In this chapter we describe coercion - particularly in relation to masculinity and femininity, its relationship with notions of consent as well as the nature, drivers and impacts of coercion. Considerable gaps in knowledge are highlighted, particularly for rangatahi Māori, as well as potential areas for research and intervention.

5.2 What is sexual coercion?

Not everyone agrees on what constitutes coercion and how it may or may not relate to physical violence. As one way of understanding the relationship, Towns and Scott (2008) describe a continuum of violence from controlling behaviours to extreme physical violence. The term sexual coercion can then be used to encompass a broad range of behaviours, from emotional pressure to physical violence. Fenaughty et al. (2006), writing in relation to gay, bisexual, and other men who have sex with men, provide a useful definition of sexual coercion.

- Criminal acts of sexual assault, where physical force or threats of force are used, or where a (person) is physically unable to resist due to, for example, intoxication
- Unwanted sex that occurs as a result of manipulation or pressure by another
- Unwanted sex that occurs due to more indirect social pressures relating to perceived obligation, and lack of viable alternative choices (Fenaughty et al., 2006: 7).

People have complex understandings of sexual coercion in their everyday lives and in their relationships; sexual coercion and sexual assault are sometimes seen as different concepts, belonging at different levels of a continuum of violence. However, because most women in her study had experienced sexual violence, Kelly (2002) avoided defined categories and used the term 'continuum of sexual violence' in relation to the range of abuse, coercion and force experienced. Consistent with this concept, Gavey (2005) describes how rape can exist on a continuum with other sexually coercive behaviours. Sexual coercion can therefore encompass a broad range of behaviours from extreme physical violence to emotional pressure. Here we concentrate more on emotional coercion and pressure - an area that is relatively underexplored.

In looking at coercion as a normalised part of heterosexual relationships, Hird and Jackson (2001) point out that coercion is often non-violent. Some see coercive behaviour as leading to unwanted sex, but not to rape unless physical force or threat of physical force is involved. In Gavey's (2005) study, women described how they had gone through with unwanted sex, in the situations they were in, to avoid being 'raped'. This illustrates that some forms of coercive sex may be described as unwanted but not as an act of rape and may also indicate a reluctance to use the term 'rape'.

Consent is central to the issue of sexual coercion (Robertson and Oulton, 2008) and can be expressed in a range of ways that are often non-verbal. Notions around simple verbal yes/no representations of consent do not address the complexities of consent and are often not particularly useful ways of determining mutuality.

5.3 Coercion and consent

The issues of what constitutes consent, where the threshold is set and how consent is determined are contested and complex. A number of tactics are used, which some would contest or not recognise as constituting coercion,

such as appealing to romantic feelings. Hird and Jackson (2001: 29) give the example 'you would have sex with me if you loved me'.

There also appear to be difference between males and females in the perception of consent and willingness. Dickson et al.(1998) found gender differences when looking at 'willingness', with more men than women reporting equal willingness and mutual willingness being greater if it was the first time for both partners.

Consent also involves contextual complexity; some describing coercion as occurring within what may in many respects be a mutual and consensual context, where for example one partner wants to engage in some acts that another does not or where one person has sex for fear of losing their partner (Hird and Jackson, 2001).

5.4 How common is sexual coercion?

Sexual coercion in the general population

At a population level, the extent of sexual coercion is generally underestimated, with a focus on the more violent end of the continuum, such as criminal reporting. Most of the information we have on less violent forms of sexual coercion, such as emotional pressure, comes from surveys of particular populations, commonly university and college students. Gavey (1991) points out that the mode and tools used to collect data on coercion are critical in research in this area. Although not carried out with a representative sample of the general population, she argued that her study showed that 'rape and other forms of sexual abuse are far more common among New Zealand women than has been suggested by previous research' (p.465). She also noted that to date there was 'no large-scale and in-depth research specifically concerned with examining the extent of rape and sexual abuse in New Zealand' (p.466).

A number of studies have since reported considerable experiences of unwanted sexual activity and coercion (for example Fanslow and Robinson,

2004). The Youth 2000 and 2007 surveys in Aotearoa/New Zealand found that a 'significant proportion of taitamariki (17.1 percent) reported that they had been touched in a sexual way or made to do things that they didn't want to do' (Clark et al., 2008: 26); this was similar to the New Zealand Pakeha/European students, after controlling for demographic and socio-economic factors. Coercion was consistently talked about by British and Aotearoa/New Zealand adolescents girls in a study by Hird and Jackson (2001), the most common being unwanted touching. The most common perpetrator was an acquaintance, friend or boyfriend.

In another study, 76.9 percent of females and 67.4 percent of males reported experiencing one or more incidents of unwanted sexual activity, which were more likely to occur in long-term relationships than new, casual or unspecified time together or from friends or acquaintances (Jackson et al., 2000). Females were more likely to report 'being felt up' and males were more likely to report unwanted sexual activity at school (p.29). Jackson et al. (2000) concluded that emotional violence and sexual coercion were common; however, the questionnaire covered a broad range of behaviours as violence. Although not as frequently reported, physical violence was also noted as a 'cause for concern' (p.33).

Sexual coercion and Māori women

Māori women are more likely than non-Māori to experience sexual abuse, partner abuse and sexual violence (Auckland Sexual Abuse HELP, 2002; Ministry of Women's Affairs, 2001). The Women's Safety Survey, conducted in Aotearoa/New Zealand in 1996, found that 10 percent of the non-Māori women and more than a quarter of the Māori women reported that they had experienced at least one act of physical or sexual abuse in the previous 12 months at the hands of their current partner. When asked about incidents of sexual violence, Māori women reported nearly four times the number of sexual assaults than non-Māori women' (Morris, 1998 cited in Auckland Sexual Abuse HELP, 2002: 29).

Sexual coercion and males

Although with limited literature to draw on and varying definitions of force and/or coercion, Fenaughty et al. (2006: 7) reported that international research shows that 'sexual assault, sexual coercion and unwanted sex are experienced by a significant number of gay, bisexual, and other men who have sex with men'. However, rape of males is 'vastly underreported in the United States', aligning with 'a gender stereotype that says that men are not supposed to or allowed to be victims' (Jamieson, 2001 cited in Auckland Sexual Abuse HELP, 2002: 30). When it is discussed, homophobia may represent the rape of males as a homosexual act, when the evidence does not support this (Auckland Sexual Abuse HELP, 2002).

5.5 Perpetrators of sexual coercion

The framing of the issue of sexual coercion as violence, male violence or violence against women is an area of great contention (Ministry of Women's Affairs, 2009a; Nga Pae o te Maramatanga, 2009). Efforts, particularly by 'feminists in western contexts' (Carmody, 2009: 3) have sought to place sexual violence on the public agenda. However, Carmody (2005: 468) views some feminist discourses that universalise 'men as violent and women as passive recipients of violence' as entirely negative, with women robbed of agency, waiting to experience violence that men are poised to engage in. These earlier, more binary conceptualisations of women as victims and men as perpetrators have given way to more complex, nuanced understandings and an increasing focus on violence in relationships and by acquaintances.

Although most offenders are males, 'there appears to be no evidence to suggest that any particular ethnicity has a higher rate of offending than another…. (and) there is no current evidence to support the assumption that it is always Māori offending against Māori' (Tiaki Tinana Project, 2008: 11). The report points to indigenous international research that 'suggests that half of the offending against indigenous females is perpetrated by non-indigenous offenders' (Tiaki Tinana Project, 2008: 15). In relation to male coercion of Māori males, eight of the ten reported incidents were perpetrated by a man

identified by participants as Pakeha. Possible reasons suggested for this are that young Māori may be 'an exoticised and eroticised 'other' for some older Pakeha men' and older Pakeha men may see younger Māori, Pacific and Asian men as less likely to refuse sex (Fenaughty et al., 2006: 39).

5.6 Vulnerability to sexual coercion

In discussing relationships and families Robertson and Oulton (2008: 16) write that 'Women who have been neglected and abused as children, either physically, sexually or both - or who have witnessed violence in their family - have an elevated risk of becoming a victim of sexual violence in later life'.

Reasons given for acquiescing to sexual coercion were similar for males and females; the most common being to show that they loved their partner and because they thought it was what their partner wanted (Jackson et al., 2000). Alcohol and other drugs are also strongly implicated in sexual coercion (Fenaughty et al., 2006; Jackson et al., 2000).

The experiences of Māori males who were coerced by other males 'had much in common with the dynamics of heterosexual coercion experienced by women' (Fenaughty et al., 2006: 9). Feeling obligated, engaging in some sexual practices to avoid other acts, being young, and leaving rural areas with their support networks and familiarity were seen as reasons for vulnerability to sexual coercion (Fenaughty et al., 2006). Although coercion occurs within Māori communities it has been suggested that it might be less likely to occur in some small, rural communities because of the closeness of connections and the size of the community (Fenaughty et al., 2006). However, there are indications that coercion may be more common in rural areas, so this may be dependent on the nature of some particularly supportive rural communities.

5.7 Drivers of sexual coercion

A broad range of factors are seen as being implicated in sexual coercion, including alcohol and other drug use, rape-supportive beliefs and approval among peers, early sexual experience, unsafe sex practices, unwanted

pregnancies, STIs, conduct disorder, poor educational performance, early maturation, child sexual abuse, ethnicity, and socio-economic disadvantage (Jackson, 2004; Robertson and Oulton, 2008). Men raised in families where violence and other issues are present are also more likely to be violent adults.

A major concern is the way in which coercive behaviours operate as normalised heterosexual behaviours, reinforced by notions of active and passive gender roles. ***Relationships based on masculine and feminine stereotypes are a prescription for coercion.*** Hird and Jackson (2001: 36) stated that 'The focus on gender difference derived from a 'natural' and 'immutable' biology informs narratives in which sexual coercion becomes 'inevitable'.

> Valuing women only for their sexual qualities gives permission for men to relate to women this way, to reduce all of women's human qualities down to an objectified view of a woman as a sexual object which he can manipulate for the satisfaction of his desires. It is likely that these attitudes are fuelled by capitalist driven notions of the undeniability of desire and essential consumption. A somewhat extreme example of these attitudes of objectification and entitlement is the use of drugs to immobilise a woman for the purpose of sexual assault. These patterns of devaluation and objectification which are used with women and children, can also be used on males. Whenever somebody is perceived to be 'other' and to have less power, whether due to physical size, age, or social status, taking power for one's own ends is believed to be legitimate (Auckland Sexual Abuse HELP, 2002: 34).

5.8 Impacts of coercion

Literature on the impacts of sexual coercion focuses largely on forms that could be labelled as sexual assault. There is very little that addresses coercion in its more mundane forms, such as the impacts of emotional pressure, where the effects may be more insidious and diffuse. The impacts of sexual violence are understood to be wide-ranging and often long-lasting.

A number of studies with older men and women – largely non-Māori – demonstrate considerable effects, including feelings of shame and loss of mana as well as impacts on overall well-being, sense of self, mental, emotional and physical health, ability to trust and major behavioural changes that can effect employment and contribute to personal, social and physical changes (Fanslow and Robinson, 2004; Ministry of Women's Affairs, 2009a).

