Kua huri te tai
Kua pari te tai aroha

Research into the health and wellbeing impacts of adverse weather conditions

TE TAIRĀWHITI QUALITATIVE REPORT

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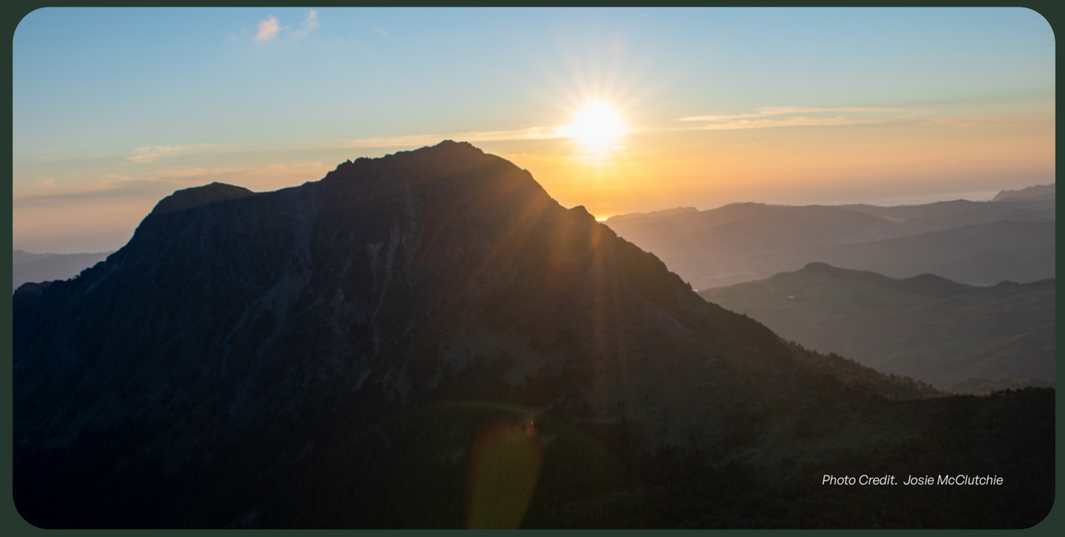

Photo Credit. Josie McClutchie

Mihimihi

E aku nui, e aku rahi, e aku whakatamarahi ki te rangi tēnei te mihi maioha ki a koutou.
Ki a rā tau kua riro i te ringa kaha o aituā, haere, haere, haere atu rā.
Waiho ko te aroha ki a mā tau.
Ki ngā hapori kua koha mai i o koutou wheako whaiaro, i o koutou akoranga, i tō koutou mamae, i tō koutou aroha ki tēnei rangahau,
tēnā rā koutou.
E kore te puna aroha e mimiti mō koutou.
Tā Meri Ngāroto kōrero,
Hutia te rito o te harakeke
Kei hea te kōmako e kō?
Kī mai ki ahau
He aha te mea nui o te ao? Māku e kī atu
He tangata! He tangata! He tangata
Tēnā anō koutou i te taonga nui o te kōrero kia ora te tangata ki tēnei ao

Nā Te Weu, tēnei te mihi.
Kei Tūranganui-a-Kiwa, 31 Māehe 2024.

Tairāwhiti

1. Ngāti Porou East Coast (towns north of Whangara)
2. Gisborne City
3. Gisborne Western Rural (rural communities incl. Manutuke, Te Karaka & Muriwai)

Photo Credit. Josie McClutchie

Executive Summary

TE TAIRĀWHITI

45 INTERVIEWS AND FOCUS GROUPS WITH A TOTAL OF

77

PARTICIPANTS ACROSS TE TAIRĀWHITI

East Coast (Makorori, Ūawa, Tokomaru Bay, Ruatōrea), Gisborne City and Gisborne Western Rural (including rural communities Te Karaka, Whātātūtū, Ormond, and Matawai).

