Native Hawaiian Interdisciplinary Health Program: Decolonizing Academic Space, Curriculum, and Instruction

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Abstract

In Spring of 2012, the University of Hawai‘i at Mānoa, John A. Burns School of Medicine, Native Hawaiian Center of Excellence, and the Myron B. Thompson Baccalaureate Program partnered and created the Native Hawaiian Interdisciplinary Health program to address the dearth of Native Hawaiians in the helping professions. The program has three main objectives: (a) expose students to interdisciplinary experiences similar to what they would encounter in the “real world,” (b) introduce students to an inquiry-based learning model rooted in both the needs and strengths of the client system, and (c) help Native Hawaiian students recognize their Indigenous identity as valuable and crucial to the formation of their professional identity. While qualitative data reveal the program to be effective, it may be more valuable as a platform from which to explore academic decolonization and the Indigenization of academic space, curriculum, and instruction. Key to this effort is the rupturing of current colonial practices that inhibit the learning of both the Indigenous student and the [often] non-Indigenous instructor; confronting the positionality of the instructor as purveyor of white western hegemony; and creating new subjectivities for both instructors and students through reflective learning, engaged dialogue, and mentorship.

Keywords: decolonizing social work, Indigenous social work, interdisciplinary education, Indigenous identity in helping professions

The University of Hawai‘i, Myron B. Thompson School of Social Work, despite an extended history of working with and for Native Hawaiians, has been going through an intentional Indigenization process since 2007 when the School co-hosted the Indigenous Voices in Social Work: Not Lost in Translation conference. What started off as a philosophical discussion in 2007 evolved into a concerted effort to establish the school as a Hawaiian Place of Learning beginning in 2011. Since then, every facet of school functioning has been impacted including our policies, procedures, curriculum, and especially, our strategic plan. A necessary result of this effort was a change in direction of the School’s wa‘a (canoe) as we together explored the possibility of a school informed by Native Hawaiian values, healing systems, and cultural practices.

The Indigenization process has been deliberate and challenging as kumu (faculty), staff, haumāna (students), and community stakeholders navigate and negotiate the difficult terrain of decolonization to establish a legitimate Hawaiian
Place of Learning. The challenges include, but are not limited to, the recognition of the social work profession as a potential part of a larger colonial project (Faith, 2008); the positionality of Indigenous and non-Indigenous social work instructors and their relative comfort with and acceptance of an Indigenous effort (Gair, 2008); the uneven receptivity toward decolonization as an academic construct by kumu, staff, haumāna, and the community at large; and the discomfort with the lack of a specific, unambiguous, and accommodating definition of Indigenous and Indigeneity.

Still, the process has been creative, as reflected in the many programs and projects that have resulted from the Indigenization effort:

- The School’s graduate program reinstated the Hawaiian Learning Program dormant since the late 80s;
- The school was named after famed Kanaka Maoli social worker and community leader Myron B. Thompson;
- An oli (Kanaka Maoli chant) was bequeathed to the school by Kanaka ʻŌiwi haumana;
- Native Hawaiian healing systems made their way back into the broader curriculum in meaningful ways;
- the Hawaiian Learning Program incorporated and utilized multimedia to explore Native Hawaiian healing methods such as Hoʻoponopono;
- Indigenization (renamed “Hawaiian Place of Learning”)—championed by the Kanaka Maoli Dean of the School and supported by kumu, haumāna, and staff—was formally articulated into the School’s strategic plan;
- conversations on decolonization, Indigeneity, and a Hawaiian Place of Learning found homes in the classroom and school meetings;
- social work courses on native Hawaiian well-being, critical cultural factors, and decolonizing social work became regular curriculum offerings;
- the interdisciplinary, community anchored, and culturally resonant Ke Aʻo Mau Program was launched to help recruit and retain Kānaka Maoli (Native Hawaiian) haumāna and ground current and future social workers in Indigeneous knowledge, values, and skills; and
- the BSW program, in partnership with the John A. Burns School of Medicine, designed and implemented the Native Hawaiian Interdisciplinary Health program.

**Native Hawaiian Interdisciplinary Health Program**

The Native Hawaiian Interdisciplinary Health Program (NHIH) program brings together Native Hawaiian pre-med haumāna participating in the Native Hawaiian Center of Excellence (NHCOE) in the Department of Native Hawaiian Health at the John A. Burns School of Medicine and Baccalaureate Social Work (BSW) haumāna enrolled in the Myron B. Thompson School of Social Work. NHIH, now running since 2012, has been very well received; but the hope is that the program can serve
as a platform from which to discuss important issues for other schools of social work and/or medicine engaged in Indigenization, decolonization, and culturally resonant programming. Like the School of Social Work, the School of Medicine has a long history of interest, investment, and involvement in the Native Hawaiian community and as part of their charge to promote the health and well-being of all Native Hawaiians created NHCOE to help in the recruitment and retention of Native Hawaiians to the health professions in general and medicine in particular. Toward this end, the NHCOE and the BSW Program formed a joint project for Native Hawaiian haumāna in pre-medicine and social work.