Jackson et al. (2000) highlighted the importance of advancing knowledge of the relationship between gender and violence and give the example of looking at 'whether acts of violence, when of a similar form, are equivalent in meaning or consequence for females and males' (Bograd, 1990 cited in Jackson et al., 2000:24). They note examples of research in high schools where students interpreted their partner's violence as an act of anger and an expression of confusion or love. They pointed to a lack of literature on the emotional impact of violence on high school students and concluded that a research agenda needed to include the extent of abuse as well as its effects. This included the scope and prevalence of violence in high school relationships as well as 'motivation, effects, and responses' (p.25) to inform the development of prevention efforts. Their study employed a relatively small sample from five Auckland secondary schools and some findings were indicative only.
The sample is not likely to be representative of national prevalence and incidence, but differences between the reactions and impacts of violence on males and female are of particular interest.

In contrast to reported responses to emotional violence, only one male compared to 26 females (28.9 percent) reported feeling angry as a result of sexual coercion. Females were also more likely to report feeling 'dirty' (34 percent compared to 13 percent of males) and scared (n=14: 15.5 percent compared to two males) and less likely to report that they were 'not bothered'; 26.7 percent compared to 48.9 percent of males (Jackson et al., 2000). Of the females who reported being physically hurt in a dating relationship, 40 percent reported some more lasting effect such as bruising, compared to 71 percent of males reporting no lasting effects (Jackson et al., 2000).

In relation to males reporting that they 'were not bothered' the authors suggest that this may be because they did not perceive the behaviour as abusive or that they 'accepted and tolerated violence more than the female students did' (Jackson et al., 2000: 33). They state that this is consistent with other literature and describe the differences in emotional responses in relation to sexual coercion, where females perceived this as more abusive than males.

5.9 Talking about sexual coercion

Under-reporting of sexual offences is well documented (Ministry of Women's Affairs, 2009a). Non-violent forms of sexual coercion also appear likely to evoke to shame and secrecy. In one study, although friends were the group most commonly talked to (53 percent of females and 43.2 percent of males), just under half of both males and females reported that they had not talked to anyone about the sexual coercion (Jackson et al., 2000). In another study, of those who had been physically hurt, around half did not tell anyone about it (Jackson et al., 2000). Men who have experienced coercion from other males are also reluctant to report, disclose or talk openly about their experiences (Fenaughty et al., 2006).

Around 62.5 percent of both males and females felt supported when they spoke to someone, with 40 percent of females reporting that the issue had been 'sorted out' compared to 18.8 percent of males (Jackson et al., 2000). Talking less often about sexual violence and coercion than about emotional violence is consistent with the secrecy discussed in child sexual abuse and 'domestic violence' literature (Jackson et al., 2000: 34).

5.10 Summary

The term sexual coercion is used to describe a continuum of behaviours, from extreme physical violence to emotional pressure. It is commonly perpetrated by an acquaintance or partner; people may acquiesce to sexual coercion to avoid other unwanted acts, to show love for a partner or to maintain a relationship. There is a paucity of research into sexual coercion/violence

among Māori and rangatahi Māori. General population studies suggest that sexual violence is a cause for concern in our communities; it is common and can have widespread and long-lasting impacts on a range of levels. However, the impacts of forms of coercion that would not be labelled as violence or assault are not known.

Māori have higher rates of physical and sexual abuse and men can also be victims of male coercion. One study showed similar rates for males and females in opposite-sex relationships. However, it would appear that the nature of the coercion was different and certainly the impacts were, with males reporting fewer traumas and lasting effects.

Of particular concern are the dominant discourses and societal norms, particularly around notions of men as active and women as passive, which are strongly implicated in sexual coercion as a normalised part of relationships. Sexual norms include representations of sexuality and gender with heterosexuality as the norm; males as active agents wanting and seeking heterosexual activity and women as passive, responsible for gate keeping and giving or withholding consent, with little if any space for relationships founded on mutuality and negotiation.

Challenges to sexual violence against women must address the place of women throughout society. Research into the domain of sexual violence among rangatahi is urgently needed to contribute to understandings that can help to reduce the incidence and impacts of such behaviours.

6.0 Prevention

6.1 Introduction

> There is no argument about the pervasiveness and impact of sexual
> violence. The challenge we now face is how to prevent it (Carmody,
> 2009: 1).

This chapter describes various approaches to prevention, including definitions
of primary, secondary and tertiary prevention. This is followed by an overview
of some of the interventions that fall within different levels of sexual
coercion/violence prevention; however, it is acknowledged that these are not
clear-cut delineations. The strengths and gaps in our knowledge of what
works are highlighted to direct efforts to, or away from, particular approaches.

6.2 Levels of prevention

In the field of sexual violence, three stages of prevention are described by the
Wellington Sexual Abuse Network Education Project Violence (Cargill, 2008
2): *primary* initiatives that take place 'before sexual violence has occurred',
initiatives for 'everyone', that 'set cultural norms'; *secondary* initiatives aimed
at 'at risk' populations; and *tertiary* prevention that deals with the
consequences.

Many studies focus on responses to sexual violence; a tertiary rather than
primary prevention approach. However, the scope and impacts of violence
against women is so great that efforts cannot be limited to the more tertiary
end of intervention (VicHealth, 2007). It needs to be addressed at all levels,
concurrently (Auckland Sexual Abuse HELP, 2002). Although 'reducing the
incidence and impact of sexual violence is critical in…ensuring that women
are healthy, resilient and safe' the problem is complex and 'not amenable to
quick fixes' (Ministry of Women's Affairs, 2009a: 7).

However, it is not always easy to delineate neatly the differing levels at which
interventions may impact (VicHealth, 2007). This is apparent in the approach

to 'family violence' framed as breaking the cycle, where intervening in crisis situations at an apparently tertiary prevention level, may be seen as an important part of changing societal norms – a more primary prevention aim - around the acceptability of violence.

6.3 Māori and prevention

In their search of databases to source literature on prevention efforts, Robertson and Oulton (2008) concluded that most published evaluations covered a narrow range of programmes, often from USA university settings. Although there are some potential learnings, the programmes are not necessarily transferrable to Aotearoa and questions about the applicability of many interventions to Māori persist. Te Puawai Tapu, an independent kaupapa Māori public health organisation specialising in sexual and reproductive health issues for Māori, believe they share with other Māori providers a view that we cannot "address Māori sexual and reproductive health separately from wider Māori development and sovereignty" (Green and Levine, 2006: 8-9).

Pihama (2008) details a number of Māori models, in particular the Mauri Ora conceptual framework, which is predicated on dispelling the notion that whānau violence is acceptable, removing opportunities for whānau violence and transformative practices through te ao Māori, te ao hurihuri and applying constructs from te ao Māori in current contexts. There are also a number of other models developed by Māori providers, such as members of Te Ohaaki a Hine-National Network Ending Sexual Violence Together. For example, Peipi Te Pou argues that tikanga can provide guidance for primary prevention approaches, and stories about tupuna can provide the basis for looking at the strategies that were handed down (Smith, 2010).

6.4 Women and prevention

Carmody (2005) argues that many anti-violence prevention campaigns and programmes focus on women managing risk and that anti-rape education predominantly reflects "particular sexuality and gender discourses that are

often unarticulated" (p.466). A focus on women has often excluded men, although some programmes have focused on men as being at risk of perpetrating violence. Carmody (2009) reports that interventions have experienced issues with engaging men, possibly because of the way the interventions were framed. "The result of this approach excluded men as part of the solution to preventing sexual violence, and left women with the primary responsibility for managing risk and prevention of sexual assault" (p.10).

6.5 Multi-level approaches

It is commonly acknowledged that sexual violence needs to be attacked at multiple levels simultaneously using interrelated responses such as ecological, comprehensive and systems approaches. Robertson & Oulton (2008, p.i) propose that an ecological model, operating at societal, community, relational and individual levels, provides a framework for causation at multiple levels and can encompass 'various theories about the risk and protective factors in sexual violence' (p.4). Systems approaches also work on multiple levels on the basis that 'the overall system must both prevent and respond to sexual violence' (Ministry of Women's Affairs, 2009a: 7). These approaches also recognise the need for sexual violence prevention to involve multiple stakeholders, develop providers, coalitions and networks and address organisational practices, policies and legislation (Robertson and Oulton, 2008).

Changes that occur at one level may also produce changes across the spectrum. For example, changing societal norms is likely to impact on reporting and healing after sexual violence, by influencing what is often described as the extremely damaging process that occurs when women report sexual violence to the authorities (Carmody and Carrington, 2000). Māori 'victims' face these barriers as well as being Māori within a non-Māori system. Smith (2000) tells the story of an indigenous woman in the USA who did not go outside her community for help when she was raped, saying 'it was like appealing to a 'foreign government' for assistance' (p.1).

There is also the potential for interventions that work within other areas of prevention to impact on sexual coercion; for example, successful primary prevention measures around alcohol and drug use. Robertson and Oulton (2008) also argue that racism and colonisation have undermined Māori and others, and policies that strengthen these groups could also be expected to reduce sexual violence.

6.6 Life course strategies

Because of the complexity and interconnectedness of the issues, there are many advocates for sexual coercion prevention as a life span approach. Over the life span, physical and sexual violence in relationships 'increases during courtship and early marriage, pregnancy, separation and divorce' (Kaufman-Kanto and Jasinski, 2001 cited in Auckland Sexual Abuse HELP, 2002:29). Childhood sexual abuse or assault is linked to non-consensual sexual activity in adult men and women (Auckland Sexual Abuse HELP, 2002). This may be due to a range of factors such as lower self-esteem and substance abuse, but the evidence is inconsistent (Auckland Sexual Abuse HELP, 2002). Lessons that are learnt early in life, both positive and negative, carry on into adulthood, emphasising the need to intervene early (Auckland Sexual Abuse HELP, 2002; Towns and Scott, 2008). It is important to understand the causes and the processes to bring about change (Hassall and Hanna, 2007) and to begin interventions as early as possible (Hassall and Hanna, 2007; Tiaki Tinana Project, 2008).

6.7 Primary prevention

Encouragingly 'there is a growing consensus that it is possible to prevent violence against women before it occurs' (World Health Organization, 2002 cited in VicHealth, 2007: 6).

In primary prevention, 'the structural, cultural and societal contexts in which violence occurs are also very important targets…Strategies that do not have a particular focus on violence against women but address its underlying causes (such as gender inequality and poverty) are also primary prevention

strategies' (VicHealth, 2007: 9). VicHealth suggests three overall foci of a primary prevention approach: promoting equal and respectful relationships; promoting non-violent norms and reducing the effects of prior exposure to violence; and improving access to resources and systems of support. They argue the need for targeted interventions as well as approaches that operate at the population level, for example initiatives that aim to change societal norms. Fenaughty et al. (2006) underline that it is important that interventions do not further marginalise or stigmatise particular populations and that marginalisation might limit prevention.

Carmody and Carrington (2000) also argue that causes of sexual violence are complex and not readily amenable to the 'easy quick fix solutions so popular among politicians and crime prevention specialists' (p.343). They and others (Cargill, 2008) reiterate the importance of changing dominant norms around sexual violence and impacting on wider socio-cultural determinants. However, this is a major challenge. Two particular challenges are the hidden and under-reported nature of sexual violence and the relative normalisation of sexual violence in intimate relationships. In addition Carmody and Carrington (2000) argue that 'those who are most vulnerable to victimisation' are also the least advantaged and the least well resourced; these groups include young women, rural dwellers and those in areas of high disadvantage (p.343).

