

*Tēnā koutou Te Whare Tohu o Te Hau Whakaora - Australia and New Zealand College of Anaesthetists.*

*Ko tēnei te mihi ki ā koutou i tā koutou putea mō ngā Health Equity Projects, inarā te Karakia Poka i tuhi ā te tohunga Mark Kopua.*

*I would like to thank you, ANZCA, for the Karakia Poka, commissioned from ANZCA's Health Equity Projects fund.*

## Rongoā<sup>1</sup>

I recently came across the ANZCA Karakia Poka when I wandered one of the surgical intake rooms at Wellington Hospital. You will know that surgical intake rooms are small, with little room for wandering. But in times of juncture, when you have to relinquish all control and rest complete trust in strangers, wandering even the smallest of spaces can take the mind off the inevitable, and can lead one to important details that might otherwise have gone unnoticed.

The impending inevitable was watching my partner walk through the patients-only door, where a surgical team, unknown to me, were waiting on the other side to put him to sleep and cut out the cancer from his body. That is a terrifying inevitable, though I didn't want to show my fear, for fear it would snowball into a surgical-fear fest. So I wandered, to quell the fear.

And in my wandering of that surgical intakes room, above the bed, on the same wall as the patients-only door, I noticed the Karakia Poka – printed on A4 and reverently alone – suitably spared from the competing noise of health promotion and prevention pamphlets crowding the opposite wall.

Poka was a relatively new addition to my reo vocabulary. Surgery. I'd learned it so that I could tell my Kaiako<sup>2</sup> why I wasn't able to attend our Te Ataarangi hui-ā-rohe<sup>3</sup>. Kua e kōrero Pākehā kei ngā akomanga o Te Ataarangi<sup>4</sup>.

I verbalised my surprise at seeing something of the sort in a surgical intakes room, and my further surprise that it had been composed by Mark Kopua, whom I knew to be a tohunga and one of the co-founders of Mahi a Atua. I had to google "ANZCA" to learn that it was the Australia and New Zealand College of Anaesthetists who had played a part in placing that Karakia Poka on the wall of the surgical intakes room I was wandering.

'Ha - that's cool', I thought. 'Big ups ANZCA', and I wandered closer for a look-see.

I read the Karakia slowly, trying my best to decipher the meaning in the words, but there were quite a few I didn't know, and some of the sentence structures were a bit too complex for my few-years-old reo capability. The translation kei raro i te Karakia helped me see and learn new meanings in the reo where I didn't initially understand.

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<sup>1</sup> to treat, medicine

<sup>2</sup> teacher

<sup>3</sup> [Te Ataarangi](#) regional meeting

<sup>4</sup> no speaking English in Te Ataarangi classrooms

Some measurements were taken, consent forms signed, details discussed. Each step the nurse took was bringing us closer to the inevitable. I waited for my partner to go into the bathroom to change into his poka gown. Then, I said the Karakia out loud. Slowly. Deliberately. Please. Protect him.

He doesn't *believe* there are Atua to call on, but that didn't matter. I *know* there are. That's why we say karakia. If we are fortunate enough to have our reo.

It's a painful thing, to know there are procedures that can protect and even save our loved ones, but that remain out of our reach. Whether that be therapies and medicines that are not yet funded and are too expensive to obtain, or a karakia, locked behind the bars of intergenerational language loss.

So I was grateful, ANZCA, for the Karakia Poka left on the wall of that surgical intakes room. I was grateful that your work had removed the barrier of language loss, and we could access a therapy often overlooked in the world of western medicine. By funding Health Equity Projects such as the Karakia Poka, you demonstrate the foresight and bravery necessary to steward our health system toward true equity. Ngā mihi ki ā koutou, meitaki ma'ata.

I know funders like to, and sometimes need to, put a dollar value on outcomes. Some people want to know what their return on investment is. There are various schools of thought as to whether or not you can or should assign monetary value to an outcome or outcomes that seem to defy conventional measurement. And must we always reduce value to terms of dollars and cents?

What is the value of having removed an intergenerational access barrier to care? What is the value of providing access to care that includes a different knowing of the world? What is the value of providing care that operates on our whole beings, as humans, connected to one another, and to the earth and skies?

In surgery, irrelevant parts of the body are covered up; the affected parts are isolated, sterilised, and only those parts to be operated on remain visible. This helps to focus. But the whole body is not divorced from the operation, even if it is hidden from view, escaping the immediate focus of the surgical blade. And the whole body is not just the body on the table, but the bodies of all those connected to the body on the table, even if they too are hidden from view.

I cannot give you a number to signify your return on investment. But I can tell you, that solitary sheet of A4 holding the ANZCA Karakia Poka, provided a quality of care that freed my heart to speak. And in the speaking, the connections were drawn between us; us on both sides of the patients-only door. So that when the inevitable came, we were all protected and cared for.

He walked through the door, was put to sleep, and when he was woken, his cancer had been cut out.

He mihi nunui ki ā koutou i tā koutou taonga aroha. Kei te mihi, kei te mihi. Kia orana ki ā koutou kātoatoa.

Sincerely,

S. Tapaeru Minster

*(Takitumu vaka, Ngāti Uirangi, Ngāti Maoate)*