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Māori Spiritual Beliefs and Attitudes Towards Organ Donation

Greg LewisSolicitor, Health Legal, Ministry of Health

Neil Pickering
Bioethics Centre, University of Otago

Abstract

Organ transplantation is widely agreed to be beneficial to health. Many transplantations involve donation from the deceased. In Aotearoa/New Zealand, Māori both donate and receive proportionally fewer organs than non-Māori. This paper seeks illumination of this fact in unique Māori spiritual beliefs. These spiritual beliefs are not held by all Māori, and their role in an individual's life may vary, nonetheless they constitute a living tradition. Because cadaveric donation involves removal of organs from the dead person as soon after death as possible, considerations arise about customary rules and observances and the movement between the realm of the living and the dead. This may raise concerns for donors, recipients, and their respective whanau (extended family). In some cases, these concerns may form a consideration against donating posthumously.

Introduction

Organ transplantation has become a widely accepted practice, the health benefits of which are generally undisputed. Transplantation of hearts and kidneys, for example, can save and/or greatly improve the quality of lives of organ recipients (Jassal *et al.*, 2003). Many of these transplantations involve removal of organs from deceased donors (cadaveric donation).

In Aotearoa/New Zealand, Māori both donate and receive proportionately fewer organs than non-Māori (Te Puni Kōkiri, 1999a, p.16). This paper seeks illumination of this fact in unique Maori spiritual beliefs. Because cadaveric donation involves removal of organs from the dead person as soon after death as possible, considerations about breaking tapu arise.

Tapu is a fabric of customary rules and observances that mediates the link between the realm of the living and the realm of the dead (Best, 1982, pp15-31). It is a fabric that enfolds and controls the seen and the unseen, to ensure that there is an appropriate relationship between the realms. There are a number of ways in which tapu may be broken in both donating

and receiving a cadaver organ, adversely affecting both individuals and whanau (extended family). Breaking tapu may have adverse consequences for individuals and whanau (Tangaroa, 1988, p.5).

This paper reports upon research undertaken by Lewis which was supported by a Health Research Council scholarship (2001, *Maori attitudes towards death and dying regarding posthumous reproduction and organ donation*). This research involved a literature review which aimed to identify potential Māori spiritual concerns surrounding cadaveric organ donation.

Background: Patterns of Organ Donation and Transplantation

Figures from the Australia New Zealand Organ Donation Registry (ANZOD) *Annual Report* (2002) show that in Aotearoa/New Zealand only 9.3 people per million are organ donors. This compares with 13.1 for the United Kingdom, 9.4 for Australia, 17.8 for France, 32.3 for Spain, and 22.3 for the United States. What is of particular interest in the ANZOD

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statistics relating to New Zealand is that Māori appear to be less likely to be organ donors (and also organ recipients) than their non Māori counterparts. The *Annual Report* records that between 1998 and 2001 there were 115 organ donors in New Zealand, of which only 8 were Māori. Considering statistics from the 2001 census that one in seven people identify as Māori, this means that Māori are under represented per capita, in donation statistics. Additionally, Māori are more likely to need organ donation. For example the rate of Māori dying from kidney related disease is four times that of non-Māori (Te Puni Kōkiri, 1999a, p.16; Te Puni Kōkiri, 1999b, p.14).

There are a number of reasons that may prevent an individual from becoming an organ donor after death. Many people simply fail to consider organ donation as an option while alive, others may have failed to notify their family or relatives of their wishes or to indicate it on their driver's license. Some may fear the idea of their body being disturbed after their death. Relatives of a potential donor likewise may not have given much thought to donation until they are faced with the prospect after having lost a loved one. At these times of intense grief, relatives may not consider donation of organs because they are in a state of mourning. Hospital staff may find the idea of suggesting donation at such a time inappropriate.

However, these reasons for non-donation cannot be attributed only to Māori and so do not help throw much light on the difference between Māori and non-Māori donation rates.

Identifying a Possible Area of Illumination: Māori Spiritual Considerations

One possible explanation for the discrepancy between Māori and non Māori organ donation rates are spiritual beliefs of Māori, and in particular those that come into play at the time of death and dying. These do differentiate between Māori and non-Māori, as they are unique to the Māori tradition, and lack clear counterparts in non-Māori beliefs. Moreover, from a spiritual point of view, traditional Māori beliefs offer fundamental reasons for not donating organs. These include the adverse impact that organ donation may have upon donors and their whanau, and the adverse impact that receiving a donated organ may have upon recipients and their whanau.