6.8 Secondary prevention

Risk reduction approaches include a number of education and information approaches, including some mass media campaigns. Education often takes an approach of working with those 'at risk; in attempts to reduce identified negative outcomes of sexual activities, such as STIs, unplanned pregnancies and terminations. These approaches are made more complicated when the danger is from someone the victim knows or is in a relationship with' (Lonsway et al., 2009). There is, however, little research on their effectiveness and 'despite the long and hard battles…little has been achieved in preventing intimate sexual violence' (Carmody and Carrington, 2000: 343).

6.9 Tertiary prevention

Carmody and Carrington (2000) discuss how 'feminist campaigns' have put sexual violence on the agenda, thus contributing to policy and interventions in Australia. However, this has seen considerable effort focused on tertiary prevention, particularly in responses to victims. Intervention literature is dominated by programmes that respond to violence, in particular working with victims/survivors and perpetrators.

Healing models

Tu Wahine Trust (Auckland Sexual Abuse HELP, 2002) talks of the need to heal the whole person and emphasises the importance of working wider than the individual. They (Auckland Sexual Abuse HELP, 2002:77) reiterate the view that 'sexual abuse, neglect and violence…were not acceptable to our culture' prior to colonisation and that Māori now have to develop healing models that are relevant today but based within traditional values. They report that colonisation is a concept that 'Māori affected by sexual abuse will discuss in some form' (p.77). For these reasons they believe 'that it is pointless trying to heal an individual and return them to an environment that is stagnant' (p.77).

6.10 Individual approaches

Changing knowledge and raising awareness

A considerable number of interventions are based on the assumption that if individuals have information, they will act on it. In other words, awareness and attitudinal change will lead to behavioural change, thus reducing the incidence of negative outcomes. In the field of sexual health this is apparent in attempts to reduce STIs and unplanned pregnancies (Fenaughty et al., 2006). In the sexual violence field, education programmes are the most commonly promoted reduction approach (Carmody, 2005). However, sexual health is not just about straightforward choices.

Robertson and Oulton (2008) describe a number of components of a (US) 'standard' sexual violence prevention programme, falling broadly under the categories of attitudes, beliefs, awareness raising, risk avoidance and self-defence for women and victim empathy and negative consequences for perpetrators.

Does changing knowledge and raising awareness work?

Interventions that focus on changing young peoples' knowledge and attitudes do not produce long-term changes or changes at the population level, although attitudes may change in the short term (Lonsway, 2009, Nahom et al, 2001, Shoveller & Johnson, 2006 cited in Begoray and Banister, 2010, in press). A number of evaluations show that few have had significant impacts on postponing first intercourse or reducing adolescent pregnancies (Begoray and Banister, 2010, in press, p.332).

Drawing on literature, Jackson found that studies suggested that young people had 'considerable knowledge' about STIs, AIDS and a number of safe-sex practices; however, they were not as well informed in their general knowledge of sex and sexual biology. Although young people learnt from friends of both genders, their mothers, television and sexuality education, they possibly gave greater status to knowledge that they gained through experience (Jackson, 2004). Many programmes were limited in scope and tended to focus on risk avoidance, thus limiting their likely effectiveness and separating women 'from fully exploring our sexual potential' (Carmody, 2005).

Robertson and Oulton (2008) argue that a seriously flawed component of 'the standard US approach is communication, assertiveness and limit setting' (p.21), which they suggest, is predicated on the idea that men misunderstand women's cues and women need to be more assertive and clearer. Robertson and Oulton (2008) refute this, stating that, while 'no means yes' may be used as an explanatory discourse, the evidence does not support this potentially victim-blaming approach to prevention. There are also concerns that attitude change in relation to fostering victim empathy may have no effect on

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perpetrators and 'may backfire, serving simply to reinforce unhelpful rape myths' (Robertson and Oulton, 2008).

Sexuality education

Commonly conceptualised as knowledge and behaviour change, sexuality education has been the focus of increasing attention and critique, in particular that it does not adequately prepare young people for their sexual lives (UNESCO, 2009). Although evaluations have shown that some comprehensive sexuality education programmes can have positive outcomes and do not hasten the onset of sex (Kirby, 2001), sexuality education is not a straightforward issue. Its delivery and effectiveness are questioned and many aspects, including gender analysis and feminism, may be controversial (Carmody, 2009). Jackson (2004) citing Elliot et al. (1998) found that the greatest emphasis was on physical changes and risk, often called sex education, rather than looking more broadly at sexuality:

> …at the very age when students are more likely to be entering sexual relationships (16-18), sexuality education programmes were actually less available, especially for the more academically oriented students. The highest coverage of topics centred on puberty, safer sex and STIs, with decreasing attention paid to areas such as gender roles, negotiating skills, sexual identity, relationship choices and sexual orientation. Yet it was these latter topics that students wanted to know more about in addition to abortion, sexual abuse, masturbation, date rape, parenthood, emotional aspects of sex, sexual identity and emergency contraception. Many of the areas identified by the students are important aspects of sexual well-being that should be incorporated into sexual health curricula (Jackson, 2004: 128).

Robertson and Oulton illustrated concerns around the inadequacies of sexuality education for young people with a quote from a young New Zealand woman participant in Allen's study: 'You don't actually get told how to have sex and stuff' (Allen, 2005 cited in Robertson and Oulton, 2008). This quote

implies that key questions of importance to participants are inadequately addressed. Carmody and Carrington (2000) and Allen (2008) have provided considerable critique of sexuality education approaches, underlining a common failure to provide for the experiences, needs and interests of young people and inadequate coverage of the development of equitable and pleasurable, rather than coercive, relationships. These types of critiques have seen reviews of best practice and the emergence of literature that suggests changes to how sexuality education is conceptualised and delivered.

Best practice in sexuality education

A New Zealand evaluation of sexuality education programmes for years 7 to 13 conducted in 2006, found that, although here were examples of good practice, 'the majority of sexuality education programmes were not meeting students' learning needs effectively' (Education Review Office, 2007: 2). Knowledge gaps of this kind do not enable rangatahi to examine assumptions around gender roles and relationships and increase the chances of inappropriate practices and behaviour.

Better examples involved a wider school environment of support and respect, with community consultation, where schools, students, school communities and agencies worked together to meet student sexuality education needs. Good practice included student-focused and interactive approaches, reaching wider than risk, including positive relationships and a varying and wide range of resources.

Does sexuality education work for young people?

Hassall and Hanna (2007) found that there were considerable developments happening at the global level in relation to evidence of effectiveness. Relying on 'statistically significant effect(s)' (p.6) as a measure of effectiveness they concluded that secondary school programmes should: 'be comprehensive; focus on skills; pick appropriate targets for change; use peers; include parent; attempt to change the larger environment' (Hassall and Hanna, 2007: 8). They concluded, however, that 'behaviour change brought about within the school

tends to be confined to the school. Where significant change has been demonstrated through programmes limited to the school, they have been relatively small in scale and have affected the least serious problem behaviour' (p.9). Although programmes need to involve parent and students outside the school 'the political economy of the society in which they operate may contribute at least as much to their chances of success' (p.9). Although sexuality education may provide some positive opportunities for rangatahi, its impact is limited by the nature of the programmes and by the wider societal influences.

Suggestions for sexuality education approaches

Carmody and Willis (2006) argue that their review 'of anti-rape education strategies suggests we are currently failing to address the kinds of information and skills that especially young people need to negotiate pleasurable ethical sexual intimacy. Most sexual assault occurs between people known to each other and it is the negotiation or lack of negotiation of consent that poses most problems' (pp.477-478). They suggest a shift in focus to ethical non-violent relating and away from women, teaching refusal skills and 'reinforcing heteronormality' which 'have had little impact on primary prevention' (p.478). Carmody (2009:11) advocates for 'integration of sexuality education and sexual assault prevention education' and increased collaboration across sectors, to provide education that goes beyond biology, safe sex and ideologically-based approaches such as abstinence.

Other suggested education approaches include enabling young people to learn about their sexuality and how to negotiate relationships (Robertson and Oulton, 2008). In relation to wider impacts, there has also been the suggestion that 'children and young adults...develop their critical thinking in order to question the structure of the world around them' (Auckland Sexual Abuse HELP, 2002: 156).

Nutbeam (2000) argues that, while education alone has been shown to be 'generally insufficient to achieve major public health goals' (p.261), its

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potential may be underestimated; he suggests that health literacy may have potential.

6.11 Health literacy

What is health literacy?

Health literacy is an approach for improving the effectiveness of informative and educational approaches and has been around in various forms for 30 years. It is about access to and the capacity to use information; this has implications for both the content and communication, including personal and community-based education. Health literacy aims to equip people to access, make sense of and act on health information and education (Nutbeam, 2000).

Nutbeam describes functional health literacy, interactive (relationships) health literacy and critical health literacy. In relation to social determinants, critical health literacy is positioned as a way of 'better equipping people to overcome structural barriers to health' (p.259). Sexuality education in its most common form fits the definition of functional in that it largely involves obtaining, understanding and processing knowledge. Findings from the 2006 Adult Literacy and Life Skills Survey carried out in Aotearoa/New Zealand demonstrate that Māori, particularly Māori males, have lower health literacy skills than non-Māori (Ministry of Health, 2010). The measures used largely relate to functional literacy. Interactive health literacy occurs when the information is coupled with the development of skills around decision making and sexuality within a supportive environment; for example, coupled with a school and community-wide exchange of knowledge. Critical health literacy goes beyond this and aims to increase critical thinking around social and economic determinants and support, for example, community action around sexuality.

Nutbeam (2000) describes the individual benefits of critical health literacy as the 'improved individual resilience to social and economic adversity' (p.266). He also describes community and social benefits due to the increased

'capacity to act on social and economic determinants of health (and) improved community empowerment' (p.266).

Limitations and critiques of health literacy

There are concerns around the health literacy approach, particularly for people whose choices are limited by the conditions they live in. For example, a study of sexual health literacy with Ugandan schoolgirls found that 'poverty and sexual abuse severely constrained options for these young women' (Jones and Norton, 2007: 285). Although these young women were living under some extreme circumstances, the message is that health literacy approaches will be constrained by young people's abilities to make choices, by the ability of the approach to bring about changes within the communities that they live in and by the constraints and conditions that those communities experience.

Indigenous health literacy

In a study that looked at sexual health literacy in an indigenous context in British Columbia, Banister and Begoray (2006a) argue that access is about more than being able to read and understand information, it is about using the information; in this context it meant addressing 'what was important to the girls themselves' (p.85). Banister and Begoray (2006b) and Begoray and Banister (2010, in press) describe best practice in health literacy and knowledge translation as encouraging participant discussions, meeting regularly, creating links between young people, communities, experts and other stakeholders, making the knowledge practical and relevant to participants' lives and considering context. In Aotearoa this could include whānau, community and wider societal conditions, including the dominant education system and societal norms.