NHIH has two goals: (a) increase the number of Native Hawaiians in the health professions prepared to work with the underserved; and (b) expose Native Hawaiian pre-med and social work haumāna to a variety of culturally informed, interdisciplinary, community-based learning experiences to help them on their path into health careers. The program also has three objectives: (a) expose haumāna to an interdisciplinary experience similar to what they will encounter in the “real world”; (b) introduce haumāna to an inquiry-based learning model rooted in the specific needs and strengths of the client system; and (c) help haumāna recognize their Native Hawaiian identity as valuable to the development of their professional identity. The program includes four 8-hour sessions held in four consecutive months with each following a near identical agenda: Native Hawaiian programming, inquiry-based learning, interdisciplinary team work, place-based education, and shared meals. This paper will focus on both the Native Hawaiian programming and place-based education of the NHIH program as decolonizing acts.

The NHIH represents one of many efforts on the part of the School to extend and enhance culturally resonant programming that affirms the centrality of the host culture to both the implicit and explicit curriculum. The NHIH Program in turn enriched the already complicated and nuanced conversations on Indigenization and decolonization. Much of the material surfaced by the Program was foreseeable and predictable, but was often broader and deeper than imagined, while other material was beyond our vantage. What follows is a close examination of key program components and the critical learning that resulted from program implementation.

**Authorial Positionality**

One of the important aspects of our Hawaiian Place of Learning here at the School of Social Work is the responsibility on the part of the non-Indigenous social work instructor to own their position within a colonial system rather than feigning ignorance or hiding behind indignation or guilt. In light of this, it is important that I am clear about my own heritage. My family has been here in the Islands for generations, originally arriving in 1883 aboard the SS Belle Rock from the Azores and Madeira to work the sugar plantations. I was born and raised in Waiʻanae, a community with the largest Native Hawaiian population on the Island of Oʻahu. Like many long-time residents of the Islands often identified as plantation peoples, I have always considered myself local and did not interrogate the term as potentially part of a larger colonial project until I was a young adult. Much of my work as a
professional social worker and family therapist has been with Native Hawaiian keiki (children) and their 'ohana (families). While some may argue that my roots in the Islands are deep, they are in fact quite shallow when compared to Kanaka ʻŌiwi (Native Hawaiian) who are Indigenous to this land. I recognize that my family’s arrival was part of a larger colonial project and led to the ongoing dispossession of Kānaka Maoli. My hope is that this stands in stark contrast to the colonial paralysis described by Gair and Faith (2008) that commonly accompanies confrontation with our shadow side as non-Indigenous social work instructors.

Haunani Trask stated, “Because of colonization, the question of who defines what is Native has been taken away from Native peoples by western-trained scholars, government officials, and other technicians” (1999, p. 43). It is tempting for the social work instructor like myself, who is long imbedded in Island culture and granted a bit of Kānaka knowledge, to begin acting and speaking of and for Kanaka Maoli interests. Instead, it is important that non-Kānaka social work scholars like myself function as what Goodyear-Kaʻōpua (2013) referred to as the settler ally and heed the counsel of Julie Kaomea who suggested that non-Natives ask themselves three important questions as they navigate Kānaka Maoli culture: “What is my place in this setting? What is my role or kuleana here? and Is this the time and place for me to step forward … to step back … or to step out” (2009, p. 95).

Recognizing my positionality directly informs my practice as a social worker, as an instructor, and especially as a facilitator of the NHIH. My role relative to a Hawaiian Place of Learning and the NHIH in particular is that of settler ally, and my participation is largely determined by the permissions I am granted and directions I am given by my Kanaka kumu. I recognize that there are times when my participation will be appropriately curtailed or even denied. My hope is that I am culturally sensitive enough to recognize this in advance.