In the following section, some of the specific sources of these adverse impacts will be described. It should be understood that these specifics are at once analytically separable, and yet are holistically linked. The primary link is provided by the fact that cadaveric organ donation is particularly close to the relationship between the living and the dead, the physical and the spiritual, the individual and the whanau. For example, in traditional Māori spiritual belief, not to bury an individual whole would be seen as breaking the cycle of life back to Papa-tuanuku, the earth mother (Te Puni Kōkiri, 1999a, p.13; Te Puni Kōkiri, 1999b, p.11). All life is derived from the earth, and to return an individual to the earth with organs missing introduces an incompleteness, leaving an unfulfilled process from beginning to end, or birth to death. These cycles and relationships involving life and death are all tapu.

Prior to setting out in a little more detail these potential sources of spiritual harm, it is important to note a number of things. No claim is being made here that the beliefs of Māori are uniform or that these traditional beliefs are dominant among Māori at present. Nor is it being claimed that these beliefs determine the behaviour of individual Māori. Apart from the fact that Māori have both donated and received organs (2002 Annual Report) it is well accepted that traditional Maori beliefs vary among iwi (Te Puni Kōkiri, 1999a, p.2; Te Puni Kōkiri, 1999b, p.2), and today many Māori have become detached from the traditional concepts referred to here (Durie, 1994, p.13). Moreover, it is generally a significant error to suppose that groups are homogenous, or that beliefs are static. This point is made eloquently and firmly by Jing-Bao Nie in an earlier edition of this journal in respect of Chinese views on abortion (Nie, 2002). For individuals, there may be aspects of their spiritual beliefs which enjoin them to donate, and spiritual considerations may in any case not be the only influence upon decision making.

These are significant caveats; nonetheless, traditional Māori beliefs have powerful historical roots, and are a living aspect of New Zealand culture.

Specific Considerations Arising in the Light of Māori Spiritual Beliefs

Considerations Related to the Individual Deceased Donor In traditional Māori belief, at death the wairua (loosely translated as 'spirit') begins the process of leaving the body. The wairua of a deceased donor may be affected by actions taken after death, for example organ donation. There may be two explanations for this. During human life the body was the home of the wairua, and as such deserves respect.

Metaphorically disrespect to the body might be said to be like disrespect to a place made holy by the past presence of a deity or saint. Taking organs from a cadaver may be construed as a failure to show the respect due to the body, as it is in effect 'stripped' or harvested of its organs. It may also be seen as putting the individual parts of the body before the whole.

The wairua may also be affected by organ explantation in a second way. Traditional Māori belief is that death is not an instantaneous occurrence, but rather a progression from life to full death which does not cease at the point of physical death (however that might be scientifically established). An analogy might be the development of the sense of self in a young child. Children are born without full awareness of their surroundings, and without full motor coordination. This all comes with time. Much is the same in the Māori concept of death; the wairua must undergo a transformation of understanding and go through a process of becoming part of the next world. This is reflected in the Māori Tangihanga, or funeral ceremonies, that often last for three or more days. The wairua is believed to leave the body upon death, but to come and go from the corpse as it slowly ventures out to explore the newly discovered spiritual realm (Rameka and Te Pania, 1990). A wehe or tuku ceremony may be said to quicken the departure of the wairua (Smith, 1974, p.13). To remove organs from a corpse while this process is occurring would be seen to be very disrespectful to the wairua. An analogy would be that of stripping a house of its furniture while the occupant was still living inside. This may impede the wairua's preparation for its journey, and in particular the journey to Te Pō, or the final resting place to which, traditional belief has it, all wairua must travel after death.

Another possible source of harm to the wairua is through the deceased individual's hau, which might be imprinted upon the donated organ. The hau is sometimes rendered 'vital spirit' or 'vital principle', and is analogous to a mixture of personality and aura (Best, 1982, p.50). It can be said to be a representation of self-presence. It is distinguishable from the mauri (spark of life). It ceases to be generated at death, but in life exists both within and around the body, so that a person is able to leave their hau in footprints, or on clothing they have come into contact with.

The presence of the hau in parts of the body is the reason traditional Māori protected anything derived from the body. Items such as fingernails, placenta or hair cuttings are still

buried today by some Māori in the belief that they contain the hau element (Best, pp.50-53). The belief is that these items could serve as a channel to harm those from whom they are derived (*ibid*.). For example, they could be used in makutu or black magic against the living person. The fear in the case of organ donation would be that a donated organ could fall into the wrong hands and be used in some way against the individual after his or her death. Concerns related to the removal of organs for reasons other than transplantation have also been voiced. For example, a change to the *Human Tissue Act 1964* has been recommended by the Māori Reference Group to allow replacement of organs or limbs removed during a post-mortem (Te Puni Kōkiri, 1999b, p.5).