6.12 Peer group and social norms approaches

Learning about early warning signs of sexual aggression, and 'risk markers' such as alcohol and drug impairment and male peer group attitudes are seen as a potentially useful approach in addressing violence (Lonsway et al., 2009:

5). Social norms approaches have been discussed in the field of substance use, based on the idea that young people overestimate alcohol and marijuana use among their peers. Other researchers advocate changing social norms by focusing on men and women intervening; positioning them as third parties with responsibilities (Lonsway et al., 2009). Robertson and Oulton (2008: 26) argue that encouraging young people to look after each other has 'much to recommend it in encouraging a sense of community responsibility. It would be strengths based and appeal to notions of peer group solidarity.'

Do peer group approaches work?

Casey and Lindhorst (2009) carried out a review to identify approaches that showed promise in supporting individual change by targeting 'peer network and community level factors that support sexual violence' (p.91). They argue that 'social norms campaigns, bystander approaches and men's anti-violence groups constitute promising but under-evaluated peer and community-level approaches to sexual assault prevention' (p.92). They state that we know more about individual risk factors, childhood experiences and cognitive factors (p.92) and that 'comprehensive reviews of peer and community-level contributors to sexual violence, or of accompanying promising primary prevention strategies' (p.92) are less available. Asserting the importance of applying what we have learnt from other fields, they suggest 'that peer contexts are critical arenas in which support for or disapproval of sexually assaultive behavior is communicated' (p.95) and, therefore, peer social networks are an important site for interventions.

Although a recent randomised control trial showed promise (DeJong et al., cited in Casey and Lindhorst, 2009), previous findings have been mixed. Relating this to the field of sexual violence, Casey and Lindhorst (2009) discuss research that demonstrates that males overestimate their counterparts' sexual activity and their endorsement of sexually coercive behaviours. These attitudes are linked to male willingness to intervene and to their rape-supportive attitudes. However, they found 'no rigorous evaluations of sexual violence-oriented social norms campaigns...in the literature' (p.105).

6.13 Community approaches

Community-level interventions are seen as having some promise; that is, implementing initiatives with specific groupings with shared characteristics (Robertson and Oulton, 2008). However, initiatives that are implemented within communities still have to grapple with what level they are working at. Community-level initiatives can still be individualistic in approach, i.e. work at educating and changing individual members of that community. Community initiatives are, however, more likely to be able to move away from what are seen as universal approaches - which, in reality, are more likely to be dominant societal approaches – and may enable the development of innovative approaches based on Māori worldviews (Moewaka Barnes, 2000).

Māori community approaches

There is little literature on Māori community approaches. The Tiaki Tinana Project (2008: 9), which aims to reduce victimisation, arose from a need for prevention 'designed by Māori clinical and cultural professionals for use within Māori communities'. Predominantly informed by Russell Smith's qualitative work in sexual offending, it involves working in Māori communities to address issues of potential offending, offending and survivors. Offenders do not wish to reoffend and need intervention as early as possible to assist them (Tiaki Tinana Project, 2008). For programme delivery, being 'relatively fluent in Te Reo and able to facilitate Māori cultural practices and protocols such as whakawhānaungatanga are described as essential (Tiaki Tinana Project, 2008: 5). This suggests that particular types of Māori communities are envisaged, rather than diverse communities, some of which will have little reo and varying cultural practices and protocols, needing diverse approaches and skills.

Māori participants in the study by Fenaughty et al. looking at male experiences of male sexual violence felt that it was important that the issue was addressed with Māori and in particular forums. They saw their concerns as communal issues, with Māori communities being appropriate sites for prevention and healing (2006).

6.14 Mass media and social marketing

Along with education, social marketing is a commonly proposed approach, which may work at the primary prevention level (Carmody, 2009). Lonsway et al. (2009) describe social marketing approaches that work at shifting peer group behaviour, encouraging resistance to conformity to dominant norms and changing perceptions of social norms; in this case challenging the ideas that, for example, men are comfortable behaving in stereotypical ways and are homophobic and sexist.

Does it work?

There is however, little evidence that social marketing works as a stand-alone intervention. Recalling, understanding and liking campaigns are not the same as being motivated or being able to change individual behaviours within broader social contexts. As awareness raising and information campaigns, social marketing is often based on the assumption that if a particular message is put to people in a particular way it will be acted upon. This ignores the likelihood that people probably already have most of the information contained in the message, but that the environment and cultures within which they live are a more powerful influence than social marketing (Moewaka Barnes, 2008).

Critiques of mass media campaigns

There have also been a number of criticisms of specific mass media approaches. Campaigns that aimed to address family violence were seen as excluding and even silencing women who did not fit into the types of relationships apparently targeted i.e. older women and couples with children (Towns and Scott, 2008). Another caution in relation to mass media campaigns is that they can motivate a desire to change and to seek help, which is not backed up with adequate, ongoing support. In this way social marketing campaigns can cause harm when people seek help that is not available, or that is in short supply due to the demand created.

6.15 Collaborative and cross-sectoral approaches

Working collaboratively with other health promotion programmes, such as sexual disease prevention initiatives, is seen as an important way of approaching sexual violence prevention (Lonsway et al., 2009). VicHealth (2007: 12) calls for cross-sectoral, collaborative approaches, arguing that 'many of the factors influencing violence cross boundaries traditionally existing between government departments, disciplines and settings and between the government and non-government sectors'. Sometimes collaboration is seen as an end in itself, without a clear idea of the purpose of the collaboration and why and how it is likely to lead to the desired change. Given debates and knowledge gaps about what works and what a primary prevention approach looks like, there is no point in working collaboratively on programmes unless they are likely to be effective.

When there are overlaps and the intervention is well-designed and implemented, more collaborative efforts may be valuable in some areas. Because of its strong links with sexual violence, the field of alcohol and drugs may be one such area. However, the example of collaboration with 'those working to educate students about drugs and alcohol' provided by Lonsway et al. (2009:12) is likely to have limitations, given that the evidence points to alcohol and drug education, and indeed education approaches in general, as having little or no effectiveness as stand-alone approaches (Babor et al., 2010; Faggiano et al., 2006; Foxcroft et al., 2002).

In her discussion of what needs to happen in Aotearoa/New Zealand about family violence, Herbert (2010) points to major gaps in current approaches such as a lack of leadership, co-ordination, consistency, knowledge, learning and information flow, clear strategies, measures of effectiveness, and ongoing monitoring. She calls for a cross-agency framework and a shared vision. These are also criticisms that could be levelled at the field of interpersonal violence in general, where complex determinants shape the issues and the solutions. There are a number of initiatives and approaches at local, regional and national levels that recognise the need for co-ordinated approaches, such

as the Taskforce on Action on Violence within Families. However, agencies are still charged with particular responsibilities within these approaches. Different criteria for success will impact on the ability of agencies to work together as well as what each agency will need to achieve and how they might go about trying to achieve this.

An important aspect to consider in Aotearoa/New Zealand is the relationship between Māori and non-Māori. Te Ohaaki a Hine-National Network for Ending Sexual Violence Together (TOAH-NNEST) conceptualises the network as consisting of two houses reflecting a Treaty relationship, working to achieve common aims (Taskforce for Action on Sexual Violence, 2010).

6.16 Summary

Primary prevention initiatives take place before sexual coercion/violence has occurred; secondary prevention aims at "at risk" populations; and tertiary prevention deals with the consequences of sexual coercion/violence.

There is considerable emphasis in the sector on tertiary prevention efforts – intervening after sexual violence has occurred. Awareness raising, information and education approaches predominate at the more primary and secondary levels. However, it is important to note that many of these are largely individual approaches, which by themselves have little impact on wider change (Robertson and Oulton, 2008).

School-based and other forms of sexuality education are fraught with ideology – the debate is not just about whether they are effective but encompasses underlying values and positions around the nature and content of sexuality education; a major criticism being that it does not adequately equip young people for their sexual lives. They have also been criticised for operating in isolation from wider networks and environments and for failing to address sexuality in ways relevant to the life experiences of young people, including not providing opportunities for young people to learn about and examine

relationships and gender roles that underpin sexually coercive behaviours. In addition, working in schools will miss out some key young people.

Debate around whether the nature of the education may be one factor that limits its effectiveness has seen a growing emphasis on health literacy and, in particular, critical health literacy that aims to develop critical thinking that will enable communities to frame and address issues relating to more underlying determinants. There is a need, however, to ensure that the locus of responsibility for change does not rest solely with those who are impacted on, and that the conditions that create health promoting and health demoting opportunities are also addressed.

Health literacy has emerged as a way of aligning educational approaches more closely with the wider contexts within which young people live. When it is most promising, health literacy strategies link with curriculum, wider learning and communities, and are practical and relevant.

Due to the complexity of sexual coercion/violence and its pervasiveness, the literature recommends working at multiple levels, as well as a greater focus on primary prevention and collaborative, cross-sectoral approaches. Peer and community level interventions show some promise and may also work to support individual change and healing. Among the suggested approaches are social norms and bystander interventions and mobilising men to act on prevention. However, how these fit within a population approach and a primary prevention framework needs further examination.

The issue is not just what we want to prevent, but what we want to create. Combinations of approaches that aim to prevent sexual coercion and promote the well-being of rangatahi have considerable potential in this domain. Holistic Māori models of healing are salient for approaches that show limited effectiveness in targeting young people outside the context of their wider environments and relationships. The lack of literature on Māori community approaches and the collective nature of many Māori communities suggest that

this is an area that needs more exploration, particularly for its potential in primary prevention and the promotion of well-being.

7.0 Knowledge gaps: identifying research needs

7.1 Introduction

Sexual violence/coercion is an area of considerable concern, but not a great deal of research, particularly for Māori. This chapter provides a brief overview of the areas covered in the report, highlighting the strengths and the considerable gaps in our knowledge.

7.2 Resilience

The review revealed a growing interest in resilience, including a small but increasing number of studies looking at resilience and indigenous peoples, generally referring to communities, families and relationships as important considerations for indigenous resilience. Although a number of studies are currently underway, very little is written about either resilience and Māori or resilience and sexuality.

The available research tends to take a more individual focus. Although including notions of community resilience, the evidence is generally more applicable to healing approaches than primary prevention. In relation to wider impacts, research and literature on discrimination and the role that it plays in producing and reproducing inequities is emerging. In Aotearoa/New Zealand, where there are significant inequities between Māori and European populations, the role of racial discrimination as 'a social determinant and fundamental driver of such inequalities' (Harris et al., 2006: 1429) is an important and under-researched field.

The belief that rangatahi Māori need particular forms of cultural connections to promote their health and their secure cultural identity has attracted considerable attention; however, this is not strongly supported by research to date. Research that sets out to study diverse forms of connections and their links to Māori identity and well-being has not been conducted and overseas studies are inconclusive.

7.3 Rangatahi and sexuality

Māori and sexuality

Most of the information we have on Māori and sexuality looks at the past and the understanding that sexuality and sexual diversity were normalised features of life. Jackson's (2004) review of published literature on young people's sexuality and sexual health revealed a gap in research on young Māori; in addition, many studies are not particularly useful for Māori or fail to mention Māori.

This report supports the view that research is needed in relation to sexuality and young Māori, that Māori should guide the research (Jackson, 2004) and that rangatahi voices should be brought to the fore.

