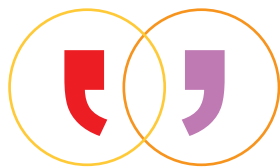




Talking about **COVID-19 vaccination** with whānau Māori



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Talking about COVID-19 vaccination with whānau Māori

a communication tip sheet



We want our whānau and our people to be well, to have access to good quality information and to experience oranga motuhake. For health professionals and advocates in this space, vaccination is a central part of what it means for our people to be healthy and protected. Having productive, healthy and effective conversations about COVID-19 vaccinations will help us realise this vision for our people.

Who is this for

This is a tool to assist people and organisations who are leading discussions about the COVID-19 vaccination with their own iwi, hapū, and Māori communities.

What is it about

We explored the ways people in online Māori communities are thinking, reasoning and talking about COVID-19 vaccination,¹ and researched effective vaccination narratives.² From the findings of this research we compiled a set of narratives, strategies and techniques that advocates could consider using in communications (EMBRACE), and some to consider avoiding (AVOID).

How should it be used

Use this tool where it may be helpful in developing your own communications. It is intended to:

1. help you sideline deeply embedded vaccine denial narratives and false information about COVID-19 vaccinations.
2. assist you in strengthening and amplifying the supportive, mana-enhancing counter-narratives being drawn on by our people about the COVID-19 vaccination.

¹ Understanding the narratives about COVID-19 vaccination: exploring online conversations among Māori communities.

² [How to Talk About COVID-19 Vaccinations: Building Trust in Vaccination](#)



Insight: Addressing barriers to vaccination for whānau Māori

This tip sheet provides advice on how to talk with Māori communities about the importance of COVID-19 vaccination. As we explain, narratives are critical to how people think about and act in relation to vaccination. However, we must first acknowledge that Māori face systemic barriers to vaccination; these must be addressed also.

We suggest the following actions, including advice on what information to provide. These are drawn from our COVID-19 vaccination messaging guide pp.13– 17³, more detail can be found there.

1. Provide it: make access to vaccinations easy

Our advocates are acutely aware that our health system creates barriers to access vaccination for our people. We can help address this by:

- ➔ Providing vaccinations everywhere all the time in ways that work for whānau. Taking vaccinations to the people.
- ➔ Talking about vaccinations as an 'opt-out' rather than an opt-in action to help normalise them as the default.
- ➔ Providing specific details about where/how whānau can be vaccinated in an environment familiar to us as Māori and by someone we trust.
- ➔ Run people through the specific steps involved when getting vaccinated, including that it is free.
- ➔ Remind our people, if they have questions about the vaccine, where they can access trusted information and that they can always have a kōrero with a trusted health professional.

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³ 'How to Talk About COVID-19 Vaccinations' pp.13– 17.

2. Co-develop it: it's about building trust

Similarly, we know that community-led vaccination campaigns are more effective at increasing vaccination rates than mainstream, one-size-fits-all campaigns. The following are some recommendations for mainstream and government providers to fulfill their responsibility to provide trusted information to Māori communities in a way that is relevant to our people:

- Co-develop communications campaigns and approaches with clear directive from community leaders.
 - » This needs to include providing the support needed for communities to co-develop campaigns and approaches.
 - » This could look like giving resources directly to community leaders to create and deliver communications for their communities. This will require you to share critical scientific knowledge in ways that are useful to those leaders and health advocates and enable them to take the lead on communications within their communities.





Insight. What are narratives?

Narratives are patterns across our communications (discourse) that tie together different stories and convey similar ideas, understandings and meaning. Narratives provide common ways of organising and making meaning and sense of the world across the different contexts in which we communicate.

For example, in health there is a narrative we hear frequently about how health is made called the health individualism narrative. In this narrative a person is seen to struggle with poor health because they made bad choices and/or were lazy, while a healthy person has worked hard to create their own health through their good choices. Many different stories in our media and entertainment, about different individuals in different situations, reflect this narrative by using common terms, structures and language.

In regards to COVID-19 vaccination, this individualism narrative is seen in stories in which a person is shown to eat well, exercise, avoid “toxins” and create a “natural immunity” to illness. Health individualism is a dominant and unhelpful narrative that doesn't reflect our best knowledge and understanding of how health is made through our social structures, systems and conditions including protective systems like vaccination.



Insight. Why do narratives matter for supporting COVID-19 Vaccinations?

Narratives are important because they shape how we think about and engage with our social world, including how we interpret evidence and research (how narratives influence our mindsets).

Mindsets are patterns of thinking about the world. They are deep, ingrained, and often taken for granted. Mindsets help us make sense of our circumstances, experiences, and information we receive. They shape what we see as normal, how we view problems in the way the world works, and what we think about the way our society is structured.

Mindsets are activated through our communications (narratives and stories) and our social influences. Mindsets influence how we construct society, how it works and the changes we are willing to make to that. Mindsets can be shifted over time using the same influences that shape them: narratives and stories.

“Narrative” refers to patterns in discourse and “mindsets” refers to patterns in thinking.

Different narratives about COVID-19 and vaccinations shape and reflect how people act and think about vaccinations, willingness to engage with good information, and ability to reject false or unhelpful information.

1

Narratives we found reflect anti-vaccination narratives, and narratives that bring to the surface unhelpful attitudes towards COVID-19 vaccination:

Vaccination as a tool of colonisation. The vaccine is unsafe and experimental. It is used to experiment on Māori.



This sounds and looks like:

→ *“Our people need to wake up, you are all being used as guinea pigs.”*

Vaccine rejection and denial as a form of individual self-determination. Tino rangatiratanga and sovereignty.



