Content warning- mentions of violence such as sexual, emotional, physical, family and whānau violence

Donny Riki

Ko wai koe? A brief history on you! How you got started on your mahi, what are you working on?

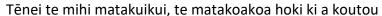
Te mea tuatahi ka nui te mihi kia a Ranginui e tū nei, me Papatūānuku e takoto ana

Mihi atu ki ngā tamariki o Rangi me Papa hoki

Tēnā koutou katoa e whai ake nei i ngā tapuwae o ngā tūpuna

Ki ō tatou tini mate, e haere ake nei ki te ao wairua, e mihia ake ana.

Otirā, ki te whānau rangatira ngā tautoko e tika ai te rere a te waka ei o manatū wāhine



I tipu ake ahau i raro i te maru o ēnei tūpuna

He uri ahau o ngā maunga tapu o Whiria me Kohukohunui hoki

Ko Ngāpuhi rāu ko Ngāti Paora ōku iwi

Ko kokohuia rōua ko Wharekawa ōku marae

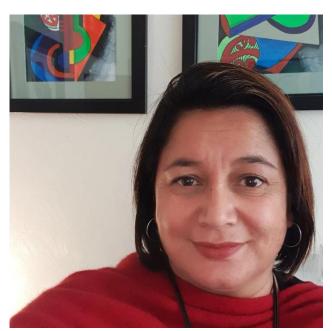
Ko Ngātokimatawāōrua rāua ko Tainui ngā waka

Ko Donny Riki tōku ingoa

Kei Taitoko e noho ana inaiānei

Nō reira, tēnā koutou, tēnā koutou kātoa.

Women have a fundamental right to live freely from violence- particularly sexualised violence; to have their voices heard and to access culturally responsive support hen they need it. Sadly, in Aotearoa, this is not a reality. Wāhine Māori are subjected to layers of violence experience from the mauri to the macro which extends across time and generations. Research evidences that indigenous women are exoticised, eroticised and fetishised 60% more often than their white female counterparts emphasising that violence towards wāhine Māori is deliberate, strategic and targeted. Additionally, there is an overwhelming number of men who perpetrate violence against women in intimate partner



violence and/or whānau violence- and where there is physical and emotional abuse, there is also rape. Traditional trauma-informed models use language that obscure violence and conceals perpetrator responsibility, shifting the agency to the survivor; therefore the survivor is blamed and pathologised. Wāhine Māori are then at increased risk of violence once formally diagnosed with a mental health 'disorder'.

My personal lived experience of sexualised violence and negative social responses fuelled my desire to be part of the future change I felt wāhine Māori needed within a paternalistic euro-centric social system. Practicing as a clinical psychodynamic psychotherapist for 20+ years now has provided a platform to work alongside wāhine/whānau recovering from harm caused by sexualised violence and challenge the insidious structures that reinforce it.

A small group of psychotherapy colleagues and I formed a partnership with the centre for Response-based Practice (RBP) in Canada which centres these ideas in conscious therapeutic practice and social service sectors.

He aha te whāinga matua mō tō mahi? What is the main goal for you work?

"Depsycholonisation" best describes the intention of RBP Aotearoa, and highlights mana and dignity. Viewed through an indigenous lens it is embedded in responses that uphold mana, social justice and aims to de-pathologise survivors, contextualise and reconceptualise sexualised violence allowing space for transformation and inter-generational healing. It also recognises the absence of, and need for traditional healing ceremony, collective accountability and cultural pride.

RBP Aotearoa are currently creating resources which inform survivors of and first-responders to disclosures of sexual violence (see "Follow My Lead" attached) and provide training, workshops and supervision for organisations and social service practitioners.

Hei aha o whakaaro ai e pā ana ki te whakamahia e ngā wāhine i tō kaupapa mahi rānei? Why do you think it's important to have wāhine Māori in your particular industry/business?

Wāhine Māori need to lead this initiative as they have lived experience of all forms of violence from the mauri to the macro. Whilst we acknowledge wāhine who are non-Māori as important allies, alongside many beautiful tāne, it is only wāhine Māori who experience micro-aggressions of inter-personal racism, racialised profiling and projection at each structural level of society and also inter-generational soul wounding from displacement, dispossession and dislocation from tūrahgawaewae- in their own whenua. These violations are harmful to whakapapa ki mua (future generations) through concepts of whare tangata (the womb) and tiaki whakapapa (preservation of mokopuna). Similarly, these concepts parallel the harm caused to the earth as our primordial mother. RBP Aotearoa believes that healing of the soul wounds experienced through ethnocide, genocide (and ecoide) is

possible and we support wahine Maori workforce development by offering mentorship, placements where possible, training and supervision.

Ka huri koe, te whakakitenga ki mua he aha ngā wawata mō te āpōpōtanga o Aotearoa? Looking at the future, what are your hopes/aspirations for your industry and Aotearoa?

As long as wāhine Māori continue to be violated, we need an ethically and culturally appropriate social response which highlights the actions of men who perpetuate violence and stop blaming and/or pathologising women. Psycholonisation- mainstream psychology that is centred in colonial psychological language fails to address many crucial aspects of recovery. Repositioning anti-colonial practices in mental health and social sectors is a small yet significant step towards transformational healing and equitable relationships with women, whānau, and Papatūānuku.

Me ro ki te hā o Hineahuone (pay heed to the dignity of women).