

“Representing Age and Ageing in New Zealand Literature”

The Māori Case

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METHODOLOGICAL FRAMEWORK

In the last fifty years there has been a growing interest in the study of age and ageing from various perspectives, probably in response to an increasingly ageing population in contemporary Western societies. The work of social historians has also been challenged by a new perspective, promoted by cultural historians and based on a kind of ‘philosophical relativism’. While the former mainly focus on the investigation of demographic research, economic data, and documents of public policy (when available), the latter privilege subjective sources such as diaries, biographies, literary and artistic works, religious and scientific texts, and prescriptive essays on old age (Johnson 1998: 12). This different methodological approach emphasises the silences of the sources and the “situatedness of historical texts within ambiguous and multiple constructions of meanings” (Johnson 1998: 1). The tension between these two different paradigms, the positivistic/empiricist and the relativistic, is still unresolved.

David Troyansky has underlined how research could benefit from transcending disciplinary divisions between social and cultural approaches to the history and representation of old age, and advocates an integrated reading of all the possible sources (Troyansky 1998: 97). Johnson, however, underlines that the construction of a ‘total’ history is hindered by

two major problems: the lack of objective transversal social data, especially in past epochs or peripheral contexts, and the conflicting views that may arise from a subjective approach. Documentary sources from classical antiquity, the Middle Ages, early modern Europe and even more recent times such as the 19th century are in fact insufficient, as they offer only partial information about an elite and leave many social categories unrepresented. On the other hand literary, artistic and cultural representations can be contradictory or inconsistent, as they may reveal a personal bias or be a projection of the author's fears, doubts or hopes rather than conveying a larger viewpoint. Cicero (106-43 BC), for example, gives a positive picture of the elderly as repositories of moderation and wisdom, claiming they should be respected and obeyed by younger generations (Parkin 1998: 26), while satirist Juvenal (ca 55-135 AD) is unpleasantly realistic in conveying the physical and mental shortcomings of old age (Parkin 1998: 32). Even the common assumption of a golden age for elders in the past, in which "older people were in some ways more active and more valued participants in civil society" than today is not supported by evidence, at least not for elders who were "neither literate, nor wealthy nor powerful" (Johnson 1998: 6). Old age, says Johnson, would therefore be better represented if historians paid attention to a number of small specific issues and voices rather than trying to construct meta-narratives and if they focused on discontinuities rather than continuities of images, ideas and policies (Johnson 1998: 16-18).

This premise constitutes the methodological framework of the present essay on age and ageing in Aotearoa New Zealand. The tension between the two different approaches – positivistic/empiricist and relativistic – will be held. Although plenty of formal evidence, such as statistics and documents of public policy, is now available in Aotearoa New Zealand, these sources might give only a partial picture of the subject. Some categories, in this case the Māori indigenous minority, might be under-represented or misrepresented, as their idea of age and ageing differs considerably from the dominant view. Representations of old age found in cultural documents and literary works by Māori writers are therefore quite useful to integrate the missing information provided by official documents.

THE OFFICIAL SOURCES: THE NEW ZEALAND POSITIVE AGEING STRATEGY (PAS)

New Zealand population is constantly ageing. In the early 1980s the median age was 26 years (this means that half of the people were younger than 26 and half were older). In 2014 it was 37.5 years. Comparatively, these changes align with those of other ‘developed’ countries, although New Zealand population is slightly younger. For example, in 2014 the median age in Japan and Germany (which have the world’s oldest populations) was 46.1 years, in the United Kingdom 40.6 years, in Australia 38.3 years, in the United States 37.6 years. The number of aged 65-plus is increasing. In 2011 the first of New Zealand’s baby boom generation turned 65. In 2014 650,000 people (14 percent of the population) were aged 65-plus – a 55 percent increase since 1994. That number is projected to reach 1.2 million by 2034, with people over 65 making up 22 percent of the population. There has been an even larger increase in the number of people aged 80-plus. Between 1994 and 2014 the number of people over 80 increased by 80 percent, and the trend will continue. In 2014 more than 160,000 people were aged 80-plus; this number is expected to be 368,000 by 2034, a rise of 130 percent. Over this same time period the number of people aged under 20 is expected to increase by only 3 percent (“2014 Report on the Positive Ageing Strategy”: 10).

