

Distinguishing Cultural Experiences from Psychotic Symptoms with Māori young people

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*pseudonyms for young people who spoke on video during this presentation at Two Eyed Seeing conference in January 2022.

Greeting, Acknowledgements and Introduction

Wiremu NiaNia:

He rere tiwha tiwha, he rere tiwha tiwha te pō, tiwha tiwha te ao. Ka tū te tai turia o Rehua, i turia te matahau a Tu. Tu te ihiihi, tu te wanawana, tu te whakaputa ki te whaiao, ki te ao marama. Tihei mauri ora. Tihei uriuri, tihei nakonako. Ka tau hā whakatau ko te rangi i runga nei. Ka tau hā whakatau ko te papa i raro nei. Ka tau hā whakatau ko te matiku mai i Rarotonga koe ia i rukuhia manawa pouwaho koe ia i rukuhia manawa pouroto. Whakatina kia tina te more ki Hawaiki e pupuana hoki wawauana hoki tarewa tu ki te rangi. Heke panuku, heke tangaroa, whano whano, haramai te toki, haumi e! Hui e! Taiki e! E akunui akurahi, nā matawaka o ngāpito o te ao. Tēnā koutou, tēnā koutou, tēnā koutou.

This greeting speaks to the darkness that surrounds us in the deep unknown. That we would seek light in order to find a glimpse of each other. That we would look for the brightest constellations to illuminate our path. We mihi to Ranginui, our sky father, the heavens who gave us the stars and who gave the moon to follow and the sun to warm us. We acknowledge Papatūānuku, our earth mother who gives us sustenance as we journey on her as human beings. And then, tihei mauriora means life to all things. Tihei uriuri means that I'm relating to each iwi (tribe), all of us who are spiritual beings, relating us all to one another. Across the ocean, across the land. And all these words are cemented by hara mai te toki haumi e! Hui e! Taiki e! It is done!

We greet you all. We mihi to all the Indigenous people who are present, and all your ancestors. Anei ra te mihi kia koe hoki Lewis, nahau i whakatu tēnei hui. Kia a koe hoki

Albert Marshall. Anei te mihi ki a koe. Tēnā koe, Tēnā korua hoki. Kai te mihi, kai te mihi, kai te mihi. Nō reira mai i a matou te iwi o Aotearoa. Tēnā koutou katoa. Ka huri.

Allister Bush: Mauriora ki a koutou katoa, greetings everyone. I join with Wiremu in greeting you all from Aotearoa, New Zealand. In particular, as Wiremu has also done, I acknowledge the Wabanaki cultures and Darren Ranko for welcoming us all to your land, even though we're all on Zoom. I acknowledge all our elders from all our places of belonging and particularly Albert Marshall, who spoke on day one. I acknowledge Murdena and Albert who gifted us the wonderful notion of two-eyed seeing. I'm grateful to all the organizers of this two-eyed seeing conference and in particular, you Lewis, for all your work on our behalf, bringing all of us together at such a challenging time. My name is Allister Bush. I work as a Pākehā or New Zealand European child and adolescent psychiatrist at an Indigenous Māori mental health service in New Zealand. I've had the good fortune of working, writing, and teaching with my good friend Wiremu NiaNia over the last 17 years.

I will make a few comments about what this talk might encompass before handing over to Lewis, to introduce yourself, even though I know everyone's already familiar with you, Lewis.

This conversation will focus on voices and visions which people might experience, and which are of particular interest to psychiatrists because these experiences can be quite confusing and oftentimes there are Indigenous perspectives which are ignored in psychiatry. We bring these perspectives as an example of two-eyed seeing. Wiremu has his own concept of working together which he calls tātaihono, which he will explain later. So our talk together will focus on psychiatry perspectives, but also Māori healing perspectives on voices and visions. We hope to provide some guidance for Western mental health clinicians and ways of exploring Māori and perhaps other Indigenous meanings around voices and visions. Lewis, I hand over to you to introduce yourself.

Lewis: I have trained as a family doctor, a psychiatrist, and a clinical neuropsychologist and have had the opportunity to work in Indigenous contexts and with Indigenous people for most of my career. I do appreciate the perspectives of the North American

Indigenous elders with whom I have worked. They give full ontological validity to the worlds visited by people in non-ordinary states and also to the beings that they encounter.

Allister Bush: This is the title of our shared talk: 'Distinguishing Cultural Experiences from Psychotic Symptoms in Indigenous Settings. Māori, Cherokee, Lakota perspectives and psychiatric perspectives. As you are most likely aware, Aotearoa New Zealand is located in the southern part of the Pacific Ocean. Wiremu and I first met in 2005 and worked together for a five-year period at our Māori mental health service in Porirua, near our country's capital Wellington. We would like to acknowledge the elders of Te Whare Mārie. In particular, Pikau Te Rangi Arthur and Ani Sweet, who were the first kaumātua, or elders, at our Māori mental health service, which is part of the local mental health services in our area. We also acknowledge the young people and their families who have given their stories for this presentation and given permission and given their blessing for us to use this material.

Historical context

As discussed throughout this conference, we are mindful of the historical context to this collaboration and any other work in Indigenous contexts. In Aotearoa, from the early 1800s onwards, despite a treaty between the British settlers and local Māori iwi (tribes), which purported to protect Māori rights, there was a systematic process of European settlers taking over Māori land in Aotearoa. Massive areas of Māori land were stolen by force and a wide range of legal methods. Alongside this, te reo, the New Zealand Māori language was banned in New Zealand schools. There was colonial suppression of key Māori institutions including Māori healing, and this is important, particularly in relation to the status of Māori healing practices in New Zealand. There was also church involvement, with suppression of Māori spiritual world views by churches as well as by many secular practices in mainstream institutions in New Zealand. Hospital mental health services were part of the forefront of these practices. One culmination of this was the Tohunga Suppression Act in 1907, which banned any Māori healing practices and made Māori afraid that, for example, if they were to practice Māori healing, that their iwi land might be confiscated. This was a very deep and painful process. The evidence of

this is still obvious in local services who often have little awareness of Māori healing perspectives. And I expect these different aspects of colonization would be very familiar to the participants in this conference.

