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TITLE: Neoliberalism and indigenous knowledge: Māori health research and the cultural politics of New Zealand's "National Science Challenges"

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ABSTRACT: In 2012-13 the Ministry of Business, Innovation and Employment (MBIE) in New Zealand rapidly implemented a major restructuring of national scientific research funding. The “National Science Challenges” (NSC) initiative aims to promote greater commercial applications of scientific knowledge, reflecting ongoing neoliberal reforms in New Zealand. Using the example of health research, we examine the NSC as a key moment in ongoing indigenous Māori advocacy against neoliberalization. NSC rhetoric and practice through 2013 moved to marginalize participation by Māori researchers, in part through constructing “Māori” and “science” as essentially separate arenas—yet at the same time appeared to recognize and value culturally distinctive forms of Māori knowledge. To contest this “neoliberal multiculturalism,” Māori health researchers reasserted the validity of culturally distinctive knowledge, strategically appropriated NSC rhetoric, and marshalled political resources to protect Māori research infrastructure. By foregrounding scientific knowledge production as an arena of contestation over neoliberal values and priorities, and attending closely to how neoliberalizing tactics can include moves to acknowledge cultural diversity, this analysis poses new questions for social scientific study of global trends toward reconfiguring the production of knowledge about health. Study findings are drawn from textual analysis of MBIE documents about the NSC from 2012-2014, materials circulated by Māori researchers in the blogosphere in 2014, and ethnographic interviews conducted in 2013 with 17 Māori health researchers working at 7 sites that included university-based research centers, government agencies, and independent consultancies.

Keywords: New Zealand; indigenous; activism; neoliberalism; science

INTRODUCTION

In 2012-13 New Zealand’s Ministry of Business, Innovation and Employment (MBIE) rapidly rolled out a “National Science Challenges” (NSC) initiative to restructure national scientific research funding, in advance of the next general election in 2014. This initiative’s stated aims are to promote greater commercial applications of scientific knowledge, and more efficient research practices, by orienting national scientific inquiry around specific topical areas or “challenges” that aim to provide “a coherent research effort with regards [to] the environment, social and human health” (MBIE 2013a: 35). The MBIE appointed a “Peak Panel” of leading researchers in 2012 to propose possible topics for the challenges, and conducted a web-based

campaign in late 2012-early 2013 for input from the general public and members of the science sector before finalizing 10 Challenge topics (see Table 1). Through mid-2013 they then convened invitation-only meetings of researchers to further refine specific research questions for each Challenge area. A number of groups in New Zealand were critical of the NSC for failing to live up to its stated agenda of producing a new approach to science. By June and July of 2013, Māori researchers mounted an especially vocal critique of this process for failing to substantively include Māori input or perspectives.

As *tangata whenua* or indigenous “people of the land,” Māori constitute approximately 14% of New Zealand’s population, and experience well-documented social and health inequities compared to the European-descended population (e.g., Robson & Harris, 2007; Walker, 2004). Māori advocacy since the 1970s has included the development of research by and for Māori across multiple sectors (e.g., education, health, social sciences, humanities). Yet as we describe here, while frequently discussing Māori health, NSC documents rarely recognize Māori health research or researchers. At the same time, however, NSC documents also recurrently note the initiative’s interest in supporting “Mātauranga Māori,” or knowledge derived from Māori experiences and worldviews.

In this paper, we use the example of health research to examine these seemingly contradictory moves to visibly recognize while not substantively including culturally distinctive Māori knowledge. We specifically analyze them as a tactic of neoliberalization. The NSC’s focus on commercial applications of scientific knowledge and emphasis on improving efficiency fit squarely within neoliberalizing trends in New Zealand; critics there and internationally have challenged these trends for promoting privatization and corporatization, limiting the scope of state governance, and prioritizing associated values such as efficiency, commercialism and

individualism (e.g., Bargh, 2007; Harvey, 2005). Māori advocacy has especially challenged how these trends move to undermine collective rights, undercut support for culturally diverse worldviews, and avoid recognizing the ways in which market-driven priorities themselves produce and sustain environmental, social and health inequities. As we demonstrate, Māori health researchers have figured prominently in this advocacy.

Using comparative content analysis centered on MBIE documents about the evolving course of the NSC over 2012-2013, and interviews with Māori health researchers in 2013, we demonstrate how the example of contestations surrounding the NSC extends emergent social scientific discussions of how neoliberalization is reconfiguring the production of scientific knowledge about health. Indigenous and other critical scholarship (e.g., Mykhalovskiy & Weir, 2004; Shore & Wright, 1999; Silk, Bush, & Andrews, 2010) has linked neoliberal interests in efficiency and accountability to the rise of data-driven, “evidence-based” knowledge for policies and programs; and recent works in medical anthropology and related social sciences have begun to examine this trend’s cultural and political consequences. Kirmayer (2012) highlights how cultural assumptions shape what counts as such knowledge, for example, while Messac, Ciccarone, Draine & Bourgois (2013) consider strategic ways to insert more humanistic agendas into the discourse and practice of “evidence-based medicine.” These works affirm broader social analyses of how neoliberalism is transforming what counts as knowledge, and reshaping the institutions that produce it (Lave, Mirowski, & Randalls, 2010). Yet they are also primarily based in North America and Britain, such that key questions remain about how different regional political histories, patterns of control over institutional resources, and cultural contexts are shaping these impacts.