This report includes the findings from the Te Tairāwhiti-specific qualitative research that is part of a larger project examining the health and wellbeing impacts of adverse weather conditions. This study is part of a larger project collaboration between Te Weu Tairāwhiti and Waipapa Taumata Rau, The University of Auckland for Manatū Hauora, The Ministry of Health. The report based on the larger project will be/is available on the The Manatū Hauora, Ministry of Health website. Various members of the Waipapa Taumata Rau team have supported this project in a range of ways, particularly the leadership of Dr George Laking and methodological contributions from Associate Professor Victoria Egli.

The research presented in this report was led and conducted by a local research team consisting of Professor Holly Thorpe, Josie McClutchie, Dayna Chaffey, Haley Maxwell and Hiria Philip-Barbara, with leadership from Manu Caddie. The methodology included interviews and focus groups with 77 participants across the East Coast (Makorori, Ūawa, Tokomaru Bay, Ruatōrea), Gisborne City and Gisborne Western Rural (including rural communities Te Karaka, Whātātūtū, Ormond, and Matawai).

The sample included a wide range of views and perspectives from the community. The project also includes those working in first responder roles, such as Police and Civil Defence, and various health professionals, including mental health providers, medical clinics, iwi health providers, pharmacists, specialist carers, rural health workers and health provider leaders.

While the sample could never be representative of the many different experiences across Te Tairāwhiti, the voices offered herein speak to the varied health and wellbeing impacts of repeated extreme weather events over the past two years.

The key findings are organised into three main sections:

1. COMMUNITY VOICES
2. HEALTH SYSTEMS
3. NON-RELATED HEALTH SYSTEMS

Each section focuses on how repeated adverse weather events (including the heavy rainfalls of March and April 2022, Cyclone Hale January 2023, Cyclone Gabrielle February 2023, and June 2023) impacted community health and wellbeing, and how the health and social systems responded and were affected during and following these events.

The report is intended to be constructive, focusing on lessons learned and how local and national organisations can take these learnings to build more robust and resilient infrastructure in Te Tairāwhiti, and across the country.