Considerations Related to the Deceased Donor's Whanau All of the reasons related to deceased donors are also considerations for their whanau. Traditional Māori society was holistic, and what affected one was deemed to affect the whole. Consideration for the welfare of the whanau and iwi (tribe) was therefore a significant element in decision making. For example, ramifications of organ donation for the individual donor's wairua become implications for the whanau as a whole. If the wairua becomes unsettled, or is unable to prepare for its journey to Te Pō, and, as a result remains with the whanau, this could have unfortunate consequences for the whanau. While some wairua may remain as atua, or guardians to protect the whanau, others may engage in mischievous trickery, angry at not being able to go on their spiritual journey (Irwin, 1984, p.39).

Likewise, the individual's body may be seen as not merely his or her own, but rather as the physical manifestation of whakapapa (the ancestral line) (Patterson, 1992, p79). Countless previous generations culminate in the physical body of a person, which is only a link in the chain of whakapapa, extending both into the past and into the future. Not to bury a body whole, or to have parts of it living on outside the body would be disrespectful and have ramifications for the ancestral line. In particular this may be perceived as a severing of the connection of the world (physical and spiritual) existing currently to the past, and between this world and the next. This is a potential source of harm to the whanau as a whole.

Considerations Related to the Recipients and their Whanau In this subsection, we look at considerations that could give rise to a belief that the donation of an organ would impart

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greater harm than benefit. While an organ may bring purely physical health to an individual, it may have detrimental spiritual effects upon the recipient and the recipient's whanau. This could be perceived as undermining the aim of organ donation, which is to help sick individuals.

One concern is that the organ recipient may experience an adverse outcome from the transplant that is due not to any physical, but rather to a spiritual element transplanted with the organ. If the donor were to have been placed under a makutu or curse before death, the makutu may still be present in the transplanted organ. Analogous to a viral infection spreading and causing illness, the makutu could spread from the organ and consume the whole organ recipient, in effect poisoning her or him with the same spiritual element that killed the original donor.

Even without the presence of makutu, there may be spiritual aspects associated with a donated organ. In traditional Māori belief, every live person possesses a mauri (Irwin, 1984, p.21). A mauri is a 'spark of life' or 'living breath' (te hau ora) (Best, 1982, p.46) that is unique to individuals and provides them with the essence of life. Under normal circumstances the mauri is believed to be extinguished upon death. However, organ donation alters the circumstances at death from the normal. While ordinarily a mauri is extinguished at death, if an organ continues to live while the body is deemed 'dead' there may be implications. It is not known how the mauri of a donor, if present in the living organ, might interact with the mauri of the recipient.

Some similar considerations may also apply to the hau of the donor, which may be conceived of as 'imprinted' upon the donated organ, and would thus become mixed with the hau of the recipient.

Whakapapa considerations related to the recipient are also very important. With a 'foreign' organ in the body, recipients are no longer made up of the material only of their tipuna or ancestors. They also possess a foreign element, an unquantifiable, unknown element of an ancestral line that is alien to their own. This issue is likely to be highlighted by the practice of anonymous donation. For some organ recipients this may create a feeling of alienation or isolation from whanau, iwi and tipuna. In possessing spiritual connections with another whanau through a donated organ, an individual's connection with their whanau as a whole may be weakened.

And just as the individual's sense of being part of a whole will diminish, so the sense of the other individuals of the whole of which that individual is a part may also be affected.

The blood line of the whanau might also be perceived as diluted or, perhaps for some, contaminated. This may affect how individuals and wider groupings see organ recipients and their connection to and role within the world. Whakapapa is seen as a defining quality, making an individual who he or she is. It provides a turanga waewae, or a place to stand. Individuals, or whanau are able to know their place in and connection to the world through whakapapa. But an organ from an unknown source introduces an unknown element of whakapapa, making interconnections within the whanau less certain. For the whanau, ancestral lineages of whakapapa are disrupted when one ancestral line is mixed through organ donation with another. Whakapapa would no longer be ascribable only to certain tipuna. Other unknown individuals would now have part of their lineage present in the recipient and, through the recipient, in the family.