Voices and Visions in context of history

In relation to voices and visions, here is a statement from Simon McCarthy-Jones¹, who focused on a European history of hearing voices: "There have always existed side-by-side two jostling discourses of hearing voices. The biomedical pathological story, and the spiritual or otherwise meaningful story." I think it's easy for psychiatrists, psychologists and those of us who've had a Western academic training, to lose sight of the fact that throughout the ages there have always been spiritual perspectives on what voices and visions might mean. And sometimes we forget this, in our efforts in psychiatry to define people's experiences using psychiatric pathology language.

Working together

One month after I began working as a child and adolescent psychiatrist at Te Whare Mārie, Wiremu joined the team. He was employed as a cultural therapist and over time I got to know him. I really enjoyed his company, but it took me quite a while, even several years, to start to understand that Wiremu was doing something quite interesting. And he was saying very little about it.

Jake

Let me give you an example. Jake was a young person, aged 18, whom Wiremu and I met together when we had already been working in the same team for several years^{2,3}. By this time we had already met together with a few other young people, and I had realized that Wiremu's practice was very different from usual approaches in mental health. What he was doing seemed quite mysterious to me, but apparently effective in surprising ways which aroused my curiosity. Wiremu also responded very generously to my many questions. Through these joint consultations I began to get glimmers of

understanding of his world views. He never told me that he was practicing as a Māori healer. Later on, colleagues confirmed that he was regarded as a healer by others.

Jake was referred to our service because of an incident in which he had impulsively stabbed himself on the wrist, after his father had criticised him for deciding to leave the tertiary education course that he was doing. He was then taken to our mental health service by his mother. Jake told our social worker that he'd been hearing voices for some years, and was generally not troubled by these. He said that these voices would at times talk together. Sometimes they would offer him advice. They'd even told him, for example, 'don't have that extra drink'. At times they told him not to be stupid, but he felt that they were doing this in a positive way because they cared about him. He was not depressed. There were no concerns about other psychotic symptoms. However, in psychiatry, voices are frequently interpreted as psychotic symptoms or as a symptom of dissociation. So the question arises here, were Jake's voices a psychotic symptom or a dissociative symptom? Or else, given that he was a Māori young person, were his voices cultural experiences? Here I hand over to Jake to explain some more about his experience.

Jake: (on video) I remember from a very young age being aware of feeling certain energies. In more recent years, I always feel like I've got someone here, by my right shoulder, and someone here, by my left shoulder. They're right here with me. Not even like an angel and devil because they're both supportive. They both sit there. They argue sometimes, because they both think they know what's right.

Allister Bush: Thanks Jake. Wiremu, you and I met up with Jake initially, and then you asked to meet Jake the following week at his flat. I hand over to you Wiremu to explain what you noticed.

Wiremu NiaNia: When we met Jake that second time, I was aware of two people, one on each side of him. I assumed that Allister wouldn't be aware of them there. I knew that they were both deceased, but were supportive of him. He said that one was his Nanny and one was his grandfather. But then there was another person present spiritually that was influencing the way he was acting. And I warned him about this female presence

that I felt had potential to be quite negative for him, even though she wasn't related to him. I could tell that Jake had a strong gift as a seer, which we call matekite. Those are the things I noticed.

Allister Bush: Thank you, Wiremu. In a moment we'll return to explore matekite in more detail. But now let's hear from Jake about what it was like for him meeting Wiremu, and what Wiremu said. Here he talks about a meeting we had together 18 months after our initial meeting in his flat.

Jake: I recall Wiremu describing a woman he saw with me. He said, 'yeah, she's sitting there in a nice black dress with white embroidery, with her hair pulled back into a tight bun. I realised soon after that the only photo I've got of my grandma is her standing in this black dress with white embroidery with tight pulled-back hair.'

Shared experiences

Allister Bush: In my first few times, I was quite surprised when Wiremu explained some of these experiences that he was having. But it's interesting for me as a psychiatrist to reflect on the fact that Wiremu and Jake were in the room and I was also in the room and I couldn't see these three people that they could see. Nonetheless, Wiremu was able to have a conversation with Jake about three different presences in the room. Jake pointed to where they were, and Wiremu agreed, 'Yes, that's where they are'. This shared quality of experience seems important to me in helping us figure out whether his voices might be a psychotic or psychological symptom. If an experience like that is being shared, it makes sense to me that it's more likely to be a cultural experience. And it is very helpful to have an elder who can confirm an experience like this for a young person who may be confused about that. But I'm wondering, Lewis, would you be able to comment on your view about whether Jake's experiences could be due to the presence of deceased ancestors.

Lewis Mehl-Madrona: I ascribe ontological validity to all voices, and believe that they are beings of some ilk. And it seems entirely plausible to me that they could be ancestors. I think there are problematic voices that torment people, you know, that have some connection to trauma and to abuse. But what strikes me about Jake's voices is

how friendly and helpful they are, for the most part. I think our ancestors do argue sometimes. They can be annoying when they're arguing about what we should do in a situation. Barbara and I make these mind maps to show all of the beings who get involved in a particular situation or conflict and what their perspectives are. So it seems entirely plausible to me that they could be ancestors.