Critical Terms, Definitions, and Identity

It is important to note that terms like Indigenous, Native, First Nations, First Peoples, sovereignty, settler, colonialism, and decolonization, to name just a few, are complex, over-determined, and often contested (Allen, 2002; Garrouette, 2003; Kauanui, 2008; Niezen, 2003; Sommerville, 2012; Trask, 1999). A term like Indigenous, particularly as it relates to identity, contains different meanings, serves different projects, and operates to include and exclude depending on its context, the person(s) using the term, and the source of its definition. Indigenous identity, for example, is often determined by various methods, some of which are imposed as part of a larger colonial project (like blood quantum) while others are self-determined like moʻokūʻauhau (genealogy). Any and all methods for identity determination may be understood as important to an Indigenizing effort, but also part of a larger colonial project. Additionally, while seemingly diametrically opposed, neither the Indigenizing effort nor the colonial project are mutually exclusive; and both can be present and fundamentally imbedded in a term like Indigenous identity as well as in the methods used for determining Indigeneity. Extending this discussion a bit further, Indigenous identity utilizing blood quantum can be part of a larger colonial project imposed on
Indigenous peoples, as Kauanui (2008) asserted; but it can also be a source of pride for Native Ancestry as noted by Garroutte (2003), thus illustrating the complexity of a term that defies simple definition. These terms require continuous unpacking each time they are encountered by haumāna, kumu, and community stakeholders; and every effort must be made not to limit the discourse nor the boundaries of the definition despite the inherent discomfort with fluid and flexible meanings.

For the purposes of this paper the terms Indigenous, decolonization, and Hawaiian Place of Learning are the result of extended discussion within and beyond the School and are defined accordingly. Gray, Coates, and Yellow Bird (2008) described early manifestations of Indigenization as a form of social work exportation from the “west to the rest” of the world that adapted to the local milieu and environments while maintaining its underlying western values. The term Indigenization is thus misappropriated; they prefer the more contemporary cultural relevance. The school’s Indigenization process is best understood as contextualized and specific; an organic process of identifying cultural practitioners on faculty and staff, in the classroom, and from the community and of building social work practices that integrate and reflect the values of the host culture. In this way, the School’s efforts most closely resemble what Gray, Coates, and Yellow Bird (2008) described as an authentication process in which the values and beliefs of the local people inform social work practice. Because the School is located within the Indigenous homeland of the Native Hawaiian people, is part of a larger land grant institution, enjoys Native Hawaiian leadership, and sits on ceded lands, it does not fit neatly into current models of Indigenization. Indigenization in the School’s context refers to the inclusion and integration of Native Hawaiian values, practices, and culture into the curriculum, instruction, and space of the academy, rupturing the fabric of western social work pedagogy and creating a central space for social care models (Faith, 2008) unique to the Hawaiian people. The recentering of Native Hawaiian ways of knowing necessarily works to decolonize the academic space, curriculum, and instruction and creates new cultural contact zones while minimizing and limiting the privileged position of western epistemology.

**Barriers to Education and Program Design**

College enrollment and graduation rates have been erratic and unstable for Indigenous populations and remain low relative to other ethnic and racial groups according to Snyder, de Brey, & Dillow (2018) The American Community Survey Brief for the U.S. Census Bureau (2012) noted that only 13% of American Indian and Alaskan Natives and 14% of Native Hawaiians 25 years and over have their bachelor’s degree. In an effort to increase educational opportunities, some colleges have prioritized Indigenous recruitment and retention efforts. For the health professions in Hawai‘i there is the dual problem of (a) over-representation of Native Hawaiians in negative health statistics such as asthma, diabetes, and obesity (State of Hawaii Department of Health, 2015) combined with poor or limited access to health care and cancer prevention and control; and (b) under-representation of Native Hawaiians in health professions such as medicine and nursing (University of Hawai‘i Institutional Research and Analysis Office, 2015). Interestingly, the colonial forces
that contribute to the over-representation of Native Hawaiians in poor health outcomes are the same as those that contribute to an under-representation of Native Hawaiians in post-secondary education in general and in the helping professions in particular. While poor health outcomes and low educational attainment are both over-determined, few factors have the overall impact of poverty, which typically functions on the magnitude of obesity and cigarette smoking (conditions and behaviors too often attributed to moral failure, limited willpower, and/or poor decision making rather than ongoing colonial expropriation and cultural and land appropriation). Poverty is clearly linked to poor health outcomes and postsecondary education to poverty reduction and alleviation. By improving access to educational opportunities, culturally resonant programs such as the NHIH provide Native Hawaiian students with the tools needed to escape poverty while preserving cultural identity, maintaining community presence, and providing needed services to, for, and with the Native Hawaiian community. But improving access is not enough. Linda Tuhiwai Smith (2005) might argue that the fundamental project of colonialism is to discipline the Indigenous through ongoing marginalization. For those lucky enough to get into the academy, they enter a world in which their histories and epistemologies are too often absent from the classroom conversations and their Indigenous identities thus erased. The University of Hawai‘i System and Myron B. Thomson School of Social Work has done much to recentre and prioritize a Hawaiian Place of Learning, and programs such as the NHIH extend those efforts.