Rangatahi and sexuality

Risk factors and, in particular teenage pregnancy and STIs such as Chlamydia and HIV/AIDS are a strong locus of concern in the literature, reflected in largely quantitative studies, particularly surveys of secondary and tertiary student populations. The focus is often on sexual ill health - the examination and prevention of negative outcomes – and is particularly concerned with 'risky' sexual behaviour, such as unprotected sex.

Key informants in Jackson's (2004) study were asked to identify research needs in the area of sexual health issues for young people. The most commonly identified need was for research on 'perceptions and understandings of sexuality, with every participant identifying the need for more research on young men's views of sexuality, sexual health and pregnancy. A good number also mentioned the need to include those frequently marginalised in mainstream research, such as rural youth, minority populations and refugee communities'. (Jackson, 2004: 131)

Framing sexuality

Missing from much of the literature around sexual health and young people in particular, are notions of healthy sexuality and sexual relationships (apart from critiques of what is seen to deviate from norms) and sex as pleasurable, rather than risky and problematic.

Although some quantitative research gaps persist about young people's sexual health status, qualitative work is needed to provide more of the stories behind the statistics and to provide knowledge on some of the underlying causes and mechanisms that may lead to positive and negative outcomes in relation to sexual coercion. Jackson (2004) writes that 'understanding how social and cultural factors operate to influence young people's sexual behaviour is paramount to the development of effectively targeted sexual and reproductive health programmes' (p.125). From a primary prevention approach, this is important not just for targeted programmes, but for interventions at the population level addressing wider determinants of health.

Gender roles and relationships

Considerable literature, and some research, discusses dominant discourses around men as active and women as passive and the importance of understanding and addressing these to arrive at more equitable ways of relating. However, the ways that young people challenge, resist and make sense of these norms and how this influences their behaviour is the subject of very little research. Robertson and Oulton (2008: 25) conclude that 'we must find ways in which these (dominant) discourses can be subjected to critical inquiry and their implications examined'.

Other gaps in knowledge are explorations of female sexuality and desire, independent of male sexuality, and the role of social values and beliefs in sexuality.

Negotiating relationships

As a counter to risk, and in recognition of the gaps in knowledge around the development of more positive relationships, respectful, ethical and healthy relationships that are underpinned by mutuality and negotiation are receiving greater attention. However, debate continues on these terms and there is little research to guide us; no research was found in relation to rangatahi Māori.

Learning about sexuality

Noting the predominance of research on 'European middle-class samples' Jackson (2004: 132) argued for better understandings of what 'at-risk' young people 'draw on to make sense of sexual relationships'. This is particularly important in light of the multiple sources of information now available, including the Internet.

Cherrington (2010) suggests the need for more research and awareness of what is available on Internet sites about sexuality, including pornography and blogs. Many parents and others have no idea what is being encountered by young people.

Another gap was in finding ways to have conversations around sexuality and sites of information, often with parents and children who may not want to talk about these things.

7.4 Māori and gender

A considerable gap was found in relation to Māori and gender roles, including rangatahi and gender roles. Although some information is available around pre-colonial roles of men and women, this has not been extended into looking at what this might mean today, and particularly what this means to and for rangatahi.

7.5 Violence

Violence and Māori are much discussed in the media and there is a range of available statistics, generally consisting of data on negative outcomes from forms of interpersonal violence. However, there is very little research carried out that examines more underlying causes and mechanisms or that takes a critical approach to the supposed relationship between culture and violence, including sexual violence. Pihama (2008) writes of the need for research that includes Māori practitioners and Māori voices, and that it is important that we look to 'traditional' attitudes and responses to violence.

7.6 Sexual violence/coercion

What do we know about sexual coercion/violence?

> Sexual violence has been under-researched in New Zealand for some decades (Ministry of Women's Affairs, 2009b: xii).

Concern about rangatahi and sexual coercion is not reflected in the amount of research or in the efforts invested in providing evidence for prevention. Although the Youth 2000 and 2007 surveys provide a small number of useful items that have been included in this review, there are few comprehensive studies of the New Zealand youth population, and in particular few with adequate samples of Māori. Most studies and surveys have focused on particular regional groupings. Secondary schools have also been a common site of research as well as interventions.

Despite the apparent quantitative domination of the area there are still calls for more accurate information about sexual assault; its prevalence, incidence, nature and impacts in order to influence attitudes, expressions of rape-supportive beliefs and reporting of sexual violence. For example, Jackson et al. (2000) suggest the need for research to include the frequency, degree and prevalence of violence. Fenaughty et al. (2006: 43) suggest the inclusion of sexual coercion in relevant studies (e.g. GAPSS) and the need for research on the dynamics of sexual coercion and the silence surrounding it to be

'nuanced for and between men from different ethnic communities'. They also recommend that:

> any quantitative research undertaken in Aotearoa/New Zealand incorporate questions specific to ethnicity, and that Māori-specific research be undertaken in this area to address the current lack of relevant research" (Fenaughty et al., 2006: 44).

Again the field lacks stories behind the statistics, particularly research that explores the interconnections between sexuality, gender roles, heteronormative discourses, relationships and violence. Another suggested area is the different ways that young people perceive coercion, including whether some coercive behaviours are so embedded in masculine and feminine constructions that they are seen as normal and expected features of relationships.

In relation to the impacts and prevention of sexual coercion, the literature largely focuses on more violent forms of assault, rather than the area that this review is most concerned with; the more mundane and everyday acts of pressure. This gap is apparent for all population groups.

Sexual coercion and Māori

The gaps described above also exist for Māori, with the additional concern that Māori-specific data is even less available. In relation to concerns and possible misinterpretations of Māori attitudes to sexual violence, Towns and Scott's (2008: 118) recommendation is noted: 'that further (discourse) qualitative research be used…to explore the relationship between Māori culture and ownership practices in boyfriend/girlfriend relationships'. However, sexual violence research may further stigmatise Māori when the framing and interpretation is inappropriate; Māori need to be involved at all levels of the research, including its interpretation and use.

7.7 Prevention

Considerable literature focuses on responses to sexual violence, particularly recovery and healing; tertiary rather than primary prevention approaches. Secondary approaches, often from the USA, focus on risk and ways in which women avoid and deal with risk. Most primary prevention deals with awareness raising, information and education.

Education and a focus on individual behaviours are strong themes in prevention efforts. There are concerns around implementation and their relevance to young people, and there is little evidence to suggest that they are likely to make significant contributions to population health gains.

There were few evaluations found; what there was focused mainly on family violence and on sexuality education. Although to date there is little evidence, peer group and social norms approaches are suggested as showing promise, and comprehensive ecological, collaborative and systems approaches are recommended.

Although there is a strong and growing interest in primary prevention, there is a considerable gap in our knowledge of what constitutes primary prevention and what might work. The primary prevention field is under-developed both in resources and knowledge.

There is also a lack of research providing an evidence base for Māori prevention approaches in general. The contribution of Māori concepts to primary prevention has not received much attention, although it is a promising feature of Māori healing approaches. A considerable amount of conceptual development, underpinned by research, is needed to contribute to the primary prevention field.

The following table provides a brief overview of the types of data and data sources that predominate in each of the domains. This highlights the gaps in our knowledge and some of the implications for a primary prevention approach.

	Types of data	Sources of data	Gaps	Primary prevention potential
RESILIENCE	Generally focuses on protective factors drawn from qualitative and quantitative studies; very little on sexuality; small indigenous body of literature	Range of study types: very little written for Māori. Links between Māori culture and well-being suggested.	Examination of resilience and its utility needed. Links between culture and well-being suggested but little evidence.	Resilience builds on and promotes strengths but is not likely to show population shifts Focus on risk not particularly useful for broad population shifts
SEXUALITY	Statistics on risk and outcomes e.g. protection, STIs, unplanned pregnancies, abortions Māori-led research around pre-colonial notions of sexuality	Surveys, government and other agency statistics: some Māori-specific data available Māori qualitative interviews, whakairo, waiata, moteatea	Qualitative data on sexuality, and rangatahi and sexuality, missing Desire and pleasure missing; female sexuality under-explored	Individual approaches show evidence of effectiveness for individuals; important and necessary, but show no population shifts
GENDER ROLES RELATIONSHIPS	Descriptive surveys on behaviour and attitudes	Adolescent Youth Surveys: Māori-specific data available	Relationships between rangatahi and Māori concepts of sexuality and violence missing	Need wider societal approaches using youth voices to show population group impacts
SEXUAL VIOLENCE/ COERCION	Mainly qualitative studies exploring young people's understandings and experiences Statistics on victimisation and assaults	Secondary and tertiary students/mainly overseas: very few Māori participants	Rangatahi understandings and experiences of gender roles and relationships missing Relationships between rangatahi today and Māori concepts of sexual violence missing	Working with whānau and wider community provides an opportunity to have broader impacts and to 'break the cycle' Whānau Ora is a strengths-based government approach with the potential to strengthen whānau as a building block of Māori society
PREVENTION	Māori-led research around pre-colonial sexual violence Education and awareness-raising approaches a major focus: reviews, descriptions of best practice in sexuality education Little on broader determinants and primary prevention	Official statistics e.g. Justice and surveys: some Māori-specific data available Māori qualitative interviews, whakairo, waiata, moteatea Range of data sources: commonly school or tertiary based; evaluations of post-vention healing approaches.	Primary prevention literature a gap: evidence for developing interventions and what works is needed?	Need further evidence to develop local, evaluated programmes What works for one population group may not work for Māori

7.8 Summary

Despite concerns around Māori and violence, including sexual victimisation, there is very little research around Māori sexuality and rangatahi Māori sexuality. The little available research around young people and sexual coercion is predominantly quantitative. Although these studies are able to give us an idea of the magnitude and impacts of sexual coercion, they do not provide the stories behind the statistics and are only part of the evidence needed for the development of primary prevention initiatives.

Of particular concern is the lack of knowledge on what primary prevention looks like and what might work; there are also very few evaluations available to inform our understandings. However, given the gaps in our knowledge around rangatahi, sexuality, gender roles and violence, it would be premature to suggest that we have all the evidence we need to develop the primary prevention field fully. As well as the evaluation of evidence-based initiatives, there is also a need for research to inform and fill in the considerable gaps in our knowledge that will support the development of initiatives, particularly for rangatahi Māori.

One suggested way of addressing the considerable gaps in knowledge and providing an evidence base to inform policy and interventions is to examine how young people understand and make sense of diverse and competing messages around gender and relationships, including an exploration of the saliency of Māori concepts in today's context. Although this research would not address all the gaps, it would draw together a number of the areas identified to provide a sound basis for proceeding. It would also enable interventions to be developed that would have the greatest chance of working effectively for rangatahi Māori.

8.0 Research methodology: Rangatahi Māori, gender and relationships

This scoping review highlights a number of knowledge gaps about rangatahi and sexual coercion and about Māori and sexuality more broadly, suggesting numerous areas where research could provide useful insights. Of primary importance among these is the point that there is little research-based knowledge about rangatahi Māori understandings of gender roles and relationships and few rangatahi voices are entered into the research field. Since sexually coercive behaviours and attitudes in contemporary contexts are generated by and embedded in Western norms around gender roles, the study arrived at an approach designed to address this knowledge gap and to offer insights into the troubled domain where sexual coercion and everyday relationships converge.