Tapu

The underlying spiritual consideration encompassing these many potential sources of harm is tapu. Tapu is the web of observances and rules that overlays and binds this world and the next, ensuring consistency and safety for those who adhere to its rules of conduct and respect its understanding (Irwin, 1984, p.23).

Organ donation tears at the fabric of tapu. To seek to retain the life of an individual by the removal of organs from someone who has died creates an interplay between the living and the dead that may upset the spiritual order. Lineages or whakapapa, and spiritual elements of mauri and hau are intermingled through an unnatural process. The spark of life is transferred by human will, not by divine order. Where tapu is broken the implications are often unknown. Spiritual retribution, manifested in the spirit or physical world could befall donor and/or recipient and affect either party's whanau. It is possible that these are considerations that are for some great enough to outweigh the benefits of either donating or accepting organs.

Living Donation and Organ Transplantation

The foregoing description has restricted itself to aspects of Māori spiritual belief affecting organ donation from deceased donors. Where living donors are concerned, the tapu

connections between the spiritual and the physical world which arise through death are not all, in the same ways, applicable. Nonetheless, a number of the considerations mentioned so far may arise in living donation.

For example, the intermingling of whakapapa and resulting disturbances of ancestral lineages and the ramifications of these for individual and whanau could well result from living donation. However, living donation within a whanau may be more acceptable for some Māori from the spiritual point of view, as the donation is unlikely to be anonymous, and uncertainty about lineage is removed. Donation outside the whanau or iwi may also give rise to fears related to the persistence of the hau (aura) in an organ of a still living individual, just as for a deceased individual.

We have also restricted ourselves to issues relating to donation. However, in considering these, we have looked at the possible disadvantages to recipients. These are relevant to donors because donation has to be perceived as a benevolent act to come into consideration, and anything that tends to imply that it is harmful will work against this. However, anything that might lead to harm to the recipient or the recipient's whanau is obviously a consideration against being an organ receiver. The spiritual issues referred to here may also illuminate the relatively low figures among Māori for receiving organs

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Note

 Throughout this article, English renderings of central Māori concepts should be understood as fairly rough and ready. Some attempt at English renderings, based on accepted translations, is necessary, but as with any set of concepts unique to a tradition, translation can be misleading. Whanau is a good example. Though something of what is meant by this term is present in the English 'extended family', the Māori term can only fully be understood when its relation to other Māori concepts such as 'iwi' (tribe), 'whakapapa' (ancestral lineage) and 'tipuna' (ancestors) is taken into account.

References

2002 Annual Report of the Australian and New Zealand Organ Donation Registry (ANZOD)@http://www.anzdata.org.au/anzod/ANZODReport/2002/2002anzod.pdf, accessed 10th January 2003.

Best, E. (1982). Māori Religion and Mythology Part 2. Wellington: Government Printer.

Durie, M. (1994). Kaupapa Hauora, Māori Health Policies in Te Ara Ahu Whakamua Proceedings of the Māori Health Decade Hui, Wellington: Te Puni Kokiri, Ministry of Māori Development.

Irwin, J. (1984). An Introduction to Māori Religion: Its Character Before European Contact and its Survival in Contemporary Māori and New Zealand Culture. Bedford Park, South Australia: Australian Association for the Study of Religion, South Australian College of Advanced Education.

Jassal, S., Krahn, M., Naglie, G., Zaltzman, J. Roscoe, J. Cole, E. and Redelmeier, D. (2003). Kidney transplantation in the elderly: a decision analysis. *Journal of the American Society of Nephrologists*, January, 14:1, pp.187-196.

Nie, J-B. (2002). Chinese moral perspectives on abortion and foetal life: an historical account. *New Zealand Bioethics Journal*, 3:3, pp.15-31.

Patterson, J (1992). Exploring Māori Values. Palmerston North: Dunmore Press Limited.

Rameka, N. and Te Pania, J. (1990). *Understanding Tangihanga*. Wellington: Trade Union Education Authority, Thames Publications.

Smith, J. (1974). *Tapu Removal in Māori Religion*. Wellington: The Polynesian Society, Memoir 40.

Tangaroa, N. (1988). *Tangihanga*. The New Zealand Amalgamated Engineers Union.

Te Puni Kōkiri (1999a). *Hauora o te Tinana me ōna Tikanga Service Providers*. Wellington: Te Puni Kōkiri, Ministry of Māori Development.

Te Puni Kōkiri (1999b). *Hauora o te Tinana me ōna Tikanga Māori and their Whanau*. Wellington: Te Puni Kōkiri, Ministry of Māori Development.