We maintain that attending to Māori interactions with government officials surrounding the NSC specifically enhances understanding of “neoliberal multiculturalism” (Hale 2005:10) as a strategy of neoliberalizing states. For Hale, this trend involves states explicitly recognizing cultural diversity and even cultural rights, while simultaneously constraining how such recognition could oppose their neoliberal agendas in practice. He developed this concept from examples of indigenous interactions with several Central American states, which coupled successful indigenous advocacy for rights with extensive bureaucratic entanglements predominantly controlled by states, such that indigenous gains were ultimately heavily delayed and/or restricted in practice. His findings partly echoed those of Povinelli (2002) regarding late 20th-century government tactics for constraining Aboriginal claims in Australia. Kowal offers an intriguing cultural analysis of these processes within the health sector, noting how in 2000s Australia “conflicting impulses of liberal multiculturalism to eliminate inequality and to maintain essential difference” (2008:338) entangled ideas of indigenous cultural difference with unequal health. These tensions called Aboriginal self-determination into question even among self-identified antiracist health workers, in ways that supported the Howard administration’s moves to deny indigenous claims that impeded neoliberalization.

These examples offer an initial international sketch of how recognizing cultural diversity can further neoliberal agendas, including within the health sector. Yet to date, they most clearly document how recognition of cultural diversity can enable those in power to co-opt the agendas of grassroots movements. The NSC example involves professional indigenous researchers contesting state actions, however. Recognizing the experiences and actions of culturally diverse social actors who have claimed space “inside” current knowledge production systems highlights how contesting strategies of neoliberal multiculturalism can subvert rather than sustain state

power. As we conclude, such inquiries pose new questions for social scientific studies of neoliberalism's myriad impacts upon health.

After providing a brief sketch of neoliberalization, Māori advocacy, and Māori health research in New Zealand, we describe this study's qualitative methods, and then present findings from a comparative content analysis of materials documenting both MBIE and Māori health researcher perspectives. Relying most centrally on both government documents about the NSC from 2012-2013, and interviews with Māori health researchers about critical advocacy with MBIE officials in 2013, we also use supplemental materials to briefly describe key moments in the subsequent political interactions that continued between Māori researchers and government officials through 2015.

NEOLIBERALIZATION, KNOWLEDGE POLITICS, AND INDIGENOUS HEALTH RESEARCH IN NEW ZEALAND

The widespread interest in "evidence-based" policies and programs under neoliberalization has overlapped with an upswing in resources for scientific research by and for indigenous peoples. Indigenous statistical research about health in major settler colonies, for example, was already underway in New Zealand by the 1970s (e.g., Pomare, 1980), and by the 1990s was rising markedly both there (e.g., Robson & Harris, 2007) and internationally (Tauali'i, Quenga, Samoa, Samanani, & Dover, 2011; Walter & Andersen, 2013). Yet despite such movements to diversify science and scientists, Kirmayer (2012) notes that "evidence" is often narrowly construed to privilege Western-centered definitions, reinvigorating their cultural authority in North America. Similar sensibilities are evident in the NSC, and are especially striking in New Zealand where neoliberal reforms have unfolded alongside significant capacity-building in research by and for Māori.

Recent decades of Māori advocacy to challenge social and political inequities has included the development of research by and for Māori. The 1840 Te Tiriti o Waitangi, or Treaty of Waitangi, figures as a key basis for Māori claims and guide to relationships between Māori and the Crown (i.e., national government) (A. Harris, 2004; Walker, 2004). “Te Tiriti o Waitangi” specifically refers to the Māori language version of this document, while “Treaty of Waitangi” (or sometimes simply “Treaty”) in everyday speech can mean either the English or Māori language version, depending on the speaker. The two versions differ substantially on the degree of control over land and degree of autonomy maintained by Māori. While these differences are matters of recurrent public debate (Jansen & Jansen, 2013; McCormack, 2012; O’Sullivan, 2008; Whitinui, 2011), many Māori advocates maintain that the Treaty sets forth a Māori-Crown partnership for governance of the nation which has rarely been fulfilled in practice. As numerous claims arose about breaches of the Treaty, New Zealand established the Waitangi Tribunal in 1975 to review them. The Treaty remains an important reference point for Māori researchers. Māori health researchers, for example, explicitly reference it while advocating for statistical data collected in New Zealand to provide equal explanatory power for understanding health problems in both Māori and non-Māori populations (Robson, 2002), and when describing how health disparities violate Treaty provisions for protecting and promoting Māori aspirations (e.g., Bramley et al., 2004).

In addition to referencing Treaty-based rights, Māori advocacy has strategically promoted state investment in scientific inquiry by and for Māori. Linda Tuhiwai Smith’s internationally-acclaimed 1999 *Decolonizing Methodologies* articulated the critical sensibilities of Māori-centered research, and helped to define a “Kaupapa Māori” research methodology (see also Bishop, 1998; Pihama, Cram, & Walker, 2002; G. H. Smith, 1997). Referencing a defined

methodology has helped Māori researchers across disciplines to better legitimate their work within universities, as well as to funding and regulatory agencies. From the 1980s through 2000s numerous academic and community-based centers were founded to conduct research by and for Māori. These included health research centers, which developed from advocacy by Māori scholar-activists trained as physicians or nurses such as Irihapeti Ramsden, Eru Pomare, Mason Durie, and Papaarangi Reid. In 2002 founding of an interdisciplinary national research centre or “CoRE”, Ngā Pae o te Māramatanga, marked a key achievement of institutional space for Māori research. As we describe below, this center also served as a key arena for interactions between government officials and Māori researchers during and after the NSC’s roll-out.