The following chapter describes the rationale and approach to a research methodology suggested to fill some of the gaps identified in the review. This is followed by a description of the research design, methods and processes. It also provides accounts of the feasibility and testing of the methodology as well as examples of rangatahi voices and some preliminary indicative analysis.

8.1 Rationale

The review traces how divergent male and female discourses and actions function as fundamental underpinnings of sexual relationships, including the acceptability of hegemonic gender power relations, expectations around coercive behaviour and responses to coercion. Given the concerns around sexuality education and the lack of literature on rangatahi Māori and sexuality, it is likely that rangatahi are not provided with adequate preparation for their sexual lives, leaving them vulnerable to sexually coercive behaviours, both as perpetrators and victims. In addition, rangatahi Māori are affected by societal silence, embarrassment and condemnation around sexuality as well as receiving conflicting and often negative messages about Māori in relation to sexuality, gender, violence and identity. The proposed research is about

understanding how rangatahi Māori make sense of and construct their relationships, to transform what is happening and to prevent sexual coercion. *Qualitative, kaupapa Māori research has the potential to provide rangatahi with a voice on sexual issues and to contribute to effective interventions that prevent sexual coercion.*

Young people live in diverse worlds and experience differing forms and levels of internal and external assets that impact on what they have to deal with and how they approach and act on issues. Rangatahi Māori face multiple challenges and opportunities as they transition into adult roles and relationships. Frequently positioned as a problem or 'at risk', they are considered an important target for multiple messages and interventions*. Rangatahi are talked about frequently, rarely heard and only occasionally engaged by research as more than sources of data*. We make assumptions about where young people get their ideas and practices around relationships and sexuality, but there is little research to guide us and almost none that provides a rangatahi Māori voice.

There is little research around indigenous people and sexuality, and this is the case for Māori in Aotearoa/New Zealand. Māori writers refer to the past and particularly to pre-colonial tikanga, concepts and values to understand the present, provide guidance in relation to Māori, and to challenge colonisation and its impacts. Tupuna provided the values that Māori practices and social orders spring from, but colonisation has forced new pathways rather than enabling Māori to forge them; Māori agency in working for change has been largely ignored or denigrated. Where Māori values are as seen as desirable and promoting of well-being and Māori aspirations, Māori fight for their recognition, restoration and continuation, albeit in altered forms, but retaining to some significant extent, the driving principles.

Pre-colonial attitudes towards sexuality are commonly understood to have been accepting of diverse sexualities. Although balance, reciprocity and mutuality are described as 'traditional' features of relationships between Māori men and women, there are contradictions and complexities, including female

leadership, maternal lineage, gender roles and the apparent alignment of the perceived roles of women with colonial values of women as property or lower status.

The impacts, both positive and negative, on rangatahi today have not been explored. Instead we make assumptions, using a resiliency approach, that particular forms of culture will strengthen the ability of rangatahi Māori to deal with adversity. Connection and belonging appear to be promoting of well-being, but we know little of what young Māori mean by or think of as 'healthy relationships' and what enables them to resist pressure and coercion, both as victims and perpetrators. If we want to find out more about both internal and external assets, we need a grounded knowledge base, gained through participatory approaches with rangatahi. Without this we run the danger of designing interventions and acting on assumptions that may not benefit some rangatahi and that may reduce well-being for others.

Some discourses challenge current Māori practices as sexist, for example in relation to speaking on the paepae or women sitting behind men at powhiri. In public at least, challenges to gender roles have often been divisive in their framings, seen as discrediting or denying Māori agency and justifying Pakeha non-participation. These tend to polarise positions and further cement practices as immutable tikanga in the fear that supposed traditional practices will be lost and cultural values undermined. There are few opportunities to engage in safe and respectful discussions; this extends to conversations between parents and rangatahi and is reflected in criticisms of sexuality education that could potentially provide a space for rangatahi to learn about sexuality in a peer group setting.

8.2 Research approach

Although the focus is sexual coercion, the approach is about the broader context of relationships and sexual well-being, providing a way of pulling a number of areas together conceptually. The review clearly demonstrated the ways that constructions of masculinity and femininity are implicated in gender

roles and relationships that see coercive behaviours as a normal part of sexual relationships. Examining the ways that rangatahi Māori construct and see these roles and, in particular, the ways that they accept and/or challenge ideas of masculinity as active and dominant and femininity as submissive and passive, could provide valuable insights into ways to support more positive ways of relating. Taking this pathway would provide a rigorous yet active process for unpacking the experiences, interpretations and meanings that underlie the statistics. It would open up a new research space and provide policy-makers with new insights, without which their work is far less likely to be effective. The research design would engage young people and other participants in potentially transformative narration and analysis, and, through its conscious engagement with rangatahi, parents/whānau, kaumatua and others, would articulate Māori experience. Research is always an intervention at some level and, by using the Internet and involving rangatahi, whānau and other stakeholders in the analysis and interpretation, this framework is likely to be generative of discussion and knowledge creation in fields beyond the immediate research participants.

Developing equitable, reciprocal and participatory processes are an important feature of research with Māori. By Māori for Māori approaches, utilising whakapapa and other connections are seen as key elements of Kaupapa Māori research along with the idea of transformation, that is research that contributes to positive change (Smith, 1999). The proposed research approach is designed to seek understanding within rangatahi Māori worldviews, drawing on a range of stakeholders such as whānau, kaumatua and sexual health providers. Using a range of participants in the analytical process, including rangatahi, will help to ensure that the researcher voice is not privileged over other interpretations and makes knowledge construction more explicit.

The following design synthesises the information and ideas drawn from the scoping report, the consultations and the interviews with pilot participants. Further discussion refined the idea. Interviews with rangatahi Māori (n=8), males and females from urban and rural settings, ranging in age from 11-22,

informed the design and processes and illustrated some of the types of information that might emerge.

8.3 Aims and objectives

The overall aim of research under this rationale would be to:

> **Examine the influences that shape rangatahi Māori sexuality, gender roles and relationships in order to inform our understandings and work toward positive change.**

The specific objectives should include:

- examine where and how young people learn about sexuality, gender roles and relationships
- examine how different influences challenge or reinforce rangatahi understandings
- examine how rangatahi 'make sense' of these influences in relation to sexuality, gender and relationships in different spheres of their lives
- identify contributions of the research to interventions, policy and other areas.

The research could productively explore how rangatahi form their ideas and think about gender roles and relationships and how this plays out in their lives. For example, how do they see themselves and others and what are their perceptions of their relationships? Where and how do they learn about their identity as rangatahi Māori, and what promotes equitable and mutual notions of what it means to be rangatahi Māori, male and female? Rangatahi are exposed to multiple influences, including teachers, parents, friends and media (television programmes, Internet, and music). Such studies would be interested in rangatahi meaning-making in the context of competing messages; what constitutes positive and mutual relationships, what constitutes coercion and other forms of sexual violence, and what are the strong influences at peer, community, societal and structural levels in young people's lives?

Understanding these domains will enable a more considered approach to working with rangatahi and may challenge some of the assumptions underlying what it means to be Māori as well as gender roles. The research could contribute to theory and provide contextual information and an evidence base for interventions, including interventions that operate on shifting social norms and notions around Māori and sexuality. Social norms operate at the wider societal level in perpetrating unhelpful and damaging stereotypes as well as at the community, whānau and individual level in how rangatahi and their whānau/hapu and iwi view sexuality and sexual violence, and how Māori communities might promote sexual well-being free from coercive behaviours.

8.4 Methods

Using a qualitative methodology, the research should:
1. Engage key groups in the research process - rangatahi, parents/whānau, kaumatua, web experts, youth workers, sexual health and sexual violence prevention providers, health researchers, communities –to develop participatory relationships for the research and to identify end users.
2. Collect stories and insights about rangatahi, gender roles and relationships from rangatahi, male and female and other experts such as whānau and kaumatua.
3. Analyse transcripts for discussion triggers.
4. Post triggers on web pages.
5. Invite diverse groups of rangatahi to contribute postings about particular triggers.
6. Gather data from postings and invite analysis from diverse perspectives.
7. Synthesise analyses.
8. Consult and gather feedback to refine analyses.
9. Identifying potential points for policy and interventions.
10. Disseminate findings to participants and end users.

Interviews

The research could begin with around 20 individual and group interviews with a range of rangatahi Māori aged 13 to 18 years and other experts, such as parents/whānau members and kaumatua, to gather stories around sexuality, gender roles and relationships.

Approaches to potential participants should use multiple start points to provide for diversity: rural, urban, gender, age, sexual identity, education and community settings and life experiences e.g. young parents.

Groups could be invited to participate and provided with a range of options about how they would like to be involved; for example, as individuals, with friends, partner or in class or larger group discussions.

Where interviews are included, they should be face-to-face and rangatahi should be offered a choice of settings. Interviewers would, where possible, be gender-matched (there will be mixed gender groups) and matched by ethnicity. Interview processes should be designed to create an informal and relaxed atmosphere that encourages conversations and enables rangatahi to create notions and ideas, rather than a question and answer format. Discussions could begin with general questions about socialising, encourage reflective conversations around relationships, sexuality and various influences and sources of information, and go on to explore issues of identity and culture in relation to sexuality. Other participants, such as whānau and kaumatua will be encouraged to provide their insights and observations based on their experience and expertise.

Interviews should be recorded and transcribed. Multiple readings may identify stories and triggers. This could be done in conjunction with rangatahi and consist of questions, discussions and stories that, when tested with the rangatahi generate considerable interest and discussion. Around 20 web posts could be constructed around such stories and triggers; each page could contain one post selected to generate discussion focused on one idea.

Online data collection

Different groups could be invited to participate in discussions on different web pages with different topics and members e.g. young people from kura kaupapa, mainstream schools, single-sex kura, co-ed, groups of males, groups of females, mixed groups and different ages, diverse sexual identities, metropolitan, town and rural dwellers. For example one page may be aimed at female rangatahi aged around 16 and invite particular discussions from their perspectives; another may be aimed at young fathers.

8.5 Analysis

After discussion has taken place online, the researchers would download the data and invite different groups to look at the pages and carry out analysis. Groups might include rangatahi, whānau, kaumatua, educators, youth workers and other providers and researchers who use a range of analytical approaches, such as Kaupapa Māori, thematic analysis, critical analysis, and feminist frameworks. This would enable different takes on the data and insights into how different groups might use the data.

Some analyses could be carried out independently by the researchers using thematic and discursive analyses and while others entail group analysis, including facilitated analytical workshops for rangatahi. The latter would be facilitated by young research team members with guidance from a senior researcher and focus on interpretation, meaning-making and reactions around selections of the online discussions. The aim would be to approach convergence between the researcher and participant analyses, to ensure that findings are grounded in youth experience with the greatest possible rigour. Small group, roundtable discussion formats could be focussed around selected segments of transcript and could explore interpretation, meaning-making and reactions to such data. Outcomes may include multiple key moments, new insights, controversial positions and other stimulating materials.

The groups involved in the analysis could also contribute to the write up of projects. The research teams should provide an overview and framework for presentations of analyses, with a particular emphasis on the use of the data to inform practice.