Tikanga or cultural protocols and clinical practice

Allister Bush: So in order for a Western clinician or in my case a psychiatrist to be approaching this territory of experience with an Indigenous young person, we need to be conscious of important tikanga, or Indigenous customs. It is important during the assessment, for me in my context, to be using Māori customs and protocols which demonstrate manaaki, which is a concept referring to culturally embedded hospitality, and this is likely to enhance rapport. Wiremu, can you please explain some more about this important concept?

Wiremu NiaNia: Sure. Manaakitanga; manaaki; mana means giving authority, giving respect to those people, or prestige, or honour. So manaaki and manaakitanga both refer to giving honor or giving authority to the person or people that are before you. Often they are expressed in practices of hospitality.

Allister Bush: In addition, there are also whānau, or family values. Seeing someone in their relational context can enhance the exploration of Māori meanings. There's a lot more to be said about this, but because we have other matters to cover we're going to move on. But we just wanted to acknowledge that these aspects are critical, and personally, as a western trained psychiatrist, I'm very fortunate to work with Wiremu and in a Māori service where there's a big focus on addressing cultural protocols and practices appropriately.

Partnerships with elders and knowledge holders

Next we acknowledge the importance of developing sincere and mutual partnerships between non-Indigenous clinicians and Māori colleagues who have knowledge of this area, including the elders and cultural workers at our service. In our context, these

partnerships are based on Māori principles and relational values. I believe this would be in line with what Albert Marshall said about two-eyed seeing on day one of the conference. As part of this I (as a non-Indigenous clinician) need to be mindful of the history between our cultures. Psychiatry has obviously contributed to the silencing of Indigenous perspectives, and we need to find ways of counteracting this. I think Lewis may have talked about decolonizing practices early in the conference. And this is critical in my work with Wiremu and in our work in a Māori Indigenous context. As Wiremu said, manaaki can mean giving mana, or authority, to the other person, So that means that the family has some authority to be deciding what they think the most significant meanings are. Other important attitudes and values include respectful curiosity, humility, and knowing how to interact with and look after kaumātua (elders). I have also heard you talk about these matters Lewis and I am interested to hear more of your thoughts.

Lewis Mehl-Madrona: We need to shift from viewing distress as individual brain pathology to seeing it as emerging from relationships, history, and “soul wound”/colonial trauma. In practice, that means prioritizing people’s own stories, community narratives, and Indigenous knowledge systems (rather than only DSM labels) as the primary frame for understanding suffering and healing. Two-eyed seeing or explanatory pluralism holds Indigenous and biomedical perspectives together without forcing one to dominate. For psychiatry, this suggests actively co-creating treatment plans that can include medication and psychotherapy alongside ceremony, talking circles, Elders, land-based practices, and spiritual work, with genuine epistemic parity between them.

We need to re-situate mental health in community and continuity. Healing occurs in community and personal and cultural continuity are central, especially in work with Indigenous youth and suicide. Decolonizing psychiatry therefore means:

- Moving from one-to-one, clinic-centric models toward circles, groups, and community-embedded care.
- Supporting language, culture, and land-based practices as mental health interventions in their own right.

Western psychiatric diagnoses and trauma terminology can overwrite Indigenous understandings of experience. A decolonizing practice would use diagnoses pragmatically (for access to resources) but avoid reifying them, instead anchoring work in local concepts of wellness, relational balance, and spirit. Elders consistently stress the importance of cultural humility, deep listening, and shared authority with Indigenous healers. For psychiatry, that means redesigning training so psychiatrists learn from Elders and community knowledge holders, and restructuring services so Indigenous partners have genuine control over how care is defined and delivered.

Tātaihono

Wiremu NiaNia: Tātaihono is the name I have given to a close partnership, one that is characterised by two eyed seeing, as Albert Marshall has talked about. There is a saying, 'Āpiti hono, tātai hono'. Hono means to join, and this saying means, 'Let that which has been joined remain intact'. Tātaihono can be about reparation, reconciliation, collaboration, and connection. It is about a binding together, a kind of spiritual binding that gives unity and strength.

At the end of a tangi or bereavement ritual, when it comes time to put the deceased person to rest, we often use this saying. 'Āpiti hono, tātai hono' in this context refers to an important matter of spiritual protection. It is about binding those who are dead to the dead, and binding the living to the living. This is putting everything and everyone in their place. If we don't do it properly, we leave room for somebody else to get snatched. So we are trying to prevent any further occurrences like someone else dying. In some extended whānau (families) several family members might die one after the other, very quickly, and yet they had no obvious health problems. Spiritually we take these matters very seriously. Tātaihono refers to a spiritual binding that confers protection. And for Allister and I working and writing and teaching together it implies reconciliation, bringing back concepts and practices that have been disconnected or disestablished and continuing to work on strengthening the connection in that partnership.

Cultural accountability

Allister Bush: In our working relationship between me as a psychiatrist and Wiremu as a Māori healer, that joining is a deep kind of joining along the lines that Wiremu explained. We have to be mindful of the history between our cultures. We have to be actively working to notice those things. For me as a Western practitioner, I'm accountable to Wiremu around cultural understandings and practices. There is a lot of work that goes into maintaining that connection that Wiremu is talking about. I'm wondering, Lewis, would you comment on how this could be connected to two-eyed seeing from your point of view?

Two eyed seeing

Lewis Mehl-Madrona: What you guys do is to create a genuine opportunity for dialogue, cross-cultural dialogue, cross-specialisation dialogue. What has always impressed me is the tremendous respect that you show to each other. And it seems to me that this is really the essence of what we're trying to build with two-eyed seeing, a respectful listening of each to the other. If we really believe in explanatory pluralism, or two-eyed seeing, we need to have that capacity to deeply listen to other people's perspectives without immediately rejecting them, which is our problem in psychiatry. There's a joke about how psychiatry is the only field in which the customer is always wrong.