TE TAIRĀWHITI

Key Findings

- The community continues to experience widespread mental health effects (i.e., anxiety, sleep disruption, depression) associated with repeated extreme weather events. Rain anxiety and climate fatigue are new phenomena affecting many across the region, without adequate mental health support.
- Māori continue to experience trauma and sadness associated with the loss and destruction to their whenua, awa and moana, and the difficulty of returning to their marae in many parts of the region due to roading.
- Community hubs (i.e., marae, schools, volunteer fire stations) played a critical role in supporting communities' various health and welfare needs during the State of Emergency, and for many weeks after the event, often at their own expense. The research highlights the importance of resourcing and equipping community hubs appropriately for future preparedness.
- Women in various roles across the community (i.e., local government, marae, iwi health providers, school principals, non-profits and social service) demonstrated highly responsive leadership, shaped by their deep community knowledge, relationships, organisational skills, compassion, and empathy. In particular, wāhine Māori leaders (e.g., marae, schools) demonstrated innovative leadership shaped by cultural values of aroha and manaakitanga. Some women leaders of local organisations (particularly local government) faced heightened levels of abuse, impacting their own health and wellbeing.
- With communication and power outages, organisations and communities had to find new ways to connect and collaborate with each other, sharing limited resources and responding to those most in need. Trust and relationships were important in the efficiency and effectiveness of such efforts.
- Cyclone Gabrielle put a huge strain on communities, but it also brought to the fore powerful examples of community care, compassion, and social cohesion (e.g., between Pacific and Māori communities; between neighbours and residents in valley communities).
- Both community and health professionals acknowledged that the health system in Te Tairāwhiti had long been underfunded and was struggling to meet the complex health needs of a community with high levels of socio-economic deprivation, geographic isolation and longstanding inequities. Following COVID-19, the repeated extreme weather events have further exacerbated the health needs of the community, while exhausting health providers and infrastructure.
- Extreme weather events (particularly Cyclone Gabrielle) exposed significant gaps in the health system, particularly for those with high health needs, disabilities, elderly, and those living in rural, remote and isolated communities – and some services – particularly for young people – have seen a decline in participation since the 2023 cyclones compared to similar periods in previous years.
- Māori health providers demonstrated highly responsive and innovative approaches to support the complex health needs in Gisborne City and in rural, remote and isolated communities.
- Similar to COVID-19 pandemic, Cyclone Gabrielle exposed and exacerbated existing inequities. Community voices reveal inequalities in resourcing and support (i.e., evacuation, health, recovery), with rural, remote and isolated communities and families often feeling overlooked and unheard.
- Non-health related systems (i.e., roading, housing, communication, water, work) have direct impacts on community health and wellbeing, with calls to revisit models of local and national governance and decision making that move from silos towards more integrated and coordinated approaches, that value and respect local knowledge, connections and relationships.
- Experiencing these weather events first-hand has made many residents more interested in what the impacts of climate change and more extreme weather are likely to be into the future, what can be done now to prepare for those effects, including environmental initiatives and the urgent need for more resilient and sustainable systems. There were strong calls for the need for investment in both health and non-health (i.e., roading) related systems.
- Local organisations, staff and volunteers worked tirelessly to protect, support and provide for their communities, often without the necessary resourcing. This work took a toll on local leaders, staff and volunteers in the weeks and months following Cyclone Gabrielle, and with repeated weather events, highlighting the need for targeted welfare and wellbeing support for those involved in rescue and recovery efforts.
- While the response to Cyclone Gabrielle required highly co-ordinated and collaborative efforts between agencies, organisations, iwi and other community groups, these efforts were most successful when pre-existing relationships based on trust were already established. Participants in leadership roles called for greater coordination and effective relationships between local and national agencies and Ministries. They identified a need for greater trust from national agencies, and respect for local organisations in-depth local knowledge and relationships within impacted communities.
- Cyclone Gabrielle brought to the fore the importance of rethinking systems and being prepared at individual, community, organizational and regional levels. Cyclone Gabrielle exposed significant gaps in systems of evacuation, recovery, and support. Many local groups and organisations (government, non-profit, health providers, schools, marae etc) and businesses have since invested time and resources into reviewing what happened, what went well and what did not, and are revising their systems to be better prepared for future events. There is much knowledge and learnings within the local community, but it is of utmost importance that time and resourcing is dedicated to taking these learnings into regional and national adaptation and resilience planning.

KUA HURI TE TAI

KUA PARI TE TAI AROHA

TE TAIRĀWHITI

Contents

1.0

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Project Summary

TE TAIRĀWHITI

This report includes the findings from the Te Tairāwhiti-specific qualitative research that is part of a larger project examining the health and wellbeing impacts of adverse weather conditions. This study is part of a wider project collaboration between Te Weu Tairāwhiti and Waipapa Taumata Rau, The University of Auckland for Manatū Hauora, The Ministry of Health. The report based on the larger project will be/is available on the The Manatū Hauora, Ministry of Health website. Various members of the Waipapa Taumata Rau team have supported this project in a range of ways, particularly the leadership of Dr George Laking and methodological contributions from Associate Professor Victoria Egli. A similar but locally specific version of this project was simultaneously conducted in the Hawkes Bay, with regular discussion between the research teams in each location.

The research presented in this report was led and conducted by a local research team consisting of Professor Holly Thorpe, Josie McClutchie, Dayna Chaffey, Haley Maxwell and Hiria Philip-Barbara, with leadership from Manu Caddie. The aim of the research was to understand the impacts of adverse weather events on community health and wellbeing, and the methods were designed to capture the diverse lived experiences of community members, as well as those in the health system (as health professionals and patients).