Māori researchers from all sectors have responded critically to recent neoliberalization in New Zealand (e.g., Bargh, 2007; McCormack, 2012; L. T. Smith, 2007). For example, health researchers documented that while health inequalities under neoliberalization were growing through the 1990s and 2000s (e.g., Ajwani, Blakely, Robson, Tobias, & Bonne, 2003; Robson, 2007), government officials were pressuring the Ministry of Health to avoid explicit discussion of health inequalities (e.g., Howden-Chapman, Robson, & Fougere, 2010). They also actively challenged public discourse that framed the disproportionate impact of neoliberalization on Māori health in terms of individual behavioral choices, rather than growing social inequality (Hodgetts, Masters, & Robertson, 2004).

Māori advocacy has also challenged neoliberalization for undermining Māori rights to cultural distinctiveness. When the Waitangi Tribunal began awarding settlements to Māori claimants, for example, *iwi* (most often translated as “tribe”) were required to restructure to provide accounting and other administrative functions in a manner acceptable to the Crown. Māori critics note how this often amounts to a process of corporatization, and move to

commodify Māori claims to rights in ways that have troubling implications for future political resistance (e.g., Bargh, 2007).

By the early 2000s, Māori faced additional challenges to advocacy on the basis of collective, inalienable rights when a leader of the conservative National Party, Don Brash, delivered the widely publicized and supported “Orewa speech” in 2004, which called for government policy to stop addressing race-based differences (e.g., Moewaka Barnes, McCreanor, & Huakau, 2008; O’Sullivan, 2008). Liberal democratic nations often feature tensions between principles of equality and fairness versus the recognition of difference, as Merlan (2009) describes—periodically erupting in allegations that some sub-groups are receiving unfair “special treatment” compared to others.

Yet the concept of “neoliberal multiculturalism” underscores how such responses are increasingly complex and unstable in neoliberalization. When the NSC took shape in 2012, New Zealand’s political landscape featured a mixture of trends to contain claims of Māori rights to cultural distinctiveness, alongside pressures to recognize them. Continued references to “Mātauranga Māori” or Māori knowledge within the NSC reflected these pressures, and echoed other government initiatives as we discuss below. As we also describe, Māori scholarship through the 2000s explicitly addressed how claims about the nature and use of Mātauranga Māori were figuring in the political shifts from the 1990s to 2000s, both in general and within the health sector. Specifically, we demonstrate that while NSC documents visibly included culturally distinctive forms of Māori knowledge, MBIE definitions of Mātauranga Māori are distinctly different from those of Māori researchers themselves. Moreover, NSC documents rarely acknowledge the existence or work of Māori researchers, but instead recurrently position Māori as “end users” in need of more and better research. When Māori researchers criticized the

NSC for failing to substantively include their perspectives or priorities, MBIE responses documented their input but continued the NSC as originally formulated.

Yet the unfolding course of the NSC also illustrates how neoliberal multiculturalist strategies provide incomplete support for furthering state agendas. In the series of charged political interactions that followed, Māori researchers successfully forestalled what some termed a broader trend of “anti-Māori sentiment” in government-funded research, which included not only the NSC but a subsequent effort to de-fund a major national Māori research center. Their advocacy strategically appropriated rhetoric from the NSC and related government initiatives, and marshalled political resources to effectively protect this key element of Māori research infrastructure. The NSC example therefore poses questions for further social scientific study about how varied political conditions and resources shape multiple outcomes for neoliberal multiculturalist strategies in health research. Such questions apply not only to indigenous peoples, but also other politically active groups who have cultivated professional research capacities.

METHODS

Our focus on the National Science Challenges (NSC) emerged during a broader study of the international rise and impacts of public health research by and for indigenous peoples. Formulated with a critical methodology (Denzin, Lincoln & Smith, 2008), this work focuses centrally on how discursive tactics and institutional resources shape both efforts to exercise power and privilege, and efforts to transform systems of social inequality.

Ethics review for semi-structured interviews conducted with 17 Māori researchers across numerous academic and community-based research settings in 2013 was provided by the Institutional Review Board of the University of Iowa. All participating researchers provided

individual informed consent, and all were provided with multiple opportunities to review this paper before its initial submission for peer review. Many provided detailed feedback to affirm findings, correct factual errors and/or suggest areas to condense to reduce length; and these changes were incorporated during revision.

Comments about the NSC arose in multiple interviews, as many researchers had attended one or both of the Māori researcher meetings concerning the NSC in June 2013, and/or others associated with Māori responses to the NSC. We accessed public documents produced and posted online by the New Zealand Ministry of Business, Innovation and Employment (MBIE), in order to help further document how the MBIE framed the goals of the NSC and pursued these in practice. We then conducted content and textual analysis (Bernard, 2011; Neuendorf, 2002) of 31 MBIE documents. Over half concerned the NSC directly, and were produced between February and October 2013. These documents comprise two broad categories: 1) administrative documents describing the intent, scope, and proposed implementation of the NSC, and 2) workshop outputs, which summarize key themes and recommendations from meetings between MBIE officials and groups of researchers. The remaining MBIE documents concern the Ministry's "Vision Mātauranga" (VM) policy, which was developed prior to the NSC with the aim of including Māori knowledge in MBIE activities, and which was recurrently cited in NSC documents. All MBIE documents were available online as of February 2014.

To track the political interactions that followed the NSC's initial roll-out in 2013, we supplement these data further with relevant 2013-2015 New Zealand media coverage, as well as with March-May 2014 online blog entries by prominent Māori researchers Linda Tuhiwai Smith and Leonie Pihama, who work across the education, social service and health sectors and whose comments explicitly reference the NSC.

