

February 1973

Maori Attitudes Toward Abortion

L. K. Gluckman

Follow this and additional works at: <http://epublications.marquette.edu/lnq>

Recommended Citation

Gluckman, L. K. (1973) "Maori Attitudes Toward Abortion," *The Linacre Quarterly*: Vol. 40: No. 1, Article 8.
Available at: <http://epublications.marquette.edu/lnq/vol40/iss1/8>

Maori Attitudes Toward Abortion

L. K. Gluckman, M.D.



Dr. L. K. Gluckman, a prominent psychiatrist in private practice, is on the staff of Auckland Hospital. He has studied the culture and medical history of the Maoris, the indigenous people of New Zealand, and also of the Polynesian races occupying the various archipelagos that extend northward between New Zealand and Hawaii. They share a common culture but, lacking a written history, are unaware of their origins. Archeologists and philologists are gradually elucidating the mystery.

No physician in New Zealand has more insight into and knowledge of maoritanga (culture) than Dr. Gluckman. This sensitivity, combined with his Judaic philosophy, makes him a courageous defender of the rights of the unborn child.

“There is no word in the Maori language for abortion and this reflects the attitudes of all Maoris to abortion. . . . Abortion is repugnant to the Maori.”

*(Mrs. M. Te Kawa,
Maori Women's Wel-
fare League Confer-
ence, 1970)*

Different cultures have different value systems that may appear ludicrous, illogical and contradictory to those outside the particular culture. In western societies the destruction of the fetus is legitimate, but to destroy the fetus once the umbilical cord is severed is considered repugnant. The general rule is that the greater the time from conception the less acceptable destruction of the products of conception becomes. Yet in the pre-European Maori world, the reverse situation prevailed. Infanticide was licit and fairly widespread; destruction of the fetus was unknown.

Those in favor of abortion often maintain that the fetus is not human and that it either cannot perceive or cannot integrate perception into anything meaningful. For

them, the fetus is an object with potential rather than actual life. On theological levels, abortion supporters hold that the fetus may be aborted until it has a soul and is visualized as a miniature human being. It would be rare for even the most ardent pro-abortionist to condone murder. Since murder implies the destruction of a human being, the argument must be formulated to prove that the fetus to be aborted is not a human being.

Paradoxically, the New Zealand Polynesian (Maori) tradition includes the reverse view that the fetus, from the time of diagnosis of pregnancy, has indeed an advanced soul or spirit and for this reason must not be destroyed. A pre-Judeo-Christian metaphysical system that could not be supported by either theological, philosophical or biological evidence has served at least to allow many a fetus to survive until delivery.

Infanticide Practiced

Another paradox is that the Maori practiced infanticide on the fallacious premise that once the child was born, its vital spirit had some minimal experience of life and had much less objection to being destroyed. The usual method of infanticide was adduction of the mother's thighs at birth with compression of the skull.

The main reason for infanticide was the desire to limit population because of protein shortage in New Zealand. In a male-oriented society, infanticide was more widely practiced on the female, particularly

on girls of the slave class who, unlike male slaves, had little chance of emancipation. Infanticide became widespread in the early 19th century as a result of miscegenation with Europeans. The products of such unions were judged too impure to live — the word "Maori" means "pure." The Europeans also introduced the triple evils of alcohol, venereal disease and tuberculosis, leading to increased sterility and the reduction of both the previous high rate of gestation and the need for infanticide.

Maori society was cruel and the unborn child was not spared for any ethical or humanitarian motives but solely because it was believed that the spirit of the destroyed fetus was dangerous to both the individual and the extended family of the one who destroyed it. Yet infanticide has certain "advantages" over abortion: infanticide is safer for the mother than surgical abortion and the child has at least been considered prior to destruction.

If it escaped infanticide, a child's chances for survival and rearing were high. The pre-European Maori society was patriarchal and families were extended; a child might be reared by any member of this group. The child was considered the property of the tribe, not the parents, and, with the exception of slave girls, was regarded as a very important person.

The pre-European Maori lived in the stone age and had not evolved a written speech. His learning was

passed on by oral instruction and hence his teaching shows much variation. There are few records by early physicians and missionaries. However, the attitudes of the early Maori to induced abortion can be surmised from studies among elderly Maori intellectuals, "tohungas," receptacles of esoteric or secret knowledge. It is rare to encounter any Maori intellectual or tohunga who has admitted in terms of his personal belief and traditions of his family that his "tupuna" or ancestors knew of abortion. Most elderly Maoris, whether male or female, totally deny the existence of abortion in ancient Maoridom.

Abortion Was Sinful

Hare Hongi,¹ an authority on the subject, wrote that abortion was sinful to the Maori; it was forbidden by very old and sacred legend; there could never be justification of the destruction of intrauterine life. My interpretation is that such inner life is known as "manawa ora."

Originally there were some 70 gods, all male, but no female principle. The gods made a model of woman out of the earth and blew the vital spark, the breath of life, the manawa ora, into her. This god-given being is not to be destroyed by man. Once it possesses the conceptus, the vital spark is called the "kahu kahu" or "atau kahukahu" or "atau poke." The kahu kahu has the greatest and most intense desire to survive until birth;

it must be born in the natural way and until this happens it has almost, but not quite, lived.