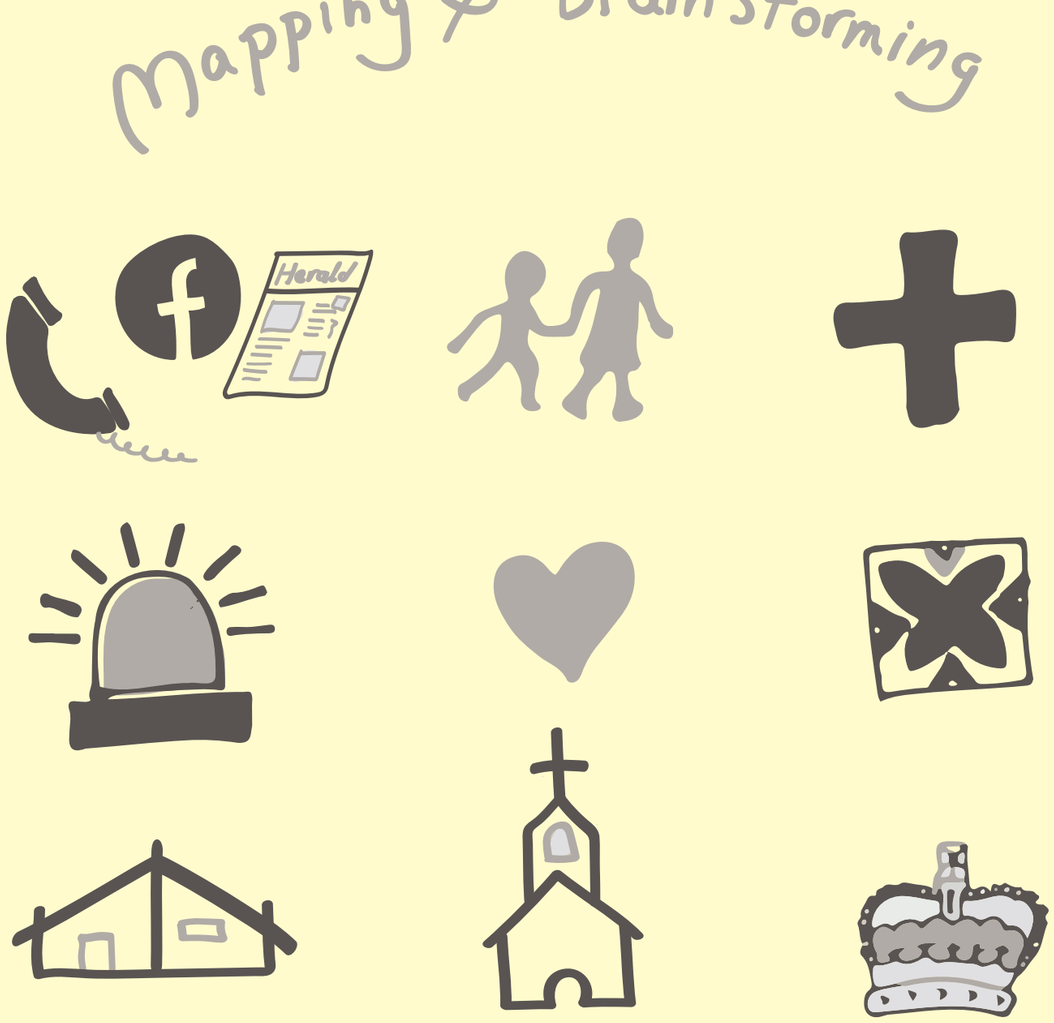


Photo courtesy of the Gisborne District Council

1.1 Methods

Led and conducted by a local research team, the methodology included 45 interviews and focus groups with a total of 77 participants across Te Tairāwhiti. Qualitative methods of interviews and focus groups were utilised to give voice to the lived experiences, interpretations, and reflections of a cross-section of community members across the region who experienced Cyclone Gabrielle and other adverse weather events over the past two years.

Ethics

The study protocol was approved by The University of Auckland AHREC on 10.10.2023 for 5 years #AH26632 Locality Ethical approval was obtained from Te Whatu Ora Tairawhtiti on 01.11.2023. Ngāti Porou Oranga provided ethical approval for participants to participate in the qualitative arm of the study in November 2023.