In contrast to that, we need to nurture that notion of listening in a deep way. Entertaining the possibility that things could be so, even though they may be outside of our perspective, or outside our schema. We need to acknowledge that other people may have different schemas for interpreting the world, and their schemas might actually work better for them, and their situation, rather than the ones that we're bringing in, from where we came from, and where we live. I think the essence of decolonization is to remove the external schemas for interpreting reality that were imported, and to create the space for Indigenous schemas to exist, to be utilized, to develop, and to flourish. And an opportunity for dialogue.

I think we can all agree that if we needed a hip replacement, we'd turn to Western medicine for an intervention. But in our field of psychiatry, it's not always clear that the

biomedical perspective is the one that solves the problem. And so, I think that what you do is the essence of two-eyed seeing.

Three lines of enquiry to explore visions and voice hearing seeing experiences

Allister Bush: Thank you, Lewis. It's very humbling to hear you say that. So if we're thinking about decolonizing work as a clinician, and we're meeting a young person who's having an experience which might potentially fit with a Māori cultural experience, a further step is to consider how we might ask them about their experience in a manner that doesn't colonize their experience. How might we approach an enquiry about this? For example, as clinicians, we need to consider whether the experience that they're talking about may make more sense from a Māori cultural viewpoint, rather than from a psychiatric viewpoint. And I think this is the case for Jake's situation. From what we've already talked about, we need to consider if Jake's experience may relate to the presence of deceased ancestors? But a second line of enquiry could be, is it possible this young person has what Wiremu would call *matekite*, an enhanced spiritual awareness. And we will explore this concept further. And then a third area of enquiry might be, is it possible that the negative experiences that the person we're meeting with is having could be due to a Māori cultural or spiritual problem? This is a complex area. To enter into this territory for me as a psychiatrist, I am reliant on my partnership with Wiremu, with his Māori healing expertise, and to do that I will have to step out of my comfort zone. But if we can work together on this, then the young person and their whānau (family) can benefit from both perspectives.

Details of peoples' experiences

Now we turn to a few suggestions for helpful principles for such an enquiry. Returning to Jake's description of his voices, a few details from his explanation could point to a psychiatric explanation, but the same details might also point to Maori cultural explanation. He described several voices, and he said they seemed to be coming from outside his head. And sometimes they would speak to him in the Māori language and he didn't always understand what they said. Sometimes they would speak to him in English, they might say something negative like, 'don't be an idiot'. But it was often at a

time when he felt they had justifiable reasons for criticizing his behavior. And they would prompt him to 'Think about it', for example. And sometimes they would be loving and supportive. He had an auntie who told him that the voices might be ancestors of his. So he's already had someone in the family guiding him, who has had her own experience of the same ancestors. And he had been told that his deceased great-great-grandfather and grandmother were there with him. Later on, these were the individuals that Wiremu described in detail: their physical presence, and what they looked like to him. And later Jake was able to match Wiremu's description of his grandmother with an old photo that he had of her.

Lewis, do you have any further comment to make about whether we can make sense of someone's experience based on the details of the description they give, and whether sometimes these details might point towards a Indigenous or cultural explanation?

Spirit and Matter

Lewis Mehl-Madrona: My sense is that the Indigenous explanation is always there and that, nevertheless, sometimes we need biomedical interventions. So I'm thinking about people who, through trauma and abuse, they've become so beaten down that the beings who are around them are unfriendly. They're mean, they're derogatory, they're giving bad advice. And you and I both might prescribe medication in those contexts, to make what's unbearable, more bearable. But I wouldn't personally make it a binary. I would say that in an Indigenous perspective, these are beings with whom we can negotiate, with whom we can dialogue. Sometimes the person is not in a condition or a state in which one can do that, if the terror, the fear, is so great. In those situations we have to intervene in a different way. Just as we're spirit beings, we're also biochemical beings and biophysical beings. You know, it's an interesting mixture here on earth, of spirit and matter. And so sometimes we need to address the material before we can address the spiritual, and sometimes not.

Allister Bush: Returning to avenues of enquiry that could help us recognise cultural experiences, a further consideration is, is it possible this person may be *matekite*, a Māori term that refers to enhanced spiritual awareness?

Matekite

Wiremu NiaNia: Matekite is a word that means seer. If I was to explain that word more, matekite for us means mā, which is the word 'by', te, 'the', kite is 'to see'. By the seeing...ka mōhio, one would have knowledge. Mā te kite ka mōhio. By the seeing, one will have knowledge, Ma te mohio, by that knowledge, ka kitea he oranga, one would find a solution or a way. So the word matekite implies that a person is either chosen or is open to the spiritual realm in some way.

Effects of Cannabis

Young people who are matekite can be very vulnerable to serious negative effects of drugs like cannabis. Such substances can open up a doorway to the other side, and unwanted spiritual entities can pour through and may cause voices or visions and influence the way they behave. For me that is an important cause of what psychiatrists call psychosis. Being safe with drugs is so important for a young person who is spiritually aware. If they are spiritually open and then get unwell after using substances, stopping their use of the drugs is necessary if they want to get better. Otherwise they may be stuck on this merry-go-round for a long time.

Matekite and Matakite

So in summary, matekite is the ability to see sickness in people or something in the spiritual realm that may be disturbing them, or people who have passed on, and a related concept, matakite refers to foresight, the possibility of seeing something before it happens. These abilities often go together. So that's what matekite is about, being a seer. Okay, is that enough?

Allister Bush: Lewis, this matter about spiritual awareness is pretty critical in psychiatry because of the diverse unusual kinds of experiences that may be disturbing people. What are your comments about this?