These data have been taken from the “2014 Report on the Positive Ageing Strategy”, the latest update on the progress of the elaborate government plan started in 2001, the “New Zealand Positive Ageing Strategy” (PAS), and aimed at activating a practical response to the changing needs of an increasingly older society. The PAS provided not only a set of principle statements but was also a framework for policies and programmes across the government sector, that is, “a basis for action”, in the words of the then Minister for Senior Citizens, Hon Lianne Dalziel (“The New Zealand Positive Ageing Strategy”: 3). A total of 34 consultations were held throughout New Zealand, including four meetings specifically for Māori, to establish the goals for positive ageing according to certain priority areas, seek feedback on the principles underlying the project, identify mechanisms for regular monitoring, reporting and review of progress on the Strategy, and other practical procedures. Following the positive ageing principles, the effective policies of the Strategy will:

Empower older people to make choices that enable them to live a satisfying life and lead a healthy lifestyle;

Provide opportunities for older people to participate in and contribute to family, *whānau* [extended family] and community;

Reflect positive attitudes to older people;

Recognise the diversity of older people and ageing as a normal part of the lifecycle;

Affirm the values and strengthen the capabilities of older Māori and their whānau;

Recognise the diversity and strengthen the capabilities of older Pacific people;

Appreciate the diversity of cultural identity of older people living in New Zealand;

Recognise the different issues facing men and women;

Ensure older people, in both rural and urban areas, live with confidence in a secure environment and receive the services they need to do so; and

Enable older people to take responsibility for their personal growth and development through changing circumstances. (“The New Zealand Positive Ageing Strategy”: 6-7, my emphases)

The ten aspirational goals for central and local government agencies and communities to understand and respond to the issues of ageing are:

1. Income – secure and adequate income for older people.
2. Health – equitable, timely, affordable and accessible health services for older people.
3. Housing – affordable and appropriate housing options for older people.
4. Transport – affordable and accessible transport options for older people.
5. Ageing in the Community – older people feel safe and secure and can age in the community.
6. *Cultural Diversity – a range of culturally appropriate services allows choices for older people.*
7. Rural Services – older people living in rural communities are not disadvantaged when accessing services.
8. Positive Attitudes – people of all ages have positive attitudes to ageing and older people.
9. Employment Opportunities – elimination of ageism and the promotion of flexible work options.

10. Opportunities for Personal Growth and Participation – increasing opportunities for personal growth and community participation. (“The New Zealand Positive Ageing Strategy”, 20-23, my emphasis)

Although some of the principles underline respect of cultural diversity, which is also referred to in goal 6, the project has been criticised for being Western-centric, insofar as it conceives of successful ageing in terms of Western values such as productivity, activity, independence, and personal decision-making and does not fully capture a Māori perspective of ageing. This is especially evident given the rise of distinct models of well-being and Māori-defined frameworks for development that have emerged since the later part of the 20th century and the beginning of the new Millennium, such as *He Korowai Oranga* (“Māori Health Strategy”) and the concept of “Economy of *Mana*” by Manuka Henare.¹

“Māori Health Strategy”, in particular, is based on the notion of *Te Whāre Tapa Whā*, according to which good health for Māori requires balance and harmony in relation to the four domains of wellbeing. They are *te taha wairua* (spiritual), *te taha hinengaro* (mental), *te taha whānau* (family) and *te taha tinana* (physical). This model is conceptualised as being equivalent to the four walls of a meeting house (*whārenui*) with each wall being of equal strength so that the house is strong and connected to the place and space around, and the ground it rests upon.