Recognizing that many in the community continue to be emotionally, financially and physically impacted by repeated weather events, we adopted a trauma-informed approach, with an ‘ethic of care’ practiced in all interactions with participants. The team prioritised participant emotional and cultural safety and wellbeing at all times.

Sample

The sampling approach was designed to capture the diverse experiences of residents and health professionals across the East Coast (Makorori, Ūawa, Tokomaru Bay, Ruatōrea), Gisborne City and Gisborne Western Rural (including rural communities Te Karaka, Whātātūtū, Ormond, and Matawai). Taking into consideration the past and ongoing trauma experienced in some parts of the community, we adopted a snowball method of sampling, working from our existing contacts and relationships, and then following up with participant connections and recommendations.

Drawing upon our connections and relationships was important in ensuring participants felt safe and supported throughout their participation in this study, and that their stories would be treated with utmost care and respect. We are grateful to our kaumatua (Ralph Walker aka Pāpā Rau) who also played an important role in facilitating contacts and connections with potential participants. Image 1. Shows the Te Tairāwhiti group undertaking a community mapping exercise for study recruitment and the map is shown in more detail in Image 2.

Image 1: Community Mapping

The final sample included 77 participants (53 women / 23 male / 1 non-binary) ranging from 16-85 years old, including 40 Māori and 11 from various Pacific Island nations. Participants spoke from a range of positions in the community including residents, teachers, principals, marae lead, horticulturalist and farmers, business owners, local government, volunteer, environmentalists, social services, not-for-profits, church-based charities, kaumātua, Pacific leaders, RSE workers, recent immigrants, rangatahi, and people living with chronic illness and disability.

The project also includes those working in first responder roles, such as Police and Civil Defence, and various health professionals, including mental health providers, medical clinics, iwi health providers, pharmacists, specialist carers, rural health workers and health provider leaders.

While the sample could never be representative of the many different experiences across Te Tairāwhiti, the voices offered herein speak to the varied health and wellbeing impacts of repeated extreme weather events over the past two years.

Analysis

All interviews and focus groups were digitally recorded and then professionally transcribed. Interview participants had the opportunity to revise their transcripts, whereas those in focus groups were unable to do so given that the transcript also included private information for other participants. The local team took full responsibility for the transcripts. The stories generously shared with us are taonga that we worked to protect and care for throughout this project.

The three-part code (Community Voice; Health Systems; Non-Health Related Systems) was developed in multiple phases, including a deductive and inductive approach that was refined with consideration for the time restrictions on the project, the needs of the wider project, and most importantly, the voices and stories shared by the community. The local research team further refined the code during an analysis hui, and then during the first two days of coding as new sub-themes were identified.