This sounds and looks like:

→ *“Exercise your rights as tangata whenua, we all have a choice.”*

Vaccine development was too fast, and too much is unknown. There is too much concern relating to the speed of development of the reputation of those developing it to accept the vaccine as safe for our whānau.



This sounds and looks like:

→ *“How do you know the vaccine is safe when proper clinical trials haven’t even been done?”*

A corrupted system that harms us. Mistrust of the intentions of those working in the health system, and examples of how the system has failed to protect Māori in the past.



This sounds and looks like:

- *“Doctors are just working for pharmaceutical companies.”*
- *“The Government lets fast food companies and liquor stores target our communities. Why would they protect us now?”*



Natural remedies and rongoa Māori as best. Vaccine as poison. Natural medicine, especially our rongoā, is more effective than the ‘man-made’ and ‘unnatural’ vaccine.



This sounds and looks like:

- *“That’s not rongoā, it’s poison.”*
- *“I’d like to think our tīpuna would want us to use medicine naturally given to us.”*

Misunderstanding of COVID-19 risks for Māori. Māori are no more at risk than anyone else. More risk in ‘real’ injection than ‘invisible’ virus.



This sounds and looks like:

- *“You’re saying we’re sicker than everyone else so we need it first? I’m not sick, I don’t need it.”*

2

Narratives to avoid

To avoid amplifying and bringing to the surface these unhelpful narratives we recommend avoiding these default communications strategies

AVOID these narrative strategies, words and phrases

AVOID

Leading your communications by mythbusting and negating unhelpful thinking and reasoning especially around safety. Correcting unhelpful narratives amplifies the unhelpful thinking.



This sounds and looks like:

"You may have heard that the vaccine is unsafe."

AVOID

Leading narratives with safety data or other facts. Research shows it is not reassuring for people with hesitations.



This sounds and looks like:

"Studies show that the Pfizer vaccine is 95% effective in protecting against COVID-19."

AVOID

Framing the vaccination discussion through personal and individual choice language.

The choice narrative is a key narrative used by those who deny vaccination and could surface vaccine denial reasoning, while suppressing thinking about how collective immunity protects us all. Not leading with choice doesn't mean people don't have a choice, it is simply not what we should lead conversations with.



This sounds and looks like:

"You and your whānau have the ability to choose whether or not to be vaccinated."

AVOID

Implying something dreadful will happen if we aren't vaccinated. We know that when people fear for their security they don't have the capacity to think deeply and collectively about an issue.



This sounds and looks like:

"Think about where we might have been without safety measures like last year's lockdown."

3

Narratives we found reflecting helpful attitudes towards COVID-19 vaccination:

Our people and values are reflected in the vaccination system. Our good experiences of care and manaaki from our health professionals are reasons to trust in vaccination.



This sounds and looks like:

→ *“Thank you Ngāti Hine Health Trust, we were really impressed by the manaakitanga and care we received.”*

False information divides us and undermines our health decisions. We need to be able to access trusted information. Some people are spreading imported and harmful information which is not representative of our people.



This sounds and looks like:

- *“There is so much misinformation making our whānau afraid because of what they see on Facebook.”*
- *“Thank you to our Māori doctors, we need to hear about the vaccine from people we know and trust.”*

Vaccination for people with the greatest need. Protecting our taonga, like our kaumātua and our immunocompromised people, means getting vaccinated.



This sounds and looks like:

→ *“It is important that our kaumātua get vaccinated first, they are our taonga.”*

Vaccination as a tool Māori communities can use to be well. We can use medicine, like vaccines, to help treat certain medical conditions.



This sounds and looks like:

→ *“Times of pandemic are a good example of when we can use medicine like vaccines to treat ourselves and our whānau.”*



Vaccination as a way of protecting our people and whakapapa. Vaccinations can help us to live long lives, and pass on intergenerational knowledge to our mokopuna.



This sounds and looks like:

→ *"I want to be here for my whānau, mokopuna, and not pass the virus on to our kaumātua."*

Adaptation and leadership of our tīpuna. We can adapt to challenges like our tīpuna did, and our people are leading the vaccine rollout in our communities.



This sounds and looks like:

→ *"Our tīpuna adapted to challenges and so can we."*



4

Narratives to embrace

To strengthen and amplify the supportive, mana-enhancing counter-narratives being drawn on by our people about the COVID-19 vaccination we suggest embracing the following:

 **EMBRACE** this strategy from the guide

 **EMBRACE**

Vaccination as a tool of empowerment we can use to help us stay well.

We know that those who spread false information claim that our agency lies in choosing not to vaccinate. Instead we need to reflect the idea that the vaccine is a tool that our people can use to take care of ourselves and communities.



This sounds and looks like:

“Getting a vaccination is one more powerful tool you can use to take care of your loved ones, whānau, communities and yourself during COVID-19.”

“Getting vaccinated is a normal part of looking after ourselves, so we can look after our whānau and communities.”

 **EMBRACE**

Access to good information and vaccinations through oranga motuhake.

We suggest talking about what is important for our people and whānau, like leading our own health journeys and making informed decisions, as reasons to overcome false information and ensure we all have the good information we need about being vaccinated against COVID-19.



This sounds and looks like:

“Our people deserve to lead their own hauora journey. Those who spread false information and concern undermine our oranga motuhake and access to the trusted information we need to make informed decisions for ourselves and our whānau.”

 **EMBRACE**

The collective benefits of immunity as reasons why we get vaccinated.

Research shows that people are far more motivated to think in helpful and collective ways when reminded of shared values, such as caring for those we love and our communities.



This sounds and looks like:

“Getting vaccinated protects us, our whānau, communities, and the people I care about from COVID-19.”

“To look after our people and our whakapapa means we need to ensure that those who need protecting in our communities – our kaumātua, our babies and our whānau with health conditions – are cared for and shielded against COVID-19.”

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