Native Hawaiian poet and storyteller ʻAnakē (Aunty) Puanani Burgess from the Wai‘anae ahupua’a (land region) on the island of O‘ahu noted that there are four barriers to Wai‘anae residents pursuing higher education: cost, travel, time, and psychology (personal communication January, 2009). All four of these variables are directly linked to our colonial past. It is no coincidence that the rural areas of O‘ahu like Wai‘anae, along with having the highest percentage of Native Hawaiians on the Island, also have some of the lowest annual incomes (U.S. Census Bureau, 2017). Higher education is incredibly expensive, but this is especially true for Native Hawaiians who experience high levels of underemployment and unemployment (State of Hawaii Department of Labor and Industrial Relations, 2018) and increased incidence of homelessness (Corey, Biess, Pindus, & Sitko 2017). Even while many Native Hawaiians dream of the better life promised to those with “good educations,” the immediate needs of the here and now, including putting food on the table and making sure there is a roof overhead, often supersede any long-term goals associated with advanced education. In addition to the cost of school, there is the cost of travel in the form of gasoline and vehicle maintenance. As noted above, many Native Hawaiians live in rural areas and on the neighbour islands—hours away from the city centre—and can’t afford the daily trips required of the social work or medicine programs. Taking public transportation eats up time and costs the Native Hawaiian family in other and at times more profound ways.

Finally, there is the psychological barrier associated with being the first and often only person in the family to pursue higher education; this hurdle should not be underestimated. Not only are there limited role models within the family system, but there is often limited access to professional role models in the community and the
academy. Once in college, haumāna can find themselves dislocated from a life that validates their existence and world view and instead embedded in a colonial construct that validates and supports western ways of being and knowing, often at the expense of Indigenous cultures and peoples. Gair (2008) asked Indigenous Elders how to increase recruitment and retention and was given a three-point plan: increase Indigenous staff and instructors, implement community-based learning environments, and integrate additional student support. This is sound advice from community Elders and seems to respond directly to the barriers ʻAnakē Puanani Burgess outlined years ago.

The NHIH program was designed to infuse the curriculum with Indigenous pedagogy and epistemology that validate an Indigenous world view, create additional space within the academy for Indigenous discourse while also taking advantage of ʻāina- (land-) based space outside of the hallowed halls, and put Native Hawaiian students into direct contact with Native Hawaiian social workers and physicians. The Native Hawaiian Program was designed by noted Native Hawaiian healer and social worker ʻAnakē Lynette Paglinawan and fellow Native Hawaiian social worker ʻAnakē Malina Kaulukukui and was modeled after the Hawaiian Learning Program already in place in the School’s MSW program. There were four key components to the curriculum: (a) an overview of Native Hawaiian values and models for wellness, (b) a lesson in cultural historical trauma, (c) a basic description of hoʻoponopono (a complicated and complex form of conflict resolution for extended family), and (d) a meeting in the round with Native Hawaiian professionals from both medicine and social work.

Material from the NHIH is organic and temporally and spatially unique to the Native Hawaiian community in which the program is imbedded. Indigenous peoples are connected to place in both sacred and practical ways and are poorly served by the prepackaged, homogenizing methods common to the colonial project. And while Pasifika peoples share a genealogy that links one to the other, Sommerville (2012) noted that the connections are complex and not easily explained or understood, especially in light of pan-Pacific migration. There is great diversity within Indigenous groups and to believe that material from one program—like the NHIH—can be applied to others is to surrender to an industrial model that is incongruent with Indigeneity. Ultimately, this is a question of epistemology. Meyer (2001) noted epistemology

is the sword against anthropological arrogance and the shield against philosophical universalisms. How one knows, indeed, what one prioritizes with regard to this knowing, ends up being the stuffing of identity, the truth that links us to our distinct cosmologies, and the essence of who we are as Oceanic people. (p. 125)

The NHIH design directly contests an industrialized manufacturing model and prioritizes the learning available in a particular space at a particular time and treats the moment as sacrosanct; a unique experience that other kumu and haumāna can learn from, but that can neither be duplicated or replicated.
Academic Space