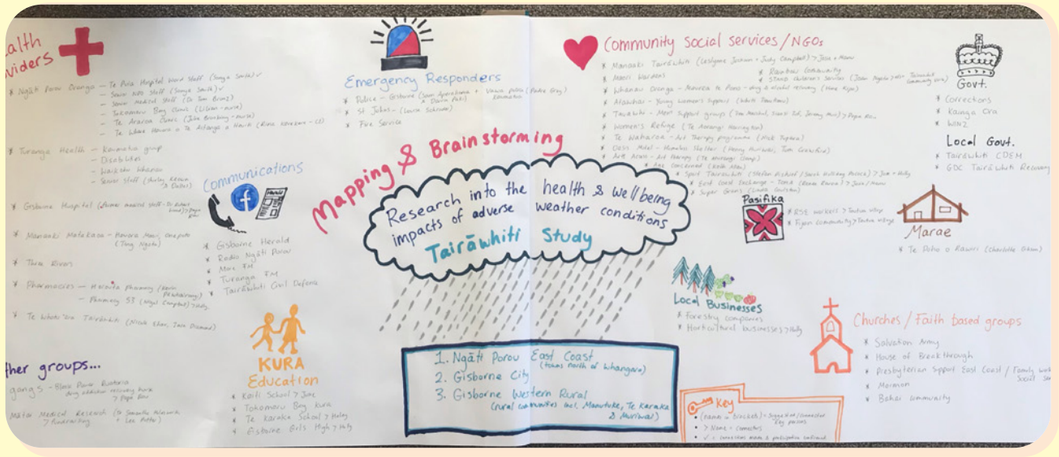

Image 2: Te Tairāwhiti Participant Recruitment Map

Image 3. The local team in a coding hui.
Photo Credit: Areta McClutchie

The local team manually (pen and paper) coded >1500 pages of transcripts, with cross-checking from at least one other team member. This was a slow and careful process, but it was important that every transcript was treated with respect and care, and every participant's story was given our full and dedicated attention.

The research team then uploaded quotes into Google Docs folders, offering another opportunity to engage deeply with the words and sentiments of each participant. Professor Thorpe, with the support of Josie McClutchie, then conducted a thematic analysis, in dialogue with the team, and input from Manu Caddie, and Malia Patea-Taylor on the Pacific theme.

The findings are presented in three main sections: 1) Community Voice, 2) Health Systems, and 3) Non-Related Health Systems. While the focus was on Cyclone Gabrielle (February 2023), it has been the repeated adverse weather events (including the heavy rainfalls of March and April 2022, Cyclone Hale January 2023, and June 2023) that have impacted community health and wellbeing, and systems of support. Thus, this report focuses on the effects of repeated adverse weather events on community health and wellbeing, and how the health and social systems responded and were affected during and following these events.

Local Capacity Building

A key aspect of this project was building local researcher capacity. This was central to the kaupapa of the entire project, including designing the sampling strategy, collecting data, coding the transcripts, contributing to the final stages of the analysis, and presenting back to community.

At all stages, the local team was consulted with, with their local knowledge and relationships integral to the success of this project.

Community Engagement

The team presented preliminary findings of this report back to various community groups during the anniversary week of Cyclone Gabrielle, including at the Ka Mua Ka Muri Research Symposium (February 15 and 16, 2024) at Midway Surf Club (see Figure 4). Feedback from these community sessions was constructive and incorporated into the final version of this report.

The report is intended to be constructive, focusing on lessons learned and how local and national organisations can take these learnings to build more robust and resilient infrastructure in Te Tairāwhiti, and across the country. The team welcomes opportunities to speak to the findings, and/or support groups and organisations in engaging with this work.

Image 4. The local team presenting at the Ka Mua Ka Muri Research Symposium

2.0

2.

Community Voice

2.1 Tamariki / Children

2.1.1 Key Findings

→ Children's mental health and wellbeing were significantly impacted by the traumatic experiences of Cyclone Gabrielle, and some continue to experience stress and anxiety with subsequent rain and weather events.

→ Families living apart or separated before, during and after Cyclone Gabrielle experienced high levels of stress and worry for children living away; some families in rural and remote areas sent their children to stay with other family to be safer.

→ With schools and childcare closed, and sports and other recreational activities cancelled, parents and whānau tried to minimise the impact of disruption on children, often while managing their own stress and worry (i.e., housing, livelihoods).

→ Roading closures and ongoing repairs impacted many families travel to and from school, with some parents in rural communities having to make difficult decisions as to where they send their children to school.

→ Children of displaced families (some moved many times to various forms of temporary housing) experienced significant disruption to their schooling and social supports.

→ Some children with special needs experienced disruption and delays in systems of support.

→ Schools played a critical role in supporting affected whānau, particularly in high deprivation and/or significantly impacted communities.

→ School leaders and teachers are well connected with their communities, and engaged in a lot of emotional and social support work to provide for children and whānau most effected (i.e., clothing, psycho-social support).

→ Parents and whānau are worried about the world their children are inheriting, and particularly the future of Te Tairāwhiti as a place they are safe to call 'home'; climate anxieties and parenting challenges are exacerbated when living through extreme weather events.