A 2010 study of a Māori doctoral student at Massey University (NZ), William John Werahiko Edwards, has proposed an alternative Māori version of PAS combining Western scientific inquiry, as found in the multidisciplinary discipline of gerontology, and *Mātauranga Māori* (Māori knowledge). Edwards’s thesis is philosophically positioned at the interface between two different paradigms – Western science and indigenous knowledge – and uses the “interface approach”, further developing work undertaken by Māori psychiatrist Mason Durie, an influential figure in the rise of the “Māori Health Strategy”. The notion of interface works only if researchers explicitly accept the legitimacy of both inquiry paradigms, considering neither of them as superior or inferior to the other (Edwards

1 For *He Korowai Oranga* cp. (<https://www.health.govt.nz/our-work/populations/maori-health/he-korowai-oranga>). For the Economy of *Mana* cp. Paola Della Valle, “Indigenous Degrowth and Global Capitalism”, pp. 218-219.

2010: 55 and 291). This approach is also consistent with Willie Ermine's notion of "ethical space", that is, "the appropriate place from which to transform knowledge because it offers a view of alternate knowledge systems in simultaneous fashion" (Edwards 2010: 53).

In his research Edwards makes two different ontological and epistemological worlds converse. While he acknowledges and uses the outcomes of gerontology (the scientific side of the interface), he also draws on two other sources of data offering Māori perspectives and values on old age: an analysis of forty-two *whakataukī* or traditional proverbs about ageing as a process, the aged and age; and a qualitative study of twenty older Māori people based on interviews. *Whakataukī* are a genre of Māori oral literature consisting in a body of highly metaphorical proverbial sayings used for the transmission of traditional knowledge. Edwards underlines how even within gerontology there has been a movement toward incorporation of literature since:

The result of such an expanded, engaged dialogue between the form of knowledge developed through literary interpretation and more familiar scientific approaches can yield unexpected and undoubtedly fruitful results. (Edwards 2010: 64; quoted from Holstein: 826)

As to the qualitative data collection, Edwards (like the previously-mentioned Johnson) believes in the importance of biographical approaches and subjective concerns, of differences and variations, in the study of old age: "the 'inside view' of life, as individuals experience it, and interpretation of their life, is crucial to understanding the human experience" (Edwards 2010: 65).

The conclusion of Edwards's research is that Māori positive ageing is characterised by a two-dimensional concept that incorporates a process dimension and an outcome dimension. The process dimension is consistent with a life-course perspective and therefore recognises that ageing is a life-long process where circumstances encountered during life may impact cumulatively and manifest in old age. Many determinants can impact this dimension such as educational achievements, employment status, the degree of material wellbeing and financial security, access to medical cure and health education, the size of one's family, and the amount of family

responsibilities. More generally, these factors are also the results of historical, social and political processes.

The outcome dimension can be described in terms of complementary universal and Māori specific outcome domains. The universal outcome domains are expressed in the PAS. The Māori-specific outcome domains identified in the study are the following:

kaitiakitanga (stewardship: caring for the things most valued by Māori, the environment and people);

whanaungatanga (connectedness and kinship: consolidation of relationships within and beyond the family);

taketuku (transmission of values and knowledge);

tākohā (contribution to Māori collectives);

takatū (adaptability over time, and between the Māori world and the wider world); and

tino rangatiratanga (self-determination: control over life circumstances and in determining Māori positive ageing).

The overarching outcome domain is *taupaenui* (realised potential) (Edwards 2010: 303).

Māori Positive Ageing, according to Edwards, must therefore embrace a specific cultural approach together with larger economic and health objectives, since it is concerned with “older Māori ageing in their own terms, having control of their life circumstances, enjoying a high level of social engagement and being economically secure” (Edwards 2010: 292).

Another research project, conducted by Dr Mere Kēpa and called “Bring ‘Me’ Beyond Vulnerability. Elderly Care of Māori, by Māori” (2006), stresses the role of the family in caring for elders, who are necessarily vulnerable. In particular, it emphasizes that care does not imply only health related matters but also cultural, political and social relationships and is grounded in *whānau* (extended family), *whanaungatanga* (connectedness) and *kanohi kitea* (presence and participation).