When we dismiss the spiritual dimension

Lewis Mehl-Madrona: I think that we have this cultural difficulty in English-speaking countries, of either dismissing or, mostly dismissing, the spiritual dimension, or making it onerous, making it burdensome. I think the Christian influences in both New Zealand and North America evoke a kind of unfriendly spirituality, a kind of humorless spirituality. And I know from interacting with you both, that Maori spirituality is a lot funnier than the black robes version of spirituality. And so I think both Indigenous and non-Indigenous people are influenced by this, and come to fear awareness of spirits and spirituality. And movies reinforce that, the horror movies that people watch.

I remember my grandmother always said that the scary stuff came from human beings, not from spirits. You could trust the spirits, but you might not trust humans. I think that there's a kind of lost quality.

Elders

Many people don't have elders to look to for guidance, good guidance and direction. We see people diving into spiritual paths without guidance, and in an individualistic manner, and coming undone, becoming psychotic amidst the experience, and then requiring a lot of work to put them back together. So those are some of my thoughts about that.

Wiremu NiaNia: I think that's awesome, Lewis. If as a young person, I'm not being believed about the experiences I am having, or my spiritual experiences are being dismissed, or I'm told that I made it all up, then most likely I will doubt myself. I may put myself down, or think I'm an idiot, or wonder if I am mad because it's not normal. Whereas it might be the most normal thing in the world. Actually, for me it's normal to see dead people walking around. For example, I have seen two referees on a rugby field and one of them was not alive. For me, many unusual experiences are normal. I've been seeing visions like that, and hearing voices others can't hear and having other experiences of wairua (spiritual realm) since I was three years old. But I was lucky I had my kuia (nanny or female elder) who just patted me on the shoulder, and said 'Kei te pai boy, that's all right'. 'That's okay'. And then it did feel ok to me. Otherwise, I might have

been confused and scared and may have totally lost the plot. A lot of the distress can come from not understanding what we are experiencing and having no reference points. Also from not believing in ourselves. Doubting ourselves and our sanity can become such a conflict that it actually pushes us over the edge.

Allister Bush: I'm interested in your own experience, Wiremu. When you talked about your kuia (nanny), and you said you had some experiences that disturbed you, she was able to reassure you. Was that partly because she knew about those experiences in her own life, and knew what you were talking about?

Having experiences normalised

Wiremu NiaNia: She was often having those experiences. She could see spirits. I was really, really lucky, that I was with a person who could see the dead. People would visit her on their way out, just at the time they were dying, to come and say farewell. So she knew they had died even before the phone call came. By the time we got the call that the person had died, we already had the car packed and we were ready to go to their tangi (bereavement ritual).

My kuia always normalized experiences of spirits for me. Like, I can remember going to the toilet when I was a young boy. Our toilet was a long drop at that time. In my day there were no flush toilets, unless it rained. And I got to the toilet and there was somebody already there that I'd never ever seen in my life. And I ran back and I said, 'Nan, there's somebody already on the toilet'. And she said, 'Kei te pai, boy'. 'It's okay, he won't be there long'. And so she just normalized everything for me. And I grew up just thinking it was part of her and part of life. And so these days, part of my role is to help young people that are starting to see things, to normalise it for them and explain it and offer them some guidance so they can understand it better for themselves. So I love what you say, Lewis.

Role of grandparents

Lewis Mehl-Madrona: I think the role of elders is crucial because I had my grandparents, and Wiremu, you had your relatives. And so we both had people to

normalize our experiences and protect us from the sort of mainstream culture that tells you that you can't possibly be experiencing what you're experiencing, you must be crazy. That sort of devaluation, that sort of dismissal of experience can be quite traumatic. It's what Megan Bang calls epistemological genocide, that it's saying you're not allowed to experience the world in the way that you are, because we disagree with you.

Wiremu NiaNia: Yeah, that's right, that's right!

Allister Bush: And your means of knowing has no foundation. I think in psychiatry, we can be often unwittingly guilty of that.

Clues to identifying spiritual awareness with a young person and family

Let's move on to the third area of enquiry which is how we might identify if a young person we are meeting has got their own spiritual awareness. One pointer is if they've had experiences like hearing voices and seeing visions when they were younger. For example seeing ghostly figures that look like people or animals, or seeing colours around people when they were young. Other times, we can ask if they're able to identify intuitive feelings about people or places that are hard to explain but turn out to be accurate or helpful intuitive hunches. Then we can ask if anyone else in the family has had similar experiences? These are some clues, potentially, for those of us who are Western clinicians. Another question could be, do you have someone in the family who you would all go to for guidance on spiritual matters? Or have you ever noticed that someone else in your family or outside can perceive what you're perceiving?

So Wiremu was able to perceive what Jake was perceiving. That shared experience suggests a really important clue to me.

Being careful with diagnosis

I want to make a diagnostic comment before we move on from Jake's situation. For me as a psychiatrist, when I met with Jake, I was looking at what else was going on for him. Apart from the voices that he was talking about, did he have other symptoms which I could identify as possibly psychotic? And as he didn't, I realised that he didn't meet

criteria for a psychotic disorder. And so this tells me that our criteria, if we're being careful with the diagnostic criteria, can actually be quite helpful for us in making distinctions. He also didn't have a history of major trauma that might lead me to make us think about trauma and dissociation as being the cause of his voices. My job as a doctor also includes considering, could he have a brain problem like a neurological problem to explain his voices and visions, but he didn't have that. I could rule out these other issues and we could consult with Wiremu. Wiremu was able to say, well, I can see his ancestors as well. And that supports this as being a cultural or spiritual experience. And so, we can have a careful logical process.

Now we turn to another young person, George's situation because he presents with a different kind of a problem which was quite negative in his life. And then we'll hear his views about his experiences and hear from Wiremu and Lewis about their perspectives on what happened for George.