Using MAXQDA qualitative data analysis software, we completed initial content analysis of interviews with researchers to identify key themes in how health research is conducted by and for Māori, key goals of such research, and perceptions of shifting political trends in New Zealand that shape both its production and impact. We then conducted content analysis of MBIE documents for statements of general Ministry goals, and specific descriptions of relevant initiatives (e.g., NSC and VM). For NSC documents, we focused on characterizations of research priorities, and references to Māori knowledge and concerns, with special reference to discussions surrounding three of the ten Challenges most specific to health: “Ageing Well,” “A Better Start,” and especially, “Healthier Lives” (see Table 1).

Below we present a narrative overview of how the coded segments generated through this analysis demonstrate the comparison and contrast of Māori researcher and MBIE perspectives, and chart how NSC agendas and practices interacted with Māori advocacy. We focus specifically on how particular claims about who Māori are, and what constitutes Māori knowledge, were variously framed and substantiated, legitimated, or challenged by MBIE officials and Māori researchers.

FINDINGS

NSC documents recurrently portray the initiative’s goals as developing “mission-led” (e.g., MBIE 2012:2, 2013a:1) research developed to “ensure that government’s investment in science provides greater impact and value....[through creating] an extensive portfolio of research to address issues or opportunities of national importance, which have broad support from the science sector and the public” (MBIE, 2013a:1). This broad support is defined in part through fuller partnerships “...between public and private research organisations, between researchers, across disciplines and with end users” (MBIE, 2013a:1).

Early NSC documents emphasize that a “public, transparent, inclusive process” (e.g., MBIE, 2012:6) will ground this collaboration. Yet close reading demonstrates how NSC documents construct the public, as well as the collaborations and partnerships involved, in ways that recognize Māori on highly selective terms. How NSC documents define science, and refer to culturally distinctive forms of Māori knowledge, further illustrate this process. Throughout, NSC documents appear to actively recognize Māori interests and contributions--but do so on terms that in practice, constrain Māori input and sustain the MBIE’s economic and political goals.

The neoliberal tenor of these goals is evident in the prominent use of “innovation” and its connections to “science” in the NSC. “Innovation” is one of the more common terms in NSC documents, appearing 309 times (excluding the MBIE’s name). NSC documents do not clearly define this term, but reflect its rising prominence in national political discourse through the preceding decade by referencing the “science and innovation system” (e.g., MBIE, 2012: 2). This phrasing reflects recent political initiatives such as the 2011 name change from “Ministry of Research, Science and Technology” to “Ministry of Science and Innovation,” which preceded the consolidation of the MBIE itself in 2012. It explicitly connects scientific research with market-driven goals and concerns, echoing earlier Ministry initiatives such as the Māori-specific policy “Vision Mātauranga,” which described innovation as: “....the processes by which marketable products are developed through R&D, commercialised and made available to the marketplace. All market economies value innovation” (Ministry of Research, Science & Technology, 2007:24). This definition visibly links “innovation” to the commercial goals that neoliberalization privileges.

In the following sections, we first examine how references to Māori figure in constructions of national interest, collaboration and partnership in NSC documents. We then describe definitions of science through NSC documents, which feature explicit but selective references to Māori knowledge (Mātauranga Māori). While focusing on NSC documents, we note how they directly reference the earlier VM policy and build upon its definitions of “Mātauranga.” Finally, we describe how MBIE responses to vocal Māori criticism did not feature the exchange and negotiation that one might expect to be part of an “inclusive” and “collaborative” process. The issues and concerns documented in the MBIE’s July 2013 outputs for its official meeting with Māori researchers are distinctly different from all other NSC documents to date, supporting Māori claims that the initiative had not substantively included their perspectives.

Public interest, collaboration, and partnership: “For the benefit of all New Zealanders...”

NSC documents make 973 references to terms that index how “public” interests should drive the NSC (e.g., “nation,” “New Zealanders,” “end users”). “Māori” and related terms related (e.g., “Mātauranga,” “Treaty,” “iwi”) are also frequently referenced, a total of 285 times across all. Examining how these two sets of references overlap reveals that within the NSC framework, “Māori” figure as part of New Zealand’s “public” insofar as they have special needs.

As an early Cabinet briefing paper noted:

All the Challenges have relevance to all New Zealanders. A number of the Challenge themes make specific reference to the cultural diversity and multicultural aspects of New Zealand society....The focus of Challenges 2 and 3 address specifically [health] issues that affect Māori and Pasifika peoples disproportionately (MBIE, 2013b:33).

“New Zealanders” appears to be an inclusive phrase, especially when coupled with “multicultural” as here. NSC documentation of input into the definition of its health-related Challenge topics do recurrently highlight disparities for either Māori or Māori and Pasifika

peoples in cardiometabolic diseases, cancer, child and adolescent health, maternal health, elder health, and quality of care. Yet with this emphasis, they link the inclusion of cultural diversity to needs alone--neither speaking in terms of rights to equal health nor recognizing culturally diverse populations as producers of research knowledge, as Māori advocacy has (e.g., Reid & Robson, 2007).

NSC documents position Māori as a population in need by focusing not only on health, but also economic development. An April 2013 document variously notes how “the Challenge approach could also improve delivery of science services to meet the needs of the Māori economy and the growth of the Māori asset base,” and underscores ongoing needs to further “linkages between the innovation system and Māori enterprises and collectives” (MBIE, 2013a:5). The latter statement then footnotes the Ministry’s Vision Mātauranga (VM) policy as a guide for such linkages.