One of the first decisions planners made when creating the program was to remove the course from the (brick and mortar) academy and instead hold sessions in the community. Despite the fact that all ‘āina (land) in Hawai‘i is by definition Indigenous, universities remain a powerful symbol of colonialism that have historically privileged western pedagogy and epistemology and marginalized traditional ways of knowing common to Indigenous peoples including Native Hawaiians. And while great strides have been made through the development of programs that explore non-western ways of knowing and being, and the recentring of the institution as a Hawaiian Place of Learning, the academy remains foreign to many Native Hawaiians. Beyond the foreign(ness) of the university, though, is the reality that learning is not limited to educational institutions. ‘Anakē Lynette Paglinawan has frequently shared the ‘Ōlelo No‘eau (wise saying), ‘A’ohe pau ka ‘ike i ka hālau ho‘okahi (All knowledge is not learned in just one school; Pukui, 1997). Moreover, she contends, “Native Hawaiian haumāna must be on the land and the sea, in the wahi pana (sacred spaces) and pu‘uhonua (sanctuaries) of our ancestors. Learning is not limited to the classroom. The ‘āina is our classroom” (DeMattos, 2015).

Smith (2005) argued that the academy simultaneously colonizes the disciplines and disciplines the colonized. That is, academic disciplines necessarily privilege western ways of knowing, and a person’s arrival as a civilized being is dependent on their ability to assimilate to, and even master, white western ways of being and knowing (Engle Merry, 1999; Smith, 2005, p.66). In this way, the academy is a crucial component of the colonial project as it simultaneously accomplishes two crucial tasks: (a) promulgating an epistemology needed for full rights and privileges as a member of western society; and (b) labeling Indigenous ways of knowing as alternative and relegating these ways of knowing to the margins or—in many cases—erasing them altogether.

A potential consequence of the colonial process is the othering of Native Hawaiian haumāna who come to the academy and learn western methods that fail to account for historical and ongoing oppression, cultural trauma, and destruction (Sinclair, 2004). Indigenous students then are asked to practise these same methods on and for their Indigenous brothers and sisters back in the community. In the process, Native Hawaiian world views and ways of knowing may not simply go unvalidated but are potentially invalidated through academic cultural erasure.

The academy remains, in many ways, a contested space across the United States and here in Hawai‘i, where the University of Hawai‘i at Mānoa sits on ceded lands that were unlawfully taken from the Hawaiian Nation (Engle Merry, 1999; Kame‘eleihiwa, 1992, 2016; Lipe, 2016, Osorio, 2002). Still, there are liminal spaces in the academy where traditional (non-western) ways of knowing and being are actively explored. The School of Social Work is one of those places.

For Native Hawaiians, land is more than its ability to create a surplus yield. ‘Āina is precious not just as resource, but a source that not only provides food and water, but also the ground for genealogical connection to family, the ancestral gods.
(Kameʻeleihiwa, 1992; Kanahele, 1986) and the life force that shapes the very identity of the individual and community (Kameʻeleihiwa, 1992; Kanahele, 1986; Kanaʻiaupuni & Malone, 2006; Trask, 1999). This stands in contrast to western spaces and institutions that are fundamentally designed in the image of the industrial complex to churn out product in surplus and for mass consumption.

The NHIH program instead turned to the community as the ground for the program and created four unique huakaʻi (journeys) for the haumāna, each with a strong connection to both the ʻāina and Native Hawaiian values. In our inaugural year all four of the sites were located on the island of Oʻahu, two in Waiʻanae on the Leeward coast, one on the Windward side of the Island on the ahupuaʻa of Koʻolau, and the fourth right in the heart of Honolulu. Sites were not so much selected as they were requested by program Elders; and the NHIH program did not simply host programming offsite, but instead functioned as humble guests of the community. These were not excursions. Entering and exiting Native Hawaiian ʻāina is a protocol-driven process that requires a full explanation of the needs and wants to the guest and the willingness on the part of the host to accept us in. The NHIH program entered each community with dignity and respect and in a state of emotional prostration and was accepted in each case with great affection and Aloha (which ʻAnakē Lynette Paglinawan [personal communication, 2015] has defined as reciprocal love).

Interestingly, each of the sites was considered wahi pana to the peoples who live on and benefit from the ʻāina, though none are untouched cultural kipuka as defined by McGregor (2007). McGregor (2007) noted that cultural kipuka are Native lands that are ignored by westerners for numerous reasons including, and most importantly, the inability to profit from its taking. In each case, the ʻāina and community program visited was reclaimed; and thus Native Hawaiian culture onsite is not so much untouched as it is rediscovered, reimagined, relived, and rearticulated. This reclaiming is a crucial piece of the decolonization process (Smith, 1999).