Finally, a feasibility study on Māori living to advanced age, commenced in 2006 and finished in 2011, also offers telling results. The research investigated 33 Māori aged 75 to 79 years living in the Bay of Plenty and Lakes District Health Board areas and was aimed at organising a

future quantity and cohort research (Dyall, Kerse et al. 2011). Māori elder engagement involved participation in a series of focus groups to identify important questions that they considered should be asked in order to capture and record areas of wellbeing which are important to *kāumatua* (elders/leaders) and *kūia* (older women). The study was named *Te Puawaitanga o Nga Tapuwae Kia ora Tonu*, meaning “the blossoming of the path to maintain good health,” and framed within the two models for Māori health: *Te Whāre Tapa Whā*, which has been illustrated before, and the *Pōutama* model of human development, according to which “Māori life moves through a series of stages of growth, with each stage linking to the next step creating a stairway which goes upwards with no ending, for there is no limit to growth and development of people within a lifetime or across generations” (Dyall, Kerse et al. 2006). The *Pōutama* model of human development is visible in many meeting houses. One wall depicts in some way the *Pōutama* pattern, showing the complexity of human life. Māori therefore consider that the growth and development of a person continues irrespective of their health or disability until death.

Almost all participants could identify their tribal group. Participants reported that cultural values influenced how they lived their lives. The majority of participants identified that cultural identity was important for them and this had been developed alongside their personal values, spirituality, religion, education and the upbringing provided by their parents, *whānau* and *marae*.² Over 50% of participants were actively involved in contributing to their grandchildren and great-grandchildren. In addition, the majority were actively involved in tribal and *marae* activities, their local community, church and wider society. The roles they played within their family and wider community were diverse and they included being mentors, guardians and elders. Two-thirds of the participants were active and were able to do recreational activities they enjoyed. The concept of retirement as ‘disengagement’ for them did not generally exist for almost all were still active, supporting their families and their community, or involved in paid employment. Food and access to healthy traditional Māori

2 A *marae* is the traditional gathering place in front of the meeting house. It also means the spiritual and cultural centre of the village, and the tribe with which a Māori identifies.

food were identified as important for over 80% of participants. They reported that they enjoyed eating this food on a regular basis.

Although the study has provided results only on 33 people, which cannot be generalised to the greater population of older Māori or be a representative sample, the quality of the information collected thanks to the involvement of the participants in the project at all stages and their constant feedback gives us an idea of the areas of importance for wellbeing in old age for Māori people.

In their monograph on life expectancy and mortality in New Zealand history, Woodward and Blakely explore the reasons why this country could boast the lowest mortality in the world for roughly 70 years, from 1870 to 1940, but only for non-Māori. If European settlers had considerably improved their living standards in the new country, this was not the case for the indigenous population. In 1881 life expectancy for Māori was 35 years less than non-Māori (18 years at birth). By 1946 the gap had closed to about 20 years: still a considerable difference (Woodward & Blakely 2014: 74). Besides the pernicious effects of the new pathogens spread by European immigrants, Māori poor ageing and early deaths were certainly a consequence of the high rate of disadvantage and material hardship suffered by Māori, due to economic marginalisation and the impoverishment of their cultural world. Today, according to the NZ Ministry of Health's data, the life expectancy of a non-Māori male and female born between 2012 and 2014 is respectively 79.5 and 83.2 years. In the Māori population it is 73 years for males and 77.1 years for females (Independent Life Expectancy in New Zealand 2013: 7). If the present trend is maintained, the gap will be closed by 2040 (Woodward & Blakely 2014: 219). These comforting statistics convey the picture of an indigenous minority that has been able to overcome colonial trauma and assimilation by militancy and resilience, and the defence of their worldview. A Māori positive ageing strategy is a further challenge they will have to face in the future.

Representations of ageing, the aged, and age however, were already present in the works of many writers of the Māori Renaissance. They allude to the role and function of elders in their society and also to the problems and hinders of positive ageing in their terms.