Earlier documents about VM clarify that better connecting Māori with the “innovation system” are part of this policy’s agenda to “to unlock the innovation potential of Māori knowledge, resources and people to assist New Zealanders to create a better future” (Ministry of Research, Science & Technology, 2007:2). While acknowledging “innovation potential” for Māori, this phrasing positions Māori knowledge as in need of liberation by and for the nation’s majority population. This utilitarian frame sharply contrasts with Māori advocacy that positions indigenous cultural distinctiveness as a right in itself (e.g., Jackson, 2007; UN General Assembly, 2007). Moreover, the fact that this “unlocking” includes Māori “resources,” in ways guided by the priority of “innovation” to benefit a market economy, presents neoliberal agendas as undisputed, and charts all-too-familiar pathways toward appropriating indigenous resources.

While NSC documents frequently connect the initiative’s agendas to helping Māori with health and economic needs, NSC documents do not describe any special efforts to solicit public input from Māori. Instead, they indicate that such input was strikingly limited.

Input from the general public into the NSC was gathered through the “Great New Zealand Science Project,” which included two websites for posting commentary from November 11, 2012 to January 28, 2013 that were advertised on television, online, and through social media (MBIE, 2013c). This period fell during the summer holiday season, when many universities and schools were not in session. Only six of the 138 public comments documented in the resulting February 2013 report reference Māori perspectives. Two of these noted needs to protect and promote Mātauranga Māori and Te Reo (Māori language), and to train more Māori and Pacific scientists; but the remaining four emphasized “undeveloped” (MBIE, 2013c:13) land or called for fuller work on archaeological sites. Lack of specific efforts to promote Māori inclusion in the advertising strategies, limited access to the online portals, and/or the short timeframe of this effort may all have contributed to this limited representation. Came (2014) has highlighted, for example, how the health sector in New Zealand features well-established institutional practices of overlooking Māori concerns—and that these become especially marked when decisions unfold under time constraints.

Subsequent documents further illustrate constraints on Māori input into the NSC. As the topics for the Challenges were defined through both general public input and input from the science sector, a March 2013 “Report of the National Science Challenges” featured contradictory messages about NSC approaches to Māori interests. This report first states that all Challenges should be defined in order to “allow for Māori research requirements to be delivered to Māori end users” (p. 43). Yet on the next page, the “Criteria and features of a challenge” makes no

specific mention of Māori, and emphasizes instead “wide public consensus” and “wide public benefit” (p. 44) as key criteria for defining a challenge. No clear reconciliation of these potentially contradictory approaches is provided in subsequent NSC documents.

Māori are therefore clearly but inconsistently referenced as part of the New Zealand “public” that NSC documents construct. They figure primarily as a population with special needs, which are recognized by the MBIE within the parameters of its own agendas for promoting “innovation” to serve public benefit. A similar pattern of moving to recognize Māori interests, while limiting actual Māori input, is visible in the MBIE’s appointment and instruction of an 11-member “Peak Panel” to develop potential topics for the Challenge areas.

Only one appointee had extensive experience in Māori research and education. The March 2013 “Report of the National Science Challenges” directed all panelists to assess the relevance of each Challenge to Māori. Yet a March NSC report appended to an April Cabinet paper then explained the Māori Peak Panel member’s role as “a designated representative who can represent (as far as possible) Māori end user views on science/research requirements” (MBIE, 2013d:44). The work of incorporating Māori interests shifts here from a general panel concern to the responsibility of its sole Māori member.

The concept of a single Māori “representative” conflicts with long-standing advocacy that emphasizes collaboration, negotiation, and partnership with Māori in decisions affecting the nation as required by the Treaty of Waitangi. References to any version of the Treaty are also rare in NSC documents: Four mentions repeat the same quote in a February 2013 report on science sector input into potential health-related challenges, and two additional references appear in the July 2013 workshop outputs which document Māori advocacy with MBIE officials. The February report’s reference noted that research into a potential topic of “Lifelong Health for All

People in New Zealand,” should “Improve and enhance lifelong health outcomes by considering WHO health determinants, a socio-ecological health perspective and the Treaty of Waitangi” (MBIE, 2013b:3). The ultimate formulation of the “Healthier Lives” challenge that developed from this input did not mention the Treaty or center on socio-ecological causes, however, but focused on testing clinical interventions, researching biochemical pathways, and developing “better-targeted diagnostics and drugs” (MBIE, 2013d:17). All reflect individual-level, technological interventions rather than focusing on population-level determinants of health, so do not clearly address the collective identities and aspirations of Māori advocacy.

In these ways the MBIE constructed a national public, and managed its input into the NSC, by making explicit reference to Māori interests--but on selective terms shaped by MBIE agendas. While Māori needs figure prominently in NSC documents, existing Māori advocacy concerning how best to improve health and economic development needs are rarely referenced. Māori participation in formulating the Challenges was also effectively constrained. Closer examination of how “science and innovation” systems relate to Māori in NSC documents further illustrates how this occurred.

Referencing but marginalizing Māori knowledge

While NSC documents include numerous references to improving Māori health, as noted above, they rarely mention the existence or work of Māori health researchers. These references first entered the NSC corpus as the MBIE sought input from the nation’s science sector early in 2013. The proposal of a potential challenge topic of “Health, Demographic Change and Wellbeing” includes the statement: “Input to this Theme at all stages would be provided by the University’s Māori and Pacific Island Research Centres who have extensive expertise at undertaking research and intervention programmes within Māori and Pacific

communities” (MBIE, 2013b:74). Echoing and extending this acknowledgement of Māori research and researchers, another comment from the science sector notes:

New Zealand health outcomes are low in part due to widening gaps in health status between different communities. In order to effectively improve health outcomes, emphasis should be placed upon vulnerable groups, such as Māori and Pacific people...Improving access to health resources for Māori means working in partnership with Māori and incorporating Māori models for health, such as Mason Durie’s *whare tapa whā*. (MBIE, 2013b:81)

Durie is a leading Māori health researcher, and *Te whare tapa whā* uses the model of a Māori communal house to conceptualize four dimensions of health (Durie, 1994).