Curriculum

Both social work and medicine have long-standing histories as values-based professions, but both disciplines (as practised in the United States) are products of the culture in which they are embedded and have historically functioned as part of the colonial apparatus. It is impossible to separate the practices of medicine and social work from the European/American culture that gave them rise, including its extended history of colonialism. Still, it is tempting to assume that a humanist, values-based profession like social work is universal and can be implemented and practised both abroad and locally with immigrants, refugees, and Indigenous populations. For social work education the problem is compounded as it tries to assert globalized standards for practice only to find that Indigenous and international populations find the profession, like other cultural products of the west, at odds with local, place-based culture. So social work education is often trapped by the notion that its humanist, liberal nature allows for easy exportation across cultures as its principles are universal and thus can and should rise above culture. This, of course,
fails to recognize that social work practice, social work education, and its consonant ideological frameworks are in fact culture-bound and that as a profession it often fails to account for the ever-changing, mutually informing, reciprocal nature of culture and community (Tejada & Espinoza, 2003).

Of all the universalizing tools of the social work profession, none is more relevant to this conversation or to the state of Hawaiian-ness as experienced by the haumāna in the NHIH program than multiculturalism. Hawai‘i, it would seem, is the perfect home for a multiculturalist world view. With a higher incidence of intermarriage than any other state in the union (Pew Research Center, 2017) and an incredibly diverse population, our haumāna are multicultural by definition. It is not uncommon for haumāna to identify three, four, five, even six different ethnic or national identities when discussing hereditary lineage. But multiculturalism is a potent force; and it, too, is the subject of much needed critique, as it represents the ultimate form of colonialism as it intentionally washes away socio-political and hegemonic difference. Multiculturalism necessarily treats all cultures as similarly dissimilar, and difference is negated while culture is inadvertently erased. That is, any single culture simply becomes one of many, and thus all cultures are homogenized as part of the multicultural process. This is problematic for all people, but especially Indigenous peoples, as it fails to account for the unique nature of dispossession, cultural erasure (Kame‘eleihiwa, 1992; McGregor, 2007; Niezen, 2003; Osorio, 2002; Silva, 2004; Smith, 2005; Trask, 1999), and cultural historical trauma at the hands of other racial and ethnic groups.

The Native Hawaiian haumāna in the NHIH program identify as Hawaiian, but also as Portuguese, Japanese, Chinese, Filipino, Korean, Samoan, Tongan, and any number of other nationalities. But due to the unique nature of historical and ongoing Hawaiian dispossession, many identify first as Hawaiian and in the process appropriately recentre their Hawaiian-ness as central to their personal identity. It is important to note that these haumāna are not less Portuguese, Chinese, Japanese, but instead enjoy a greater sense of their Hawaiian heritage in response to generational denigration on the part of colonial powers. Culture is not an either–or phenomenon whereby one must choose one’s identity. People carry all of their interpenetrating and intersectional identities. Multiculturalism, though, washes away difference, especially as it fails to recognize unequal and uneven power distributions and the subjugation of one culture or people by another. For Native Hawaiians, there has been too much erasure already; and while similarity and the things held in common are important, so too are cultural differences. Authors like Niezen (2003) have argued that it is the differences that often matter for Indigenous peoples. In many ways the NHIH program was designed to address these differences as valuable and as an opportunity to recentre Native Hawaiian values, practices, and identity as part of a larger inclusionary process.

The centering of Native Hawaiian content including ways of being and ways of knowing, as well as the Lōkahi (harmony) between Akua (god), Kānaka (humans), and ‘Āina (land/place), was a central project of the NHIH program. And while it is true, as stated earlier, that Native Hawaiians are over-represented in nearly every
negative health statistic in the state and are under-represented in the health professions, this discourse is horribly problematic and lacks nuance. Missing from the conversation is the agency of Native Hawaiians in solving problems; the over-determined nature of social ills as a product of society and not of a given people; the many barriers to health and healing that must be overcome by a people dispossessed within their own homeland; and the positioning of Hawaiians as “victims” of a colonial project rather than as survivors.

The hope was that by anchoring the program in Native Hawaiian values, the haumāna, often for the first time, would see their potential professional identity effectively informed by their personal identity as Native Hawaiians. This is no small matter. When a white westerner goes to school in the United States, every course they take validates their existence and privileged status in society. Not so for the person of color, and definitely not so for the Indigenous haumāna. Gair, Thompson, and Savage (2005) noted that a curriculum reflecting Indigenous values and practices improves educational outcomes. Taking into account that many of these haumāna will in fact be working with the marginalized and underserved—many of whom will be Native Hawaiian—anchoring the program in Hawaiian values is important for the future success of the social worker and physician as well as those they serve.