2.1.2 Illustrative Quotes

Impact on children's mental health and wellbeing

Our grandchildren, I think have been hugely impacted by it, in coming out and seeing the farm because they've spent a lot of time out here with us. I think they're more traumatised than what we are, I think. One of them says, oh, you can get a new house, you can put it between the trees and call it a tree house. So they're wondering when are we going to fix up the house. ... Our grandson's concerned every time it rains now. He says, is your house going to flood again, Nana, and they come in and look around. They still like coming to the farm, but they're like, it's sad, because it's been memories for them too. It's not just us. It's the kids and the grandkids that have been affected too.
- *(Pākehā woman, rural)*

...the rain 'cause my kids are scared of it. ...they don't like it and they don't like the sound. So I ended up moving them all into my room, we just put mattresses on the floor, we all slept together. They're also scared of the dark like if the power goes out and they wake up in the middle of the night and it's pitch black, freaks them right out. ... As soon as it pours, she blocks her ears. Or she's finding headphones and turning whatever she's watching up. It doesn't matter even if it rains like it rained the other day, shut all the curtains, headphones goes on. She just has anxiety. ...We just deal with it. We just awhi her and say it's going to be alright, it will stop soon.
- *(wahine Māori, business owner, city)*

...I've noticed 'cause I teach at a primary school. Any time it rains heavy, the kids are like oh there's another cyclone or they'll start saying stuff like what if I get swept out in the cyclone? Like, so it's kind of affected, I don't know, the majority of the kids. - *(Pacific woman, rangatahi)*

...when the power went out, the kids, like my niece, nephews and stuff were really like, their anxiety went up. They're like, oh no, we're gonna die like they literally ran around our house saying I'm gonna die tonight. ...But I think it really affected our little ones rather than us like the older kids. I was just trying to calm them down and then 'cause we had our niece and nephew whose mum was like in Auckland. So she was feeling really hopeless 'cause there was no contact with us at all.
- *(Pacific woman, rangatahi)*

My daughter has epilepsy, so it affected her mental health. I think I'm living with that too. My daughter also has speech delay, she was good, at five we thought she's going to talk sentences, because she has two words and stuff. ... But after the flood we didn't concentrate on her speech therapies, because we couldn't afford. Now she's still the same five year old that we brought to this country, so it really affected our physical and mental [health]. - *(Indian woman, recent immigrant, city)*

... So we will go out to our truck and take off our gumboots, jump into the truck and we have our shoes and put them on. And then when we drive back we drive in the middle of our gumboots and we should be able to put them back on when we get back. Hopefully it's not raining. But that's how we were rolling for a while. Wipes, we had wipes. When you get to school wipe your stuff.
- *(wahine Māori, east coast)*

Whānau worries and concerns: 'Living became harder'

...we ended up all sleeping in the same bed, and I think we did that maybe for a week, just to make them feel secure. I think when you're a solo parent it's difficult because there's the responsibility of all that decision-making about how to prepare or not prepare, all those kinds of things.
- *(wahine Māori, business owner, city)*

The kids having to stay with other people, our other whānau for now, until we got settled.
- *(wahine Māori, east coast)*

...that's why we moved into town because I couldn't get to work. ...I can't get to work, my wife can't work if there's no power, you know. Can't get to school. So we moved into Tolaga.
- *(tāne Māori, mahi taiao, east coast)*

...it sucks 'cause our last three children have all been to our Mangatuna...It's a native school. My partner's from Mangatuna... he really wanted to reconnect with his culture and send his son back to Mangatuna... There's the cultural impacts, not having access to our awa. Not having access to our reo. Our reo tika. ...our reo Mangatuna...I can't drive through the bridge, otherwise we would. I'm already late enough these days... chasing the bus every day. Not even gonna try. ...changes our schooling choices and where we live now.
- *(wahine Māori, east coast)*

Just to walk out to our car every day you're piggy-backing your kids. You can't wear anything nice. You've got dust, you've got mud all over you. Living became harder. - *(wahine Māori, east coast)*