Yet subsequent NSC documents make no further mention of Māori and Pacific health research centers, and feature only one additional reference to Durie’s model (MBIE, 2013e). Outside of the July 2013 outputs (MBIE 2013e) documenting Māori input, fewer than ten of the 285 references to Māori across all NSC documents explicitly concern Māori capacities to conduct research. Moreover, while “scientist” is mentioned 62 times across NSC documents, “Māori scientist” makes no appearance outside of the July 2013 outputs document. NSC documents also mention the word “Māori” together with the word “research” only once, and “Māori” together with “researcher” not at all, prior to these phrases appearing four times each in the July 2013 outputs document. Instead of clearly recognizing Māori research or researchers, NSC references to Māori recurrently emphasize needs for partnership which imply that Māori are largely if not fully absent from the arena of science. For example, an April 2013 document notes how the NSC needs to promote “skills and networks to enable better partnerships between the science system and Māori” and “allow for Māori research requirements to be delivered to Māori end users” (MBIE 2013a: 37).

NSC documents do recurrently reference “Mātauranga” Māori (Māori knowledge), 44 times total. Nineteen of these references were introduced by Māori researchers in the July 2013

workshop outputs, again demonstrating how its contents differ markedly from other NSC documents. Fifteen of the remaining 25 are references to Vision Mātauranga (VM) policy, illustrating the MBIE's marked reliance on its existing Māori-specific policy while developing the NSC. We described the neoliberalizing tenor of VM policy rhetoric above, but its support for developing Mātauranga Māori is also noteworthy. Beginning in 2013 a VM research fund was founded to support Mātauranga Māori. Yet the total national budget of NZD 2.5 million for VM projects was less than 2% of the 1.36 billion investment in science and innovation in 2013-14 (Joyce, 2013a); and the same year's budget allocated over NZD 33 million for the NSC (Joyce, 2013b).

Māori researchers have visibly criticized such tendencies toward separate but unequal knowledge systems within New Zealand's science sector. An interdisciplinary team of health and other researchers, Cram and colleagues (2002), undertook a commissioned study to document positive interactions between scientific researchers and Māori communities, and called for fuller recognition that both "western scientific knowledge" and Mātauranga Māori offer fully legitimate ways of "understanding the world," while emphasizing that all forms of indigenous knowledge have "allowed indigenous peoples to live in balance with their social and natural environment over many centuries" (2002:82). An analysis by Royal (2002) the same year considered reasons for the marginalization of indigenous knowledge in conventional approaches to science, arguing that a continual focus on grounding authenticity and tradition in pre-colonial times has worked to obscure realities of dynamic growth and development in Māori knowledge. Several years later, Māori health researcher Moewaka Barnes echoed Royal in noting needs to better represent the realities of Māori knowledge as a dynamic and changing system with full

contemporary relevance, while also reinforcing Cram and colleagues' focus on how this problem reflects ongoing power inequalities:

The dilemma about western versus indigenous might not be a dilemma if power imbalances and domination were not present – if both Māori and non-Māori knowledge and world views were valued, and we had full ownership and protection of taonga [treasures, including distinctive knowledge] as guaranteed by the Treaty of Waitangi (Moewaka Barnes, 2006:13).

She specifically implicated the growing emphasis on “innovation” in national political discourse by the mid-2000s in devaluing Mātauranga Māori, given how its connotations play on widespread assumptions that “traditions” cannot be dynamic, changing, or applicable to the present. NSC documents evidence this point, since as described above, they do not position Māori as producers of this valued outcome but as in need of benefitting from it.

The July 2013 outputs document for the MBIE's meeting with Māori researchers explicitly counters NSC rhetoric by connecting culturally distinctive Māori knowledge to both science and “innovation.” Participant comments include “Integrating Mātauranga Māori (3000 years of innovation!) with science will bring solutions not otherwise possible” (MBIE 2013e:26), which visibly moves to appropriate this favored MBIE term on Māori terms; as well as “Many Māori scientists are experts of Mātauranga Māori [and] well connected with their communities” (MBIE 2013e:35), which links Mātauranga Māori with science while also identifying Māori as active participants within the science sector.

The July 2013 workshop outputs document provides essential documentation of Māori researcher advocacy for input into the NSC. Considering how this advocacy arose, and how MBIE and other government officials responded, highlights additional MBIE tactics for recognizing without fully incorporating Māori input into the NSC.

Māori advocacy and government responses in 2013

The MBIE convened a series of invitation-only meetings with researchers in June 2013, after the ten Challenge areas were confirmed, in order to generate more specific research projects within each. Māori researchers who attended consistently noted how there were generally 2 or 3 researchers articulating Māori interests in rooms of perhaps 60 people. While these numbers could reflect the proportions of Māori among scientific researchers in New Zealand, working with existing proportions demonstrates an investment in maintaining the status quo rather than substantively incorporating Māori input. One characterized the process at this moment as highly exclusive: “Most Māori have been shut out of it.” Some quickly organized to improve representation by suggesting additional names to the MBIE through their universities’ administrations, but the issue persisted. Many researchers commented that with such low representation, the climate of these meetings felt palpably “unsafe” or “hostile” to Māori input. Several especially noted how reference to the Treaty was discouraged in these meetings (see also Pihama, 2014). While general references to Mātauranga Māori seemed acceptable, we describe below how efforts by Māori researchers to apply their knowledge by requesting changes in the scope or terminology of specific Challenges were documented rather than included.