AGE, AGEING AND THE AGED IN NEW ZEALAND LITERATURE

In the voice of Māori writers elders are often represented as “our living *taonga* (treasures)”, to use Dyll’s words (Dyll, Kerse et al. 2011). This is most of all due to the fact that they are the repositories of traditional knowledge and values, and of *te reo* (Māori language). In the short story “A Game of Cards” by Witi Ihimaera (from the collection *Pounamu Pounamu*, 1972), an older Māori woman, Nanny Miro,³ one of the young narrator’s relatives, is depicted as the custodian of the *whānau*’s heritage and past. Her place, evoked in the narrator’s childhood memories, is defined as a “treasure house, glistening with sports trophies and photographs, pieces of carvings and greenstone, and feather cloaks hanging from the walls” (Ihimaera 1972: 2). Nanny Miro is also the guardian of the most valuable of Māori treasures: the ancestral land, which she owns in great quantity. In rewriting the story for the 2003 new edition of *Pounamu Pounamu*, her ‘political’ engagement is made more explicit by Ihimaera with the addition of remarks which underline her preoccupation that the younger generations might not be up to this role:

“How are you going to do good things for your people if you can’t concentrate?” she would ask. “Here I am, counting on you to get a good education so that you get the rest of our land back and you’re just hopeless, he hoha koe [you are annoying].” (Ihimaera 2003: 12)

Or,

“Aue [Alas],” she would sigh. Then she’d look at me, offer words of wisdom that didn’t make sense like, ‘Don’t let me down,’ or ‘If you can’t beat the Pākehā one way remember that all’s fair in love – or cards’. (Ihimaera 2003: 12)

Nanny Miro lives with her extended family in the Māori village of Waituhi (an omnipresent “place of the heart” in Ihimaera’s fiction). Within the Māori community older people are cared for by the other members, as the

3 Nanny is a term for older relatives: grandmothers, grandfathers, great-grandparents, great-aunt and uncles, etc.

scene of Miro’s death shows. Miro loves playing cards at home with the other *kuias* (old women) of the village, surrounded by clouds of smoke, gossiping about the village people, laughing and cheating each other. On the night she passes away all the community gathers to accompany her in the last journey while playing cards:

The old ladies sat around the bed, playing. Everybody else decided to play cards too, to keep Nanny company. The men played poker in the kitchen and sitting room. The kids played snap in the other bedrooms. The house overflowed with card players, even onto the lawn outside Nanny’s window, where she could see [...]. Everybody laughed. Nanny and Mrs Heta started squabbling as they always did pointing at each other and saying You cheat, not me! And Nanny Miro said: I saw you, Maka tiko bum [shit face], I saw you sneaking that card from under the blanket.

She began to laugh. Quietly. Her eyes streaming with tears.

And while she was laughing, she died. (Ihimaera 1972: 4-5)

This story represents several aspects of ageing and age among Māori. On one hand the image of the *kuias* as chain smokers evokes the notion of *manaakitanga* (hospitality, generosity), that is, the creation of a comfortable social context for members of the community or guests in general, by encouraging tobacco consumption. Sharing smokes seems to have assumed a cultural value in connection to *manaakitanga*, says Heather Gifford, but it has also become a dangerous cause of morbidity and mortality among Māori, whose rates of smoking remain more than twice that of non-Māori (Gifford 2015: 83). We can recall here Edwards’ notion of “process dimension” for a Māori Positive Ageing Strategy, that is, the need to see positive ageing in a life-course perspective, which implies health education and reconsideration of the concept of *manaakitanga* in relation to tobacco smoking. Probably, in the early seventies, when the short story was written, the extent of the pernicious effects of smoking on health had not been fully realized yet. On the other hand, “A Game of Cards” evokes many Māori values which contribute to Positive Ageing: connectedness and kinship (*whanaugatanga*), caring for the things most valued by Māori (*kaitiakitanga*), and transmission of values and knowledge (*taketuku*). Also, it illustrates the importance of the extended family (*whānau*) and the presence of and participation in the community (*kanohi kitea*), two of the three factors necessary in the care of the vulnerable

together with *whanaugatanga*, according to Mere Kēpa. Finally, in the story Miro recounts that she decided to leave the hospital and be treated at home, although she was seriously ill (Ihimaera 1972: 4). We can infer that she is a terminal patient who has chosen her “deathscape” (Moeke-Maxwell 2015: 170). Another Māori belief is pointed out here. As Moeke-Maxwell highlights, “Home is a place that is associated with supporting the living to live well until they die. It is widely accepted that Māori individuals want to die at home, surrounded by their whānau” (2015: 169).