George

George was 17 when he first had a sudden onset of a distressing male sounding voice which was harassing him^{4,5}. At the same time he developed non-epileptic seizures. He had been using cannabis for a period of time. He was Māori and his family also came from a traditional Māori area. And so I asked the question, could George's voice hearing be a psychotic or dissociative experience or might it be a cultural experience? And here's George describing his experience during the five months he was dealing with this affliction.

George: (on video) What it was like through the five months? Exhausting, just, I don't know, you're not in your own head space I guess. And you feel like someone's bringing you down from behind you, and it's just looming over you all the time, and won't go away. It feels like a physical bully that you can't get rid of and just sticks to you all time and just wants to bring you down. And then in the end it makes you mentally exhausted as well, and that's pretty much it.

Allister Bush: So from what Wiremu has said, and what we have talked about so far, one question is, is it possible that George is matekite, is he spiritually aware? A positive

answer to this question can change the direction of our assessment and lead us to consider whether to involve a cultural expert such as Wiremu. When he hears the voice, can he feel it there as well? George told me he could. Can he see it? Can he locate a felt presence in space next to him? George was very clear with me that he could. Has he ever had similar experiences at a younger age? In this situation, George was able to identify a number of similar experiences earlier in his life and his mother did as well. Has he previously had intuitive feelings about people or places that are hard to explain? He was able to describe these.

In addition, George and his mother were able to identify other people in the family that had similar experiences to him. Family members had people who they would go to for guidance. For example, his mother was able to talk to her own mother for advice about spiritual matters.

This is a negative experience that George is having, so it's slightly different from Jake's experience.

Mate Māori

As it's a negative experience, one further question is, could this be a Mate Māori experience which is a name for a Maori cultural, or spiritual problem? Here are some questions that could raise this as a possibility, and suggest the need to consult with Wiremu. Is it a negative experience interfering with his life? Can George locate it in space? Can he describe anything else about his experience of it?

George described 'the thing' as dark green on the inside. He was able to locate it in space. And he said it was like a 24 hour a day bully, and it felt mean to him.

During the session, Wiremu asked George and the family if there had been a recent relational conflict in the extended family. It turned out that there had been a significant event in the wider family that had negatively affected George and his sister. Alongside this Wiremu has already talked about his concerns about young people who are spiritually aware, using cannabis. And George had been using cannabis.

Wiremu NiaNia: The first thing I noticed when meeting with George was that he liked hot chips because I was eating my dinner of kina (sea urchins) and chips in the staffroom when they arrived and offered for him to have some. Once we moved through to the family meeting room and had been meeting for some time I became aware of a negative female spiritual presence next to him. Even though it had a male sounding voice according to George, I sensed it was actually a female entity. After this I was wondering what might have happened to explain this entity affecting him like this. That's why I asked his mother, 'Have you ever had any sort of conflict in the whānau?' Once she responded and confirmed what had happened I explained that it was important to go back and fix that up, to find some reconciliation, even just from her side. I could see that this entity had a real hold on George at that time. I think its presence explained both the voice that he was hearing as well as his seizure-like episodes. At the end of the session I offered to do a karakia (blessing) for George and he agreed to that. So I stood and moved behind him and then recited a karakia that he might be released from the grip of this entity. And when we met up 2 months later it was clear that he was feeling better and this thing had released its grip.

How negative spiritual entities can get a foothold

During the session I spoke about different ways that negative spiritual things can gain a foothold with young people like George. I spoke about conflict in the family, or other traumatic events like sexual abuse, or physical abuse, or emotional abuse. All of these events could render a young person open or vulnerable to negative spiritual things, that might then impinge on them. I also spoke about other matters. For example, in Te Ao Māori (the Māori world) and perhaps other indigenous cultures, we often know that the sins of the forefathers can visit upon the generations below. If there's anything unresolved from conflict or trouble in previous generations, then that can open a spiritual doorway for negative stuff to pour through. So in addressing this spiritual problem for George, I focused on the fact that he was partaking of drugs as one possible cause, and the family conflict as another possible cause. I therefore suggested

that he needed to stop his cannabis use and his mother might go and try to address the relational conflict in the family.

Allister Bush: While there is more to this story, briefly, Wiremu had a single session with George and his mum^{4,5}. As a result of that session, George accepted the karakia (blessing or prayer) which Wiremu did in order to strengthen George to resist this thing which was harassing him. And as a psychiatrist, I was watching this with no clue as to whether it would be helpful or not. I certainly wasn't expecting there would be any change in George. I advised him to carry on with the antipsychotic treatment that he had been taking for some weeks. Although we arranged an appointment one month later, they cancelled that and two months later when we did meet up, Wiremu was there as well. George then told us that he'd had no more experiences of hearing the voice, and no more seizures after the single session with Wiremu. He also revealed that he had stopped his antipsychotic medication treatment shortly after our meeting with Wiremu. So this was a very interesting learning experience for me. I found the outcome very compelling alongside Wiremu's explanation. Wiremu was able to intervene in a way that seemed very successful and he was also able to provide them with a theoretical understanding using Māori concepts that made sense to them and helped them feel empowered to take action to protect themselves. After this George had stopped the antipsychotic because he'd been putting on a bit of weight.

Lewis Mehl-Madrona: I would tend to agree with Wiremu that drugs such as cannabis can weaken people's spiritual integrity and then it's more likely that bothersome beings can come around. My sense was that what Wiremu did was to give George the karakia and that strengthened his spiritual integrity. At the same time, you also told him to cut down on the marijuana. I think that combination was really powerful. When you sing, when you speak to the spirits in a good way, they come and strengthen you. You know, the other thing that comes to my mind is, one shouldn't use substances that one doesn't know the songs for and the prayers for. And my sense is that George didn't know those songs or prayers for cannabis. You can get in trouble when you dabble with things that you don't know the protocols for. Eduardo Duran, who's one of our friends from Montana, talks about that in his book, *Healing the Soul Wound*. Eduardo calls it sorcery

when you dabble with things without knowing the protocols or the songs and how to address the spirit that's in that thing. So my take is that by doing what Wiremu told him, he built his spiritual integrity and reconstituted himself, strengthened himself, revitalized himself.