Should a kahu kahu be destroyed in utero either deliberately or by accident, it becomes an evil spirit of the greatest possible malevolence. Its malevolence is determined by the fact that it resents never having known human existence. It seeks to punish those responsible for its destruction and can avenge itself by inflicting pain, disease, death and ill fortune. It does not necessarily attack the person responsible for the destruction but the weakest member of the extended family and may not make its attack for years. Belief in such a value system is a very strong deterrent against abortion.

The pre-European Maori did not distinguish between menstrual discharge and the products of conception. The common occurrence of menstrual clots reinforced the total belief, and the large vocabulary for these reflects their significance to the culture. Such discharges were buried deeply, since it was believed that an animal or insect that consumed or touched them would be entered by the kahu kahu to the detriment of the society, especially the total family of the person who had improperly disposed of the products. The ancient, somewhat secret, term for abortion is "mate roto," meaning "death from within." This refers to spontaneous fetal death, although this was virtually believed to be of supernatural origin.

Maori Gods

Maori value systems depend on three main factors, "tapu," "manu" and "makutu." Tapu corresponds to the Judaic "thou shalt not" commandment, and there were innumerable tapus as terms of speech, behavior, conduct, places, possession and belief. Of the 70 Maori gods, 69 were benevolent, protecting man from the 70th, the evil Whiro. He was continually waiting to destroy both the body and soul of man and had a large hoard of minions to assist him. Should a tapu be broken willingly or otherwise, the benevolent deities withdraw all protection, leaving the individual spiritually dead and totally defenceless against Whiro. The Maori attributed all sickness except that due to war injury and age to this mechanism. Hence there could be no system of medical practice. Treated as pariahs, the sick were expelled from the community and rapidly died of exhaustion, starvation, secondary infection or loss of the will to live. Such illnesses are collectively called "makutu." Manu, the power or energy that causes makutu, may be exercised by the gods directly or indirectly through a human agent or witch doctor.

Gluckman² has reviewed the techniques used in inducing abortion by the Maori. These usually consisted of breaking the tapu unwittingly, such as eating a plant grown on a sacred spot or eating an animal trapped in an area where the products of conception had been carelessly discarded. The term

used here is "taiki," revenge by the spirit on the abortus. Amniotomy was probably used on rare occasions, most likely as a means to induce labor but conceivably as a way to terminate pregnancy.

The modern Maori woman still has strong links with her past. Most modern Maoris believe there is no terminology for abortion, and it is common in clinical psychiatry to encounter Maori women who attribute spontaneous and undesired abortion to the breaking of tapu. Conversion to Christianity should change such attitudes but often it has failed to do so. I have known adolescent girls³ desecrate a tapu as an act of defiance to show they have thrown away the fetters of superstition. Subsequent undesired miscarriage in such girls, both in and out of marriage, is attributed to retributive punishment for such defiance. This is not to say that younger Maori women, usually the products of urban as opposed to rural upbringing, do not attempt abortion with alcoholic beverages, hot baths, purgatives, exercises and drugs. All the medications and herbs used are post-European introductions.

Psychiatric Dangers

In my experience,⁴ the Maori woman rarely seeks termination of pregnancy. It may be very dangerous on psychiatric grounds to terminate such a pregnancy. Anxieties and guilts subsequent to termination result in a resurrection of the traditional concepts especially if there is subsequent sterility,

stillbirth, dyspareunia or menstrual disorder. Should a later pregnancy in the patient or a member of the extended family lead to a deformed fetus, this will almost certainly be considered retributive makutu.

Post-abortal reactions in the Maori are not easy to uncover. It is a violation of the tapu system to discuss these issues with anyone unless he has great personal mana and they cannot be discussed with a Maori of another tribe. The view is that either the white doctor would not understand or he would know the case was hopeless and try not to help. To discuss these issues with an improper person was to invite further makutu.

Sometimes Maori women are pressured into induced abortion on spurious or dubious grounds by European or assimilated part-Maori husbands. Such women may and do develop major abortal reactions. In western terminology, these would be considered either psychogenic psychoses or reactive neuroses. Appropriate treatment is rehabilitation, purging of guilts and anxieties by the exercise of personal mana in Maori style. Not too rarely the best advice is to conceive again, a popular and successful prescription. Pharmacological agents are of little use in the management of makutu.

While there is much in makutu that is illogical to the western physician, the subject is totally logical to the Maori. What the patient re-

futes while in good health will often not be refuted under subsequent adverse circumstances. The basic principle is simple: before advising termination in a Maori, it is well to consider the patient and her family within the totality of her past and present value systems. If there is the slightest doubt, abortion should not be advised. There is more than enough evidence on the clinical level to suggest that until recent cultural beliefs have been totally obliterated by modern education, induced abortion is potentially hazardous to the Maori patient and her extended family and is not to be lightly or casually prescribed.

It is paradoxical that a value system based on a superstitious pantheistic stone age economy protects the fetus to a far greater extent than the value systems of many atomic age monotheistic societies.

REFERENCES:

1. *Tikao Talks: Traditions and Tales Told by Teone Taare Tikao to Herris Beattie*. A. H. and A. W. Reed, Dunedin, 1939.
2. Gluckman, L. K. "Abortion in the Maori in Historical Perspective." *New Zealand Medical Journal* 74: 323, 1972.
3. Gluckman, L. K. "Aspects of the Background of Maori Children." *British Journal of Medical Psychology* 39: 319, 1966.
4. Gluckman, L. K. "Therapeutic Abortion in the Maori." *New Zealand Medical Journal* 75: 22, 1972.