The “Beginning of the Tournament”, in the same collection, describes the participation of older Māori in recreational activities, deemed important in the feasibility study mentioned before. Here the account of the annual Māori hockey tournament, which draws teams from all the East coast in the North Island, becomes a way to celebrate the ‘irrepressible spirit’ of Māori and their values. The makeshift organisation of the event and the disregard of rules by participants are hilarious. Set in a paddock among browsing cows, an atypical match is described. The teams include kids who have never played before and grandmothers holding a walking stick in one hand and a hockey stick in the other. An older Māori man, Nanny Kepa, is a jury member of the Grand Parade, where teams compete for best attire, and is also the referee of the women’s match. Cheating is admitted, as long as it does not favour the team who won the year before, according to a redistributive sense of justice. The event is in fact a way to get Māori together and revive traditions such as action songs, traditional food, and popular dances.

Two more stories in *Pounamu Pounamu* include forceful images of old age that anticipate some key points of a Māori PAS: “The Child” and “The Whale”. In the former a grandmother moves to her son’s house after becoming a widow. The loss of her husband has also affected her mental equilibrium. The story is narrated by the young grandchild who helps her in accomplishing everyday activities and accompanies her in long walks on the beach. Strong bonds between grandchildren and their nannies are frequent in Ihimaera’s fiction, like that between Nanny Paora and his great-grandchild Pene in the novel *Whānau*. The structure of the extended family favoured close ties between generations and *whangai* (adoption) was a relatively common practice whereby the young were raised as children of their grandparents or other relatives, especially in large families (Della Valle 2010: 113). “The Child” depicts a world of warm relationships and

caring for elders, which makes the inevitability of their deaths easier to be accepted. Home appears again as the favourite deathscape for Māori, and *whānau* (family) and *whanaungatanga* (connectedness) are essential for a serene end-of-life. *Whānau*, too, forcefully claims the right deathscape for the older. The novel ends with the community’s collective search for Nanny Paora and Pene at night, after they have run away together. The child wanted to prevent the old man from being taken away from him to a hospital or rest home.

“The Whale”, instead, opens with an older Māori in the darkness of the meeting house. He is teaching his grandchild Hera the symbolic meaning of the building in all its parts, exemplifying the transmission of values and knowledge (*taketuku*). The story, however, is the most pessimistic in the collection. While crossing his semi-deserted village the man sees images of decay and neglect everywhere. Many young people have moved to urban areas and most of those who have stayed live debauched lives, without any interest in their culture and traditions (apart from Hera). The last image of the story, “a whale, stranded in the breakwater, [...] already stripped of flesh by the falling gulls” (Ihimaera 1972: 121), is the ultimate sign of a dying animal and a seemingly dying culture. In the later novel *The Whale Rider* (1987), Ihimaera will use many images from this story. One is the figure of the despotic great-grandfather and tribal leader Koro Apirana, who is the repository of customary knowledge and feels in charge of the education of the younger generations, among whom he is seeking the future male chief of the tribe. Here the bond between elders and younger generations seems to be broken by the obstinacy of the older man to want a male successor. By not applying *takatū* (adaptability over time) in gender relations, Koro Apirana risks being an unwise guide for his community. To his surprise, he will dramatically discover that it is a girl, not a boy, his heir. Other images taken from the above-mentioned story refer to the mythical ancestor and founder of the village Paikea, who arrived ashore riding a whale, and to the stranded whales, symbolising the decay of the Māori race.