The Indigenous curriculum anchored in Native Hawaiian values created numerous opportunities for advanced discussion on a variety of subjects. Specifically, content on cultural historical trauma, well-being and healing as housed in the community, and the de-othering of haumāna were centred in the curriculum. The discussion on cultural historical trauma was particularly potent when explored by a Native Hawaiian social worker with Native Hawaiian social work and pre-med haumāna. Loss is a powerful theme for Native Hawaiians. As Gray, Yellow Bird, and Coates noted:

> Characteristic of the lived history of Indigenous Peoples around the world is the memory of ancestors murdered brutally, women raped and children stolen; of people stripped of their land, culture, and heritage; people in search of family; mothers grieving for their lost children; and fathers robbed of their dignity. (p. 51)

Amid the pain, the material came alive as haumāna cried and shared their personal stories of historical trauma and cultural dispossession. Because of the cultural positionality of both the instructor and the haumāna, the material transitioned and was no longer an objective analysis of an historical event, but a lived experience. While some non-Indigenous instructors would like to believe that this type of visceral learning experience is available in the traditional classroom, this is questionable. This was a discussion from the perspective of the survivors of the trauma and not an objective analysis from the perspective of the colonial oppressor. Interestingly, this shift from the objective to the subjective is important for the haumāna and is congruent with the subjective experience of reality common to many Indigenous world views.

Well-being and health in Indigenous culture (Sinclair, 2004) in general and Hawaiian culture in particular extends beyond the individual and is rooted in a balance...
or harmony between Kānaka Maoli, akua, and āina (DeMattos, 2015; Duponte, Martin, Mokuau, & Paglinawan, 2010). In this context, both illness and wellness are not necessarily understood as residing in the individual alone but as the result of being out of balance. This is important because healing in allopathic medicine is decidedly individualized; and despite social work’s attendance to the environment, change is often believed to be the product of individual adjustment and coping. This has major implications for healing and social work practice. Traditional healing systems like Ho'oponopono are fundamentally informed by this notion of the collective good and the need to make right through the balance between Kānaka Maoli, akua/ʻaumakua, and the ʻāina. To make pono (right, just) is the result of the efforts of all involved family members and is predicated on the ability to honestly share feelings, explore the problem within the system, offer restitution, and grant forgiveness. Ho'oponopono thus reaffirms the bonds between family members and creates a context for wellness and spiritual, physical, and emotional health (DeMattos, 2015).

The Native Hawaiian curriculum also offers haumāna the opportunity to de-other. Western education necessarily privileges western ways of knowing and healing and thus validates and affirms western being-ness. This is not the case for many Kanaka Maoli haumāna who rarely see their own identity reflected in the general curriculum. The School of Social Work and the NHIH recognize the numerous examples of Native Hawaiian social care and healing models—including lomilomi (therapeutic massage), la'au lapa'au (herbal medicine), ho'oponopono (a type of family/group therapy to set things right and forgive)—in existence prior to colonial intervention and practised still (DeMattos, 2015; Duponte, K., Martin, T., Mokuau, N., & Paglinawan, L., 2010; Paglinawan & Paglinawan, 2012). Indigenous peoples have been caring for their own from the very beginning; and their methods for healing, like western methods, are the product of specific ideological, cultural, and political contexts (Faith, 2008).

For the Indigenous haumāna, higher education potentially continues the process of erasure and contributes to the othering phenomena common to the colonial experience. By including Native Hawaiian healing as part of the formal curriculum the haumāna establish a new subjectivity that sees them reflected in the past and present, with a legitimate future as a healer.

The Kumu Becomes the Haumana

This article was originally intended to explore my role as a non-Indigenous social worker designing and implementing an Indigenous curriculum for Indigenous haumāna. While I believe that this is an important article to write, I was concerned that I would unintentionally privilege my own settler colonial presence by focusing solely on my role and inadvertently erase the Kana Maoli kumu and haumāna by and for whom the program was created. In the end, my job was to facilitate the process and bring people together. While I don’t want to minimize my role, I am careful not to make it more than it was. An often-cited ʻŌlelo noʻeau (Pukui, 1997) reads ‘Aʻohe hana nui ke alu ʻia (No task is too great when done together by all); it
was the spirit of the Native Hawaiian ancestors and the unique moʻolelo (story, history, mythology) of the kumu and haumāna that moved the program forward.