Allister Bush: I'm going to summarize George's situation from my point of view as a psychiatrist. Apart from his voices, he didn't actually have other psychotic symptoms. It's possible that his pseudo-seizures could be consistent with a dissociative problem. However he didn't have a background of major trauma that would help us make sense of that. He also didn't have other neurological symptoms that would suggest a biological brain problem. He had a normal EEG and CT head scan. Consulting with Wiremu gave George and his family the chance to consider his predicament from a Māori healing perspective, and some things started to make sense for them. The outcome of Wiremu's intervention, and George's relief after that session, also supported that. So again, here was a young person with matekite or spiritual awareness, who Wiremu helped by clarifying that George was suffering from a negative spiritual problem, which Wiremu identified as being a Māori cultural problem.

Lewis Mehl-Madrona: I'm wondering if you can share some of Tangi's story before we finish today.

Tangi

Allister Bush: Okay. Tangi was 16 at the time that she was referred to our service⁵. She had had depression for over 18 months. She had a termination of pregnancy that coincided with the onset of her depression. She felt more alienated from her family and she was hearing a voice telling her to kill family members. She also said that she could see a black thing that was troubling for her. So one of the questions I considered when I met her, alongside my other psychiatric questions, was: 'Could she be matekite? Was she a young person with a finely tuned spiritual awareness?'

The short answer to that was, yes, she was very spiritually aware and it was possible to identify this from an interview with her, even before she met Wiremu, and later Wiremu was able to confirm this.

Questions to identify Tangi's spiritual awareness

Going back over these interview questions which can help us identify when people may have some spiritual awareness, when I asked her, Tangi described that she was able to locate a felt presence in space, next to her and she could sometimes see it at the same time. She recalled many of these experiences earlier in her life. She had other intuitive feelings about people or places that were hard for her to explain. She talked about a predictive dream in which she had seen a friend of hers trying to hang herself. And that same day she went round to that friend's place and intervened and was able to prevent her friend from taking her own life. She had also known other things that she shouldn't have been able to know through normal means, and later had reason to believe that what she had discerned turned out to be true. Tangi was also able to identify other family members who had similar experiences, like seeing spirits. However, in her whānau (family), she didn't know of others who had knowledge of spirituality that could guide her. And so she often felt isolated in her family about this.

Wiremu's sessions with Tangi

Wiremu met with Tangi on several occasions. He concluded that she did have spiritual awareness and she had some experiences of her ancestors being with her in a supportive way. Alongside this she also had a negative spiritual entity that was troubling her. During Wiremu and Tangi's first sessions, Wiremu was able to help Tangi by explaining some more about her matekite gift and how to make sense of some of the experiences and offering her a karakia (blessing) to address the presence of the negative spiritual entity. Following this Tangi didn't report more experiences of it over the following six months. The next year, she began using cannabis, and she began to have experiences of a woman who became really troubling for her. Eventually she was suffering so much that our team arranged for her to be admitted to our local adolescent psychiatry unit. By this time she was describing the voice she was hearing as a 'screeching' voice.

Here is Tangi describing this experience.

Tangi: (on video) In 2012, the screeching lady, this new lady, just comes in and pretty much tortures me. I could hear her screeching. Pretty much all she said was her screech. And when I saw her she had this gray bonnet on her head and she had these little tiny shoes. And she had people surrounding her. Just black figures surrounding her. I didn't know who they were, but it was like they were protecting her. And I could tell she was very evil, or just not good, because that feeling feeds onto you and it changes your personality.

Allister Bush: So this is Tangi's description of the negative experience she was having. When I heard Tangi describe this, I rang up Wiremu to seek his advice.

Wiremu NiaNia: Two nights before Allister rang me, it was about nine o'clock. I was staying on our land which is up on the side of a mountain. This is about 600 miles away from where Tangi and Allister live. That night it was quite cold and beginning to snow. I was lying down and this thing, this creature came out of the rafters. It came screeching down towards me as if it was going to strike me with its big claws. It was like some kind of banshee. I sat up and I told it, 'Get the hell out of here!!' . And boom, it disappeared. I had no idea what it was.

Later when Allister rang me, and told me what Tangi had experienced, the screeching woman who had threatened her that same evening, I suddenly understood that my experience was connected to what was going on for her.

Allister Bush: During that phone call to Wiremu, I had only told him that I had met with Tangi and that she was being tormented by a voice screeching at her. When Wiremu told me about his experience, I was very confused by this. Immediately after talking to Wiremu, I rang up Tangi. I told her, 'Look, I've just talked to Wiremu and this is what he said'. And I relayed his description of his experience. I was interested to note that Tangi straight away concluded that Wiremu had experienced the same negative entity that she had. Even though he was 600 miles away at the time, she was sure he had seen the same thing. Tangi's response was, 'You know what? This is so reassuring. It means I'm not crazy'. She said, 'If Wiremu has experienced this thing, that confirms it's a

spiritual thing and I feel more confident that I can manage it'. And so the confidence that she gained from Wiremu's response was considerable.

Diagnosis and making sense of Tangi's experience

If I reflect on Tangi's situation from my point of view as a psychiatrist, she was experiencing the voices and visions of the screeching lady, but she didn't have delusions (fixed false beliefs) or formal thought disorder (severely disorganised thinking). She did meet the criteria for major depression - with very low mood and other symptoms which matched that diagnosis. Interestingly for me as a psychiatrist, Wiremu has talked about depression making people vulnerable to negative spiritual things.