Patricia Grace also describes how *kaitiakitanga* (caring for the people and the things most valued by Māori) is carried out by an older Māori woman in the eponymous short story “Waimarie” (from the collection *Electric City*, 1987). Waimarie looks after her mentally disabled twenty-year-younger brother and is bringing up two girls, probably

granddaughters, who are staying at her place because of problems with their unstable alcoholic mother. She represents the fulcrum of the *whānau* for her support to *whanaugatanga* (consolidation of relationships within the family) and *tākoha* (contribution to Māori collectives). She also participates as a *kaumātua* (elder) in traditional ceremonies and the image of her singing a *karanga* (welcome call) on the *marae* for a *tangi* (traditional funeral ceremony) closes the story. Edwards underlines how relevant is for Māori positive ageing the involvement of older people in the family, in the collectives, and in the education of younger generations. However, if the level of demand is too high and places burdens on them, it can also be harmful. So he suggests compensatory actions to be set up, such as the involvement of a larger number of older people in *marae* activities, to reduce demands on individuals, or courses to up-skill older Māori with regard to customary knowledge in order that there are more elders to take on formal roles (Edwards 2010: 298).

The participation of older people in the community life is also exemplified in *Potiki* (1986), which tells of a rural extended family, the Tamihanas, holding on to ‘the old ways’ and applying a form of subsistence-economy model, which allows them to be self-sufficient in times of economic crisis. The family includes old Granny Tamihana, the mentally handicapped Mary, and her physically disabled son Toko or *potiki* (the last-born), whose father is unknown. In the extended family structure the disadvantaged, the weaker, the older and the disabled are protected and cared for, and the bond between generations is stronger. Granny Tamihana looks after Mary and Toko with tender affection and is reciprocated by having the respect and love of the community. Unlike the nuclear family organised around few members overloaded with duties and roles, the extended family redistributes functions and responsibilities, valorising the potentials of each member and activating reciprocal support. As Martha Nussbaum underlines, a truly civilised society is one that guarantees the rights of the ‘weaker’ categories (Nussbaum 2013). In *Potiki*, as in other works by Māori writers (for example, Ihimaera’s *Whānau*), it is the community that exerts surveillance on its members and looks after them, providing that social control that is often absent in large urban areas, as well as warmth and sense of belonging. The connection with one’s origins and ancestors, the sense of belonging to a culturally well-defined context, and the inclusion in a family group are necessary in the care of the older

and disadvantaged categories. A scene in *Potiki* clarifies different attitudes in the approach toward old age and disability. Pākehā⁴ private developers, evocatively renamed Dollarman, have made a millionaire offer to the community for the land where the cemetery and the meeting house stand, which would give good access to the neighbouring site under development. The community receives Dollarman several times at the meeting house before a decision is taken. Finally, they run down the offer because they prefer to protect their sacred places, avoid pollution, and preserve their land as it is. This decision sounds incomprehensible for the developers, as it goes against their view of ‘progress’. But the community claims the right to defend another notion of progress. In one of these meetings, while Granny, Mary and Toko are comfortably sitting on the mats and listening to the two parties talking, one of the developers notices the three of them, and Toko understands how he perceives them:

Right then I saw what the man saw as he turned and looked at the three of us and as my eyes met his eyes. I saw what he saw. What he saw was brokenness, a broken race. He saw in my Granny, my Mary and me, a whole people, decrepit, deranged, deformed. That was what I knew. (Grace 1995: 102)

In this sentence Grace underlines not only the gap between two notions of progress (the Western and the indigenous one), but also different approaches to the weaker categories in society. They certainly should not be there in the eyes of the Pākehā developers, but hospitalised or taken care of by special institutions, while for the Māori they are integral part of the community, with their function and role.

The literary texts that have been analysed showed many years in advance images of ageing and old age that would be later found in quantitative and qualitative studies on Māori older people. This confirms Johnson’s point that research in this field should be carried out maintaining the tension between a relative and an empiricist approach, and that literature, together with other instruments, can be helpful in representing the condition and needs of older people by giving voice to the silences of the sources, especially those of categories that are less visible or socially powerful such as minorities, and by highlighting the “situatedness of

4 *Pākehā* is the term for a New Zealander of European origin.

historical texts within ambiguous and multiple constructions of meanings” (Johnson 1998: 1).

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