Sinclair (2004, p. 55) argued that haumāna and kumu, guided by Indigenous epistemology, can create a context for healing, learning, and personal and professional development. With my colonial past and present acknowledged, the tables turned in the NHIH program and I found myself in the role of haumāna and my social work haumāna functioning as my kumu. This process was both painful and liberating as I came face to face with my role as settler colonialist. As Native Hawaiian values, cultural historical trauma, and methods of healing and well-being were brought from the margins to the centre, I saw first-hand the many ways I contributed to cultural oppression, especially through the promulgation of western epistemology that marginalized Kānaka Maoli ways of knowing, being, and praxis. And instead of being punished, I was invited to the centre every month and treated with dignity and respect. I was encouraged to explore my own heritage, not only as a Portuguese settler colonialist; but as a Portuguese man from a distant land where once, long ago, I too was Indigenous. And instead of losing myself in the process of Indigenization I found myself through my Portuguese culture. ‘Anakē Lynette has contended that this is the starting point for all non-Natives hoping to work effectively with and for Kānaka Maoli: a deep, rich and, most importantly, honest examination of one’s own heritage and belief system (personal communication, 2014).

My personal transformation was never the intent of the program, but the reflexive process that I went through was one of the hopes for the participants. Kanaka Maoli kumu, kūpuna, and kuaʻāina (originally “back country” but now “keeper of Indigenous knowledge”) provided light on the huakaʻi so that none of us were lost in transition or translation (McGregor, 2007). From the very start, our Kanaka Maoli kumu were clear that there would be great mana (spiritual power) in the Program and that the haumāna would have as much to offer as the kumu. ‘Anakē Lynette Paglinawan has said on many occasions (personal communication, 2015) that it is a failing on the part of the academy to not include and listen to the voices of the haumāna. Instruction was conducted by our kumu, but education in the program was a shared kuleana (responsibility).

Conclusion

It has been seven years since the NHIH program began and I am still learning from the process and I suppose the same is true for the kumu and new haumāna who participate in the program every year as well as for those who have completed the program. The NHIH program was never intended to be political per se, but all Indigenous efforts imbedded in a colonial construct are political by definition. Still, terms like decolonization, Indigeneity, sovereignty and the like, while important for this paper, were never in use in the program. The Indigenization process at the School of Social Work as enacted by the NHIH is decidedly place based and repositions Native Hawaiian values, healing systems, and cultural practice from the margins to the centre. In many ways the NHIH program is an extension of the early Indigenization efforts and the more recent movement toward a Hawaiian Place of
Learning alive in the School of Medicine, the School of Social Work, and the University of Hawai‘i system.

The hope is that the NHIH program can function as a platform from which to explore the colonial nature of the academy and potential strategies for disrupting the pedagogies and epistemologies that serve as barriers to both Native Hawaiian recruitment to and retention for the helping professions. The NHIH program was designed with two goals and three objectives in mind, but this paper focused on just one of the objectives: the ability of Native Hawaiian haumāna to recognize their Indigenous identity as valuable to the formation and maintenance of a professional identity. The academy remains a contested space; and as long as the curriculum and instruction privileges white western hegemony, any meaningful increase in either the recruitment or retention of Native Hawaiian haumāna is in jeopardy.

Programs like the NHIH can intervene and serve to rupture the colonial fabric of the academy in three specific ways: (a) shifting the educational space out of the academy and into the community, thus reconnecting haumāna to the ‘āina and re-establishing balance between Kānaka Maoli, akua‘aumakua, and ‘āina; (b) repositioning Native Hawaiian values, healing systems, and cultural practices from the margin to the centre; and (c) extending educational kuleana and allowing kumu to become haumāna and haumāna to become kumu. Imbedded in the confrontation of colonial space, curriculum, and instruction, is a not so quiet challenge to the universalizing tendencies of the helping professions in general and social work in particular. Effective change requires models that are capable of addressing difference without asserting hegemony. Indigenous practices that have been historically ignored and thought of as invalid must be reconsidered as surely as western models assumed to be cross culturally applicable must be critiqued.

Finally, it is important that non-Indigenous and Indigenous (social work) instructors identify their specific positionality relative to the colonial project. In doing so, they help haumāna create new subjectivities that acknowledge their personal and historical agency and thus temper notions of victimhood and recognize survivorship. It is crucial that haumāna see themselves in the curriculum. When Native Hawaiian haumāna make it to higher education only to learn western ways to treat “Native problems,” it necessarily reinforces the colonial project, as it fails to integrate Indigenous epistemology and pedagogy and also fails to account for cultural historical trauma and oppression (Sinclair, 2004). It is education’s responsibility to critique itself and the many ways in which it continues to institutionalize colonialism.

References


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