The onset of her negative voice experiences preceded the deterioration in her mood. Overall, my conclusion as a psychiatrist was that she did not meet the criteria for a major psychotic disorder. I also considered whether dissociation could explain her experience and the possible role of trauma. There were no neurological findings that suggested a brain problem like epilepsy or something like that. And again, in consulting with Wiremu, he was able to support, through his own experience, the fact that this could be a cultural or spiritual problem. Lewis, I'm interested in your thoughts about this kind of diagnostic process, which you're familiar with as well, and the question of trying to distinguish one and the other?

Lewis Mehl-Madrona: My sense is that we don't have to do one or the other. Because we are physical beings and things are mediated through matter, we can have both an Indigenous understanding of a process, and a biomedical understanding at the same time. I've become increasingly disenchanted with the DSM, the diagnostic codes that psychiatry uses because I don't think they match people's experiences. And I think that we could, from a biomedical perspective, talk about the distress that Tangi had from her abortion and her alienation from her family. And the weakening of her family ties. And then when you bring in the spirit of cannabis, you know, it invites its own beings to join in the fray. And so I think we can be simultaneously Indigenous and biomedical. I think both views are important. This is two-eyed seeing. It's different ways of seeing what's going on.

Wiremu NiaNia: Yes, I endorse two-eyed seeing because when we talk about one single eye, we talk about whatu, which is an eye, and can also be a stone or a seed. That's one eye. When you talk about kanohi, that word refers to eye, but also it is a word for the whole face. Kanohi ki te kanohi means face to face. So you're looking at something with both eyes. I like the idea of two-eyed seeing because you're using all of your senses. That's the entry point for being able to taste, to sense, to smell, to hear, to see, and to touch. So you're also accessing the ability to see what can't be seen using our physical eyes. Also for me, two eyed seeing means collaboration; clinical and cultural, spiritual and physical, working in partnership. I like it.

Allister Bush: I'm grateful for this opportunity and I've really enjoyed our conversation, which has looked at this question of how can we think about what may be a spiritual problem, but may look like a psychiatric problem, when we're meeting with a young person who may be Indigenous, and with their family. How can we create more space to look at these different perspectives? How can we open up space? If I'm a Western practitioner, how can I support the opening up of space for the family to reflect on it, even if I don't have all the knowledge of what their worldview might be?

I really appreciate both your contribution, Lewis, and Wiremu as well. I'm just wanting to draw people's attention to Lewis as an author and all the wonderful books that he's written. And here's one of them, 'Healing the mind through the power of story'⁶. There are some beautiful stories in this book about what effectively is a two-eyed seeing approach, talking about psychiatry, but also talking about other Indigenous viewpoints.

At the end of this article we make reference to two of Lewis's books and two books that Wiremu and I and our colleague David Epston have written on our collaboration between Maori healing and psychiatry^{3,5,6,7}. A detailed account of Jake's story is featured in a chapter in our second book³. Our first book includes the story of George and the story of Tangi in much more detail⁵. In particular, this book includes stories from these young people's perspectives and what they thought about meeting with Wiremu. They describe what they thought about the interventions that came about through Māori healing, and what they thought about psychiatry and cultural healing working together. It

was Tangi who painted the illustration on the front of the book in response to a suggestion from Wiremu⁵. And so Wiremu, would you be okay just to explain this?

Wiremu NiaNia: The story of this painting is the story of Hinenuitepō. To us she is the goddess of death. She's the keeper of Hades or where dead people go. However, she started off as Hinetītama, which in our creation stories was a young woman, a dawn maiden who was very troubled by events in her life, so much so that she felt deeply traumatised and became very depressed. And the story goes that she descended into the underworld and became Hinenuitepō, the goddess of darkness and death.

When I first met with Tangi, who spoke earlier in our talk, I told her about the story of Hinenuitepō. After I relayed that story, Tangi became excited and told me that Hinenuitepō had been the subject of her artworks for some months. It was then that I realised that she was an artist. So, I spoke to her and suggested she might consider painting Hinenuitepō, but how about bringing her back into the light so that there's light at the end of the darkness. And so the painting on the cover of our book is the painting she created following that conversation. We were very grateful to Tangi for allowing us to use it.

[Please see an image of Tangi's painting on the next page. It is entitled, 'Ki te ao marama'- which means, 'Into the world of light'. It depicts Hinenuitepō (bottom right) and Hinetītama (top left).]



There's a lot more to be said about this, but our time is up. This was really, really interesting. I really enjoyed hearing your thoughts, Lewis, and of course, Allister, you and I work together all the time. But thank you very much for giving us this platform to be able to talk about two eyed seeing from all our perspectives.

We will end our talk with this karakia. It talks about all the things that we spoke about today, all the Indigenous knowledge, all of the clinical knowledge, everything, bringing it together, that we would give it energy, that we would give it light so that people can see what is valuable coming from it. Binding those things together and what is good for one will be good for the rest of us. I want to give it to you, Allister, to finish it. I think it's fitting that you should do it, as a tauira of the karakia, as a student of the karakia. So I'll give it to you and you can finish us off with karakia, okay?

Allister Bush: Kia ora matua, as you request. So this is the karakia that Wiremu has just explained:

Pou hihiri pou rarama

Tiaho i roto mārama i roto

Tenei te pou ko te pou ka eke

Nā te pou o tenei karakia

Ka mā te ariki, ka mā te tauira

Kia puta ki te whai ao, ki te ao mārama

Hui te marama, hui te oranga,

Haumi e hui e tāiki e!

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