8.6 Ethical processes

A framework with a flexible, exploratory, iterative approach, with staff representing a strong Māori and youth research capability would create studies that are highly 'youth-friendly'. A commitment to stakeholder engagement and direct youth participation in the research, with the engagement of participants in analysis of data and dissemination of findings, should result in high levels of 'groundedness' and ownership of the outcomes by young people. An orientation to use of Māori staff, tikanga, kawa, whakatauki, histories and debates relevant to the topic, as well as the utilisation of Māori networks of human and cultural capital to facilitate and resource research processes, should inspire keen interest from rangatahi groups and their supporters. With these elements structured into the paradigm as outlined, research in the domain will be able to access Māori experience but in a way that is not exclusive of other cultures. ***Through principles such as manaaki and aroha research process appropriate for rangatahi are likely to be suitable for all young New Zealanders.***

The research teams will need to develop trust and rapport with participants and their communities. The inputs of participants and communities should be sought for the presentation of data, including identification of intellectual property issues.

The disposal of data tapes at the end of the project should be negotiated with the participating groups and individuals: the information and consent forms could be either returned or archived. If these options are not used, the researchers should store the tapes and destroy after five years.

Knowledge has tikanga and intellectual property rights implications that can be a risk if not handled properly.

8.7 Significance and relevance to end users

Identifying the utility of the research and its application as evidence for interventions, policy and other activities should be a part of the analytical process; analysts could be asked to examine meaning and utility of findings. A critical Māori-oriented take on sexuality could provide a basis for health literacy in Aotearoa/New Zealand, challenge entrenched discourses and practices around sexuality and power relations, and inform diverse approaches and interventions that de-construct heteronormative assumptions. The research will add a considerable evidence base to discussions around tikanga Māori and pre-colonial concepts and their ability to guide and inform rangatahi today. Māori youth voices will inform interventions and policy and fill a gap in sexuality research in Aotearoa/New Zealand.

The process of involvement in the research is likely to have health promoting benefits for the rangatahi involved, as they will be invited to discuss and look critically at the issues within a safe process. Social networking and the use of technology are new features of social worlds; the more we know about how people are engaging in these things the more we can further a public health agenda. The method as a tool for research with rangatahi will be evaluated for its salience and will inform other research projects and methodological developments. There is the potential to take indigenous sexuality global through these tools.

8.8 Piloting and feasibility testing

The following section reports on the results of the interviews with rangatahi and other stakeholders. The interviews were designed to elicit information to inform the development of the research idea and processes and to gain some insights into whether rangatahi would feel comfortable talking about relationships and sexuality. Rangatahi were asked about the research idea

and questions about the research processes, such as what would encourage young people to talk. Some discussions around relationships followed.

Age range

The interviews, stakeholder discussions and the scoping review provided support for the selection of an age range from 13 to 18 years. Rangatahi in this age band are at a range of developmental stages, and diverse understandings and experiences will be encountered; this is expected to be both manageable and useful. Although it would be interesting to talk to younger children, such research would need a somewhat different focus.

Interview groupings

The piloting phase demonstrated that it is important not to make assumptions about young people's comfort or discomfort in various situations and to be cautious about researchers defining the parameters of participation. One pilot participant thought that large groups wouldn't be useful because:

> Some people won't want to talk in big groups – might be shamed out... choose your own group, not be put in a group.

Using another idea from one of the pilot participants, rather than picking out individuals, the researchers would invite groups to participate and provide them with a range of options about how they would like to be involved; for example, as individuals, with friends, a partner or in class or larger group discussions.

Two rangatahi chose to be interviewed as a couple and this provided useful and interactive korero. Because the aim is to gain diverse stories and not to collect data consistently on set topics, this process is ideally suited to the research purpose.

There were views from some youth workers around not mixing genders and queries about whether young people would feel comfortable. The pilot

demonstrated that, for some rangatahi at least, the topic was of interest and that, providing they felt safe with the interviewer, discussion flowed.

> Personally I wouldn't care if I was doing (an interview) with a boy, I would still give the same answers…but some shy people might…change the answers.

Interviewer characteristics

Pilot participants emphasised that as long as they felt comfortable and relaxed with the interviewer the process "would be sweet as". Although not as strong a consideration, there were indications that younger interviewers and Māori would be preferable. The preference for Māori interviewers came through more strongly for the rural pilot participants.

> I would prefer a Māori, but some Pakeha people might want Pakeha people instead of Māori. But I wouldn't mind what gender but I guess a younger age group would be good to like, so they get your ideas…so round 20 or 30. I don't think it would be bad if they were over that but someone who's easy to talk to and like, happy.

Prompting discussion

Pilot interviews supported an informal and relaxed approach that encouraged discussion, rather than a question and answer format. There was also support for the use of prompts such as music clips and magazine articles and reference to popular television programmes and films.

> ...when they give you examples and ideas, so it's not just formal…like 'this is question 1'…so you just talk about it.

Interview venues

In the pilot interviews, a range of places were suggested, with some feeling that a venue out of school would be most appropriate. It appeared to depend on the context and how rangatahi felt about school. One participant said that

school would be a good site for interviews "because it is less formal". Another consideration is that not all rangatahi will be attending school.

Use of internet

There were generally positive responses in relation to using the internet; one pilot participant suggested unprompted that the Internet could be a good place to collect data. All rangatahi interviewed knew about a number of social networking sites and were familiar with web technologies. Interviewees raised the need to engage rangatahi interest and for the sites to be able to draw rangatahi in, not just be seen as a place to go for health information.

Web searches were also conducted to find examples where posts had triggered discussion of relevance to the research topic. This supported the idea of using web-based techniques for data generation. For example, on Māori.org the following generated over 40 posts over four months:

> *I would like to take a course in weaving and I would like to take a course in carving, the issue is that I am female. I have been told that women are not allowed to carve. In fact, I have looked at some carving course outlines which say ONLY men. If this is true then can someone please tell me why women are not allowed to carve. Traditionally I know that men carved and women would weave. Please do not give me 'its tradition'. Cheers* (Māori.org.nz, 2007)

The posts are a rich and fertile source of data on tikanga, Māori identity, gender, gender roles and sexuality. The tensions are evident and, at times sexual violence is implied as participants argue their positions.

8.9 Analytical examples

The following quotes are drawn from the pilot participants and analysis is provided from the viewpoint of three researchers (one male and two female) involved in the project. Rangatahi were not asked specific questions around sexuality and relationships, but when the topic was raised as a potential area

for research and their opinions asked, they entered into relaxed conversations with the interviewer that covered a range of areas drawn on below. The following examples were selected because they illustrate ways in which the rangatahi talked about gender roles and sexuality that shed light on some of the areas of interest to the review. In-depth interviews and analysis were outside the scope of this project, but illustrative quotes and preliminary insights have been provided to demonstrate the potential of the research.

A clear limitation in the pilot study is that a full research project would involve multiple analyses from different viewpoints, enabling more nuanced and complex analysis. The interviews do demonstrate, however, that a full research project would be likely to elicit considerable discussion as a basis for analysis.

GENDER ROLES

The following example provides interesting insights into perceived peer norms at work and the various ways that rangatahi interpret and attempt to undermine and undercut representations of males, females and fathers. The following discussion arose when the interviewer talked about the research being interested in where young people got ideas from about being a man or a woman.

> **MALE** (Young people get ideas from) other couples…one guy is like being the man and another guy looks at him and thinks "I wanna be the man"…who wears the pants…the boss…chick is standing behind him…I don't know, I'm not the man (both laugh)
>
> **FEMALE** …(get ideas of being a woman from) Beyonce…like girls wanna be like the hot celebrities that all the guys talk about and all the boys…try to be like (other male celebrities)
>
> **MALE** You remember (so and so) he's like the man in that relationship…Like "stay with the baby, I'm going out"…that's what (he says to me) I don't know if it's true…he's not contributing…

> **FEMALE** I think every boy wants to be the man in the relationship, like all the boys at school…they're always telling me go and make a sandwich or something. They're like "that's all girls are good for"…like little dry jokes, they're always trying to think they're the man and then I'm like "I'll go and tell your girlfriend on you and they're like "Please don't!" …they try and think they are but the girls are in charge…I think the boys just fake it more…they act like they're the man
>
> **MALE** Boys might (say) "I had sex with my missus last night"

Here the participants have a repertoire that they can refer to in relation to what it is to be a man and what it is to be a woman – the notion of a woman comes from what the males say women are and from the celebrities that "all the guys talk about". Being a man is about being in control of a woman and also about having sex. The quotes bring in the idea that being a man is about not taking responsibility for being a father, not contributing in this role and deciding what they will do independently of the mother. These small, unprompted, examples:

- Reinforce the notion of women's roles being seen in relation to men, and men being active and in control
- Demonstrate the influence of popular (USA) culture and the media in setting standards that women aspire to
- Demonstrate that conventional gender roles are perceived as common aspirations
- Create tension between observed and ideal and lived experience
- Demonstrate rangatahi ability to see and describe conventional heterosexual gender relations that are at odds with their experience
- Indicate that the father thought he would get affirmation from his male peer about his role in the relationship, but his assumptions around peer norms are not born out by the negative way that the male participant describes him

- Male vulnerability is interpreted as evidence for a reversal of conventional heterosexual gender roles (threat to tell their girlfriends).

This narrative illustrates the ways that rangatahi receive, challenge and accept dominant ideas around gender and gender roles; how these influences operate and the ways that rangatahi resist negative portrayals would be useful avenues for exploration in the proposed research. Implicit in the narrative is the role of peer approval and affirmation, a domain that is considered to be of promise in the prevention field, but where we have little evidence in relation to Māori.

BEING A FATHER

The previous quote, again a relatively unprompted reflection, contrasts with the following, where a young father describes how he was encouraged to be an involved father by his brother who had also become a father at a young age.

YOUNG DAD I grew up without having a father… without a role model in the house, so it was my older brother… the one I looked up to… I wanted to follow in his footsteps.

Interviewer: Is there any stories you can share about your brother sort of things you can remember about him being that sort of role model…

YOUNG DAD: Umm, just him really telling me stories about having a child early. And you know making his own money, buying his own place, things like that… and I'm like "ok", [and he's like] "you can do it". He got me into like knowing about jobs and wanting a job…

This participant had a different understanding of what being a father meant. He didn't learn this from his own father, but from his brother, who he looked up to and who had gone through a similar experience. The role model of the

elder brother introduced new ideas such as the importance of economic security in parenting as well as more practical issues of knowledge and aspiration around work. This example:

- demonstrates the affirming influence of an older role model
- indicates being a father is closely tied up with being a provider
- demonstrates the value for young men to have positive influences in their lives; these may not always be parents, but someone closer to them in age and experience.

This narrative indicates that dominant ideas around masculinity and fatherhood are powerful influences. It would be of interest for the research to explore this in relation to more underlying values around Māori notions of whānau and fatherhood.

ENFORCING HETEROSEXUALITY

The following example demonstrates the way males see female sexuality as available, even if the women are lesbian. Male homosexuality is a threat and violence is used to keep gay males in line, to exclude or punish them. But, what happens if female sexuality is seen as a threat or not available, or if males feel that females are transgressing their rights?