Māori researchers articulated these requests through two meetings with government officials about the NSC in June and July. As the scope and tone of the MBIE’s invitation-only meetings with researchers became clear, a key member of the Māori Association of Social Scientists (MASS) circulated a briefing paper about the marginalization of Māori in the NSC, which then guided discussion at these two meetings with government officials. The paper was formally ratified by the organization in July, signed by 70 members and supporters (see Pihama 2014). In response to mounting criticism, a special hui (meeting) was first convened in June at

the national Māori Centre of Research Excellence, Ngā Pae o te Māramatanga in Auckland, for Māori researchers and the Prime Minister's Chief Science Advisor.

The diverse, multi-disciplinary and inter-institutional group of Māori researchers who attended called for the NSC to more substantively incorporate Māori researchers and collective approaches, in keeping with Māori worldviews and Te Tiriti o Waitangi. Researchers who attended report that the lead government official responded by saying that since New Zealand is an “equal opportunity” society, Māori are as welcome to come forward and participate in the NSC as anyone. For Māori advocates, such comments deny the collective and Treaty-based rights of Māori in favor of an individualized conceptualization of social and political participation. They also overlook structural barriers to Māori participation through all phases of the NSC.

As tensions were now very clear, MBIE officials quickly convened a second meeting with Māori researchers. The MBIE's outputs for this July 2013 meeting document how Māori researchers called for following the Treaty, including Māori worldviews and Mātauranga Māori, conducting research with the purpose of improving equity, and transforming the status quo that disenfranchises indigenous peoples (MBIE, 2013e)--all key features of Kaupapa Māori methodology, which had emerged from and supported the intellectual and institutional development of Māori research through the past several decades. Health researchers who attended reported that MBIE officials continued to restate their own agendas in response, however, and to especially emphasize how the Treaty was not relevant to the NSC process (see also Pihama, 2014).

The uniqueness of the July 2013 workshop outputs compared to all other NSC documents evidences how Māori researcher input had been overlooked in previous phases of the initiative.

Regarding health, for example, this document is the only one to mention the well-developed calls by Māori health researchers to challenge deficit models that misleadingly define indigenous communities as intrinsically unhealthy (e.g., Reid & Robson, 2007), and to focus on racism as a determinant of health (e.g., R. Harris et al., 2006).

By recording Māori perspectives, this document does recognize them. Yet subsequent NSC documents support Māori researcher perceptions that their meetings with government officials had little visible impact on existing MBIE agendas. The MBIE instead took two immediate actions. First, they posted translations of the titles of each of the ten Challenges into Te Reo Māori (MBIE, 2014), a generalized gesture at Māori inclusion with no clear impact on the NSC itself. Second, they scaled up reference to the Ministry's existing VM policy. Over 75% of references to VM appear in NSC documents produced from June through December 2013, i.e., as and after Māori researcher criticism of the NSC intensified. Yet as discussed previously, VM rhetoric attempts to recognize cultural difference within a framework that defines Māori knowledge as relevant only insofar as it furthers market-driven conceptualizations of “innovation.”

As MBIE responses unfolded, some actively challenged Māori researcher input. The July 2013 workshop, for example, included a request to change the phrase “exploit our marine resources” to read “secure the future of our marine resources” (MBIE 2013e:18), in the “Life in a Changing Ocean” Challenge. Māori researchers made the case for changing this wording by noting the need to enact *kaitiakitanga*, or custodianship across generations to protect and promote *mauri* (or life essence, a concept that can apply to individuals, social groups, material objects, and ecosystems). The MBIE subsequently did add *kaitiakitanga* to NSC documents, yet in the following terms: “The critical role that the Antarctic and southern ocean have in our social,

cultural and economic wellbeing, and implications for active *kaitiakitanga*, are well understood by New Zealanders” (Joyce, 2013a:19). Yet the workshop outputs documents that Māori researchers had referenced Wai 262, a Waitangi Tribunal claim that explicitly challenging this characterization. Wai 262 was filed by a coalition of Māori claimants to clarify intellectual and cultural property rights for Māori (M. Solomon, 2007). The Tribunal released its report on this claim in July 2011, with a press release highlighting how law and policy in New Zealand continue to “fall short” of partnership with Māori as evidenced by commercialization of Māori arts, plant species, and traditional knowledge without “consent or acknowledgement,” and by otherwise failing to incorporate “Māori cultural values” into decisions affecting their communities in ways that make Māori “unable to fulfil their obligations as *kaitiaki* [cultural guardians] towards their *taonga* [treasures]....” (Waitangi Tribunal, 2011). By positioning *kaitiaki* obligations as in need of protection, as an essential feature of Māori cultural survival, and as intimately connected with Māori forms of knowledge, the Tribunal’s conclusions directly contradict the MBIE’s claim that *kaitiakitanga* is “well understood by New Zealanders.”