> **FEMALE**: (talking about a gay male friend) because we're not judgemental I think he felt comfortable talking to us about it…it's just normal. The boys are sad about the boys being gay but they love the girls that are gay…they love the girls that are even bi…they think it's hot with two girls together…all the boys say "It's all good if two girls hook up, but not if two dudes hook up. If we see two girls hook up, we'll stare, but if we see two boys hook up we'll smash them!"

The participant demonstrates the need to state homosexuality as normal. She states this as a point of difference so that a gay friend feels able to talk to her, but not to others. She goes on to describe male views of sexuality in relation to homosexuality, which:

- show male double standards over homosexuality

- show lesbianism as an erotic act for male consumption

- show links between expectations of sexual conformity and violence.

Again, dominant discourses are apparent. The way that sexual identity is discussed is at odds with pre-colonial concepts around diverse and inclusive expressions of sexuality. The divergence and convergence of these different value bases and how they operate with diverse groups of rangatahi today could be an area of considerable interest in the research.

MĀORI MASCULINITY AND FEMININITY

The following quote illustrates how sexuality and ideas around femininity and masculinity pervade kapa haka.

> **MALE** Last year we had one (gay) couple not come to (kapa haka) training and we'll see them and he's out…
>
> **MALE** Our girls got marked down for being too manly…they were reading the (judges') comments
>
> **FEMALE** we have to walk in like models… and we never ever do the haka…we have to make it feminine and she tries to make us flirt with crowd…she thinks girls are too feminine
>
> **MALE** (Jokes) Your girls should come and teach our girls

The rangatahi describe different experiences in kapa haka, but both reflect on the involvement of heteronormative standards in relation to a gay participant and in relation to masculine and feminine performances. This quote:

- shows an uneasy fit with diverse and embracing sexuality and gender roles

- raises questions around the expectations of kapa haka participants and how this may impact on rangatahi who may not conform to these notions
- shows tensions around ideas of tikanga and tradition and pre-colonial and kaupapa Māori ways of embracing diverse sexuality
- demonstrates different takes on heteronormativity in kapa haka.

As in the previous narrative, dominant discourses around sexual identity are apparent. The narrative also brings out notions of femininity and masculinity and how they are embedded in kapa haka practice. Further exploration in the proposed research could increase our knowledge and understanding of how sexuality and gender are perceived today in relation to tikanga Māori; particularly how and whether these notions are perpetuated as tika and as authentic expressions of Māori understandings and values.

GENERAL COMMENTS

The participants in the pilot interviews demonstrated the ways in which they grapple with competing ideas around masculinity, femininity and gender roles and how these may be enforced and reinforced by peer and societal norms through coercion and even violence. Ideas around gender and what it means to be a man and a father are of particular salience to Māori, given the young age at which rangatahi may become first-time parents, the lack of positive male role models and the assumed peer norms evident in the narratives. The excerpts also highlight the need to build dialogue and discussions that examine how we embrace what are argued to be fundamental Māori values of diversity and inclusion and to examine where notions and messages around tikanga clash and contradict. This is a sensitive area that needs to be talked about respectfully and in safe spaces; not to denigrate or destroy but to open considered dialogue.

8.10 Summary

The review demonstrated how normalised Western notions of masculinity and femininity are strongly implicated in inequitable and sexually coercive behaviours. In addition, although there is considerable interest in historical accounts of Māori sexuality, what this means for rangatahi today has not been explored. Given the gaps in our understandings of how these and other norms and concepts influence and impact on rangatahi, it is recommended that research be conducted to provide insights into this area and as a contribution to prevention approaches. The research is designed to address gaps in evidence around what prevention measures might work for rangatahi Māori and in response to the considerable gaps that this review found in relation to rangatahi Māori and sexuality.

A qualitative Kaupapa Māori approach is suggested as a way of conducting participatory research within Māori worldviews, which privileges rangatahi voices and acknowledges the importance of building on the considerable knowledge and commitment of those already working in the sector. This approach proposes in-depth interviews with rangatahi, whānau, kaumatua and other experts to achieve the aim of examining the influences that shape rangatahi Māori sexuality, gender roles and relationships. Interviews could offer insights into sexuality and coercion and provide rangatahi narratives that will engender interest and discussion. A number of Internet postings of selected sections from the interviews are proposed where, through facilitated processes, diverse groups of rangatahi will be invited to contribute to discussion, thus further building the database. Using a range of approaches, researchers, rangatahi, whānau, kaumatua, providers and other stakeholders could be invited to participate in analytical workshops, enabling diverse and multi-layered takes on the data.

Piloting, stakeholder engagement and feasibility testing demonstrated support for this approach, contributed to the research design and processes and provided a sound platform for the involvement of stakeholders in the research.

Pilot interviews provided examples of rangatahi narratives, illustrating ways that rangatahi might talk about gender roles, relationships and sexuality. Preliminary research team discussions on the data drew out useful directions for further exploration and analysis, should the research proceed. The piloting also indicated that that a full research project would be likely to elicit data of considerable interest to the field of rangatahi and sexual well-being.

9.0 Conclusions

The rangatahi and sexual health sector is characterised by a considerable number of Māori providers with skills, commitment and knowledge, many using Māori concepts and values to develop models and approaches applicable today. However, there is little literature available to inform the sector and, in particular to inform primary prevention efforts.

This report set out to address some of these gaps by examining rangatahi Māori and the grey zone of pressure and emotional coercion. The field of resilience also came under scrutiny, shifting from an initial focus on bouncing back to greater critical engagement with the notion of resilience in relation to Māori and the idea that particular markers of culture are associated with resilience. The review looked at the current state of knowledge and gaps, what questions this posed and suggested areas for exploration. The report covered the following areas:

- resilience
- rangatahi and sexuality
- violence and society
- sexual violence/coercion
- prevention
- knowledge gaps
- suggested research methodology.

The review provided a basis for the development of a methodological approach to address some of the knowledge gaps identified. Stakeholder engagement and feasibility and pilot interviews with rangatahi informed the review and the methodological development. In this concluding section, key points are drawn out in relation to the questions that the review set out to explore, followed by suggestions for the future based on a brief overview of what the project achieved.

Understanding resilience

- What do we know about resilience, particularly in relation to Māori and other indigenous peoples, and how useful is it as a concept for prevention?

In addition to the question above, the review was also interested in both internal assets (individual characteristics/resilience) and external assets, (collective/structural/societal) and what promotes healthy relationships for young Māori and enables resistance to unhealthy choices, pressure and coercion.

Internal assets are the resources embodied in young people and external assets are what they can call on when facing adversity. However, disparities, such as those between Māori and non-Māori, demonstrate that various populations are likely to have differential access to both internal and external assets. Māori also face inequitable levels of adversity, and not all adversity is healthy nor should it be tolerated.

Although a number of studies are currently underway in Aotearoa/New Zealand, there is still little written about indigenous people and resilience and even less about Māori and resilience. Literature suggests a range of connections may promote resilience, including family and community supports. Although it is suggested that particular cultural connections may promote resiliency, this is not strongly supported by the literature. Research that examines diverse forms of connections and their associations with resilience and well-being for Māori has not been conducted.

Resilience is an important concept in relation to an individual's ability to resist, survive and recover from sexual coercion/violence. However, as a more individual approach, it does not address change at a wider societal level and is therefore unlikely to contribute to reduction of sexual coercion/violence at a population level.

Understanding sexual coercion

- What do we know about the nature and causes of sexual coercion?

The report provides a theoretical base for looking at the interrelationship of violence and various forms of sexual coercion, indicating a clear need to address masculine and feminine dichotomies and their associations with coercion. Emotional pressure and violence operate on a continuum of sexual coercion as an intrinsic part of heteronormative sexual behaviours, which frame men as active and seeking sexual activity and women as passive and giving or withholding consent. The literature provides some information on the more immediate drivers of coercion/violence, such as alcohol and past experiences of violence and abuse. However, more underlying determinants, particularly in relationship to societal influences on rangatahi Māori, are not evident in the literature.

Understandings of Māori and gender roles

- What Māori knowledge bases and values are there to guide us?

Māori have just begun conversations around sexuality and gender roles, particularly focussing on what the past tells us about more diverse and inclusive notions of sexuality, which were transformed through colonisation. There is very little research on rangatahi, sexuality and gender roles, including how pre-colonial concepts can guide us today and whether and how they influence current constructions of gender and sexuality. To build a strong evidence base for prevention efforts we need to know more about rangatahi and how they make sense of who they are in the context of multiple and often negative representations of Māori and of rangatahi Māori.

Knowledge of primary prevention approaches

- What is the state of knowledge on sexual coercion prevention approaches for Māori?

Most research to date has focused on dealing with survivors/victims and perpetrators. In primary and secondary prevention research, we know more about sexuality education than other approaches. Evidence of effectiveness is uneven; there is considerable debate about its relevance to young people's experiences, and concern that it does not equip young people for their sexual lives. However, health literacy approaches, situated in communities and involving participatory and real life contexts are suggested as a way of increasing the potential and effectiveness of sexuality education.

Broad comprehensive and collaborative approaches are widely championed as the most effective ways of working towards the prevention of sexual coercion/violence. However, this is an emerging field and more discussion, development, piloting and evaluation is needed to advance the field of primary prevention. As a starting point we need to be asking: what would a range of primary prevention approaches look like, and what do we need to know to develop our ideas and knowledge about what might work?

The lack of literature on Māori approaches, including Māori community approaches, and the collective nature of many Māori communities suggest that this is an area that needs more exploration. Holistic Māori models of well-being and concepts such as whānau ora may have considerable applicability in strengthening whānau as a building block of Māori society, and in framing rangatahi Māori sexual well-being in relation to the whole person and as part of their wider networks and support structures.

Knowledge gaps

This review highlighted considerable gaps in our knowledge of rangatahi Māori and sexuality and sexual coercion. Particularly missing from the literature are rangatahi voices and the stories behind the statistics that are available. The literature review, stakeholder engagement and discussions with rangatahi provided guidance and demonstrated strong support for addressing some of these gaps. Given the gaps in our knowledge around rangatahi,

sexuality, gender roles and violence, research focussing on this area is suggested as a way forward.

Areas for exploration

- What could a research methodology look like that would address some of the knowledge gaps?

Since sexually coercive behaviours and attitudes in contemporary contexts are generated by and embedded in Western norms around gender roles, the study arrived at an approach designed to offer insights into the troubled domain where sexual coercion and everyday relationships converge and to explore this in light of Māori worldviews and experiences.

A qualitative, participatory approach based on Kaupapa Māori principles was designed to examine how young people understand and make sense of diverse and competing messages around gender and relationships, including an exploration of the saliency of Māori concepts in today's context. Although this research would not address all the gaps, it would draw together a number of the areas identified and provide a sound basis for proceeding. It would also enable interventions to be developed that would have the greatest chance of working effectively for rangatahi Māori.

Achievements of the project and suggestions for the future

This is the first government-funded report of its kind and the first time that issues of resilience, culture, Māori concepts and sexual coercion have been brought together in a coherent critique. In looking at what we know in relation to rangatahi and sexual coercion, the report has highlighted what we don't know and what we need to know. What we know about resilience, culture and sexual coercion and Māori has provided a basis for looking at where we need to get to – a strong knowledge and practice base, informed by rangatahi voices and participation, providing a way forward based on the challenges we face today.

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