Holding the line: Māori advocacy and the politics of research funding through 2014-15

Māori health researchers continued to contribute to multidisciplinary critical advocacy in response to the NSC through the rest of 2013. In October a briefing paper about the marginalization of Māori in the NSC was circulated to *iwi* (Māori community/tribal) leaders, as well as the nation’s Minister of Māori Affairs. Then late in 2013, another major government agency undertook an accelerated review of previously funded national “centres of research excellence” or “CoRE”, and government officials announced in March 2014 that they were denying several applications to renew funding—including that of *Ngā Pae o Te Māramatanga*, the Māori CoRE. While a direct link between this decision and the organization’s involvement

in NSC politics is not clear, this effort to defund Māori research infrastructure fits with NSC moves to marginalize Māori in national scientific research--reflecting an upswing in “anti- Māori sentiment” amongst government agencies, as one Māori researcher noted.

As leading Kaupapa Māori researchers whose work spans education, social services and health, Leonie Pihama and Linda Tuhiwai Smith responded quickly with a number of postings to the *Te Wharepora Hou* blog, a global online forum for Māori and other indigenous women. These criticized the marginalization of Māori perspectives across both the NSC roll-out and the CoRE funding decision. Pihama’s discussions of the NSC affirmed many themes from our interviews with Māori health researchers, noting the NSC’s reliance on “predetermined frameworks” (Pihama, 2014) set by MBIE’s agendas rather substantive collaboration or inclusion of alternatives. Smith’s entries underscored how the loss of a Māori CoRE would set back decades of gains in essential infrastructure for Māori research in New Zealand (L. T. Smith, 2014a, 2014b), yet also explicitly linked “innovation” to how this Māori CoRE had “created novel approaches that other Centres of Excellence borrowed and adapted” (L. T. Smith, 2014b). Such statements explicitly counter moves by the NSC and related initiatives to position Māori knowledge and research as irrelevant to mainstream research in New Zealand.

Smith’s call for action generated an influx of support from indigenous researchers and allies around the world. Responding to this along with ongoing internal pressure, New Zealand officials then announced a reversal of the decision in May, stating that funding would support a Māori CoRE--with the caveat that it would need to be reconfigured, and housed at a new location. This new turn linked restoration of funding to Māori groups participating in market-style competition with one another. For the next several months different groups of Māori researchers worked to organize potential new sites, but through strategic reorganization as

collectives. An interim Kahui Māori group developed to facilitate collaboration amongst Māori groups interested in the three health Challenges, for example.

Māori advocacy also continued in the national government. Late 2014 featured the announcement of a new selection committee for a Māori CoRE led by Māori health researcher Mason Durie. By January 2015, national news media quoted Durie to report that Ngā Pae was now likely to continue at its current location with renewed funding after all (Radio New Zealand News, 2015), and this decision was confirmed in June 2015. Yet Māori colleagues report that 2015 is also witnessing a “strategic refresh” process in New Zealand’s major national health research agency, the Health Research Council, with clear MBIE involvement. This process appears to be the next permutation of ongoing MBIE efforts to pursue its NSC agendas, and Māori advocacy is continuing in response.

CONCLUSION

By using selective discursive constructions of Māori needs, interests, and skills, alongside several practical barriers to participation, New Zealand’s National Science Challenges moved to marginalize input by Māori researchers. Māori research approaches and complaints were recorded by the MBIE in NSC documents, but not substantively addressed as the initiative unfolded through 2013. By attending closely to how this occurred, we extend ongoing conversations about “neoliberal multiculturalism” as a tactic for simultaneously recognizing culturally diverse agendas while also undercutting their practical impacts. In New Zealand decades of development in research by and for Māori, and close attention by Māori researchers to ongoing shifts in neoliberalizing political tactics, have shaped Māori capacities to effectively contest at least some of the impacts of the NSC and related scientific funding reform initiatives through 2012-14. This process is continuing: As one Māori colleague reports, the NSC’s

development of an additional 11th Challenge (“Building Better Homes, Towns and Cities”) in 2014-15 has featured greater Māori input.

Our analysis is limited by a short time frame and relatively small sample, as well as by different orders of data available for MBIE (e.g., exclusively textual) as compared to Māori researcher perspectives. Yet its findings pose questions for future social scientific work about how moves to superficially recognize cultural diversity are figuring within emergent efforts to reform how knowledge about health is produced. Key questions for such work include: How are claims about cultural difference figuring in current political contestations over neoliberalizing scientific research about health? How are health researchers also using claims about cultural diversity to respond to neoliberalization, by asserting alternatives? Moreover, how are the shifting courses of these political contestations shaped by locally-specific histories of developing and defending institutional infrastructure for producing culturally specific forms of knowledge about health?

Even while Māori researchers are widely-known for their development of a Kaupapa Māori approach that has contributed powerfully to the international growth of indigenous and critical research methodologies (e.g., Cajete, 2000; Denzin, Lincoln, & Smith, 2008; Kahakalau, 2004; Kovach, 2010; T. G. A. Solomon & Randall, 2014; Wilson, 2008), during the NSC’s initial roll-out they found themselves sitting in rooms with government officials who made selective and appropriative references to culturally distinctive Māori knowledge while actively constraining input from actual Māori researchers. Māori advocacy in response leveraged its own rhetorical and institutional resources. Linda Tuhiwai Smith has described New Zealand’s neoliberal reforms of the 1980s-1990s as a period in which Māori advocacy was able to successfully contain, rather than to fully prevent, damage to Māori interests (L. T. Smith,

2007:348). Her characterization also seems applicable to the NSC, highlighting the persistence that is required of Māori efforts to claim and defend space for indigenous research in New Zealand. These contestations surrounding the NSC also demonstrate how building capacities in professional research can help culturally distinctive groups to hold ground, as neoliberal reforms attempt to selectively define what constitutes scientific research about health—and, to narrowly construct who can legitimately conduct such work.

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