Damaged Roads and Schooling Infrastructure

Some of the schools 'cause they need to have flushing toilets and water...having my kids out at Whangara...anything can happen with the roads. There's been so much roadworks so the bus never comes at the same time every day, you know. Sometimes they're early, sometimes they're late. Sometimes they can't go to school.
- *(wahine Māori, artist, city)*

...'cause we were at the skate park every day trying to run my kids energy out. 'cause they weren't at school 'cause there's no sports. ...there was no school for ages... Yeah, 'cause they couldn't flush their toilets, there was no school.
- *(wahine Māori, business owner, city)*

School and social service support

...it's been a 'piki me ngā heke' year definitely... staff were stressed, staff were coping with their own kind of experiences, or whatever they were dealt during the cyclone. And then they were also trying to help our tamariki to come back to some sort of normality... - *(wahine Māori, school leader, rural*)

I looked after everyone's interest, but my main focus was the whānau that were displaced. So I just communicated with them all the time, kept them up to date and made sure they had everything that they needed to feel okay about being where they were, you know.
- *(wahine Māori, school leader, rural)*

...yeah lots of high emotion there, 'cause, you know when you've lost everything, and it wasn't until you realised they lost their undies and stuff. ...they had nothing, so that was my priority. So I'd connect with all the donation people, I was like anything these people get first priority please.
- (*wahine Māori, school leader, rural)*

We are aware of tamariki who are still even now going to get counselling, who are going, receiving counselling. Because the fear and anxiety that the rain and that bad weather causes, it still lingers in them. - *(wahine Māori, social worker, city)*

I think our social services were good. ...they knew the whānau that would need support. I think that's one of the advantages of our kura too is that we know our whānau really well. So we know the ones that are gonna need, you know, need support when something happens like this. That haven't got the resources really to, you know, have spare kai and money and things.
- *(wahine Māori, school leader, city)*

....so it wasn't really normal school straightaway. It was still part of trying to work through the students' stress, and anxiety, and experiences, and all of that sorta thing. But I thought our school outdid ourselves for the betterment of the community. And the outcome of that has been a mutual relationship now with the community.
- *(wahine Māori, school leader, rural)*

...we went to see an educational psychologist about ways to manage, you know supporting tamariki to get back to school after an event like that. ...use strategies like mindfulness and karakia, and dance, and movement. ... We were encouraged not to talk about the event, we were encouraged not to do writing, reading, maths, and that was all about the cyclone. - *(wahine Māori, school leader, rural)*

... we had 10 of our families at kura who were totally impacted, so their houses were absolutely washed out. So they lost everything, and then for some of those families, they were displaced. But they were moved three or four times within, so once they were moved on from kura, moved to hotels in town. ...some of them were moved three or four times before they were, you know finally got to come back home. Tamariki were not sure about where I was gonna be tomorrow. And their whānau were stressed. - *(wahine Māori, school leader, rural)*

So we've got a really progressive principal and leadership team. They actually provide extra social services too. They're really, proactive about communicating quickly with whānau...they were back on deck probably as quick as they could. Like their thing is to get whānau kids back into school, because there's that flow on effect with stress in the homes. - *(wahine Māori, sole parent, city)*

Concerns for the future

It is frightening for my kids probably, the future and just the changes in the weather. It's gonna get more extreme and thinking about those people that live along the rivers. - *(Māori-Samoan male, city)*

I say to my kids don't have kids, like my son and his girlfriend, don't have kids, 'cause the world that you're gonna bring them into is not gonna be nice.
- *(wahine Māori, org leader, city*)

"Just to walk out to our car every day you're piggy-backing your kids. You can't wear anything nice. You've got dust, you've got mud all over you. Living became harder.

(Wahine Māori, east coast)

2.2 Rangatahi / Youth

2.2.1 Key Findings

- → Rangatahi experienced considerable stress, worry and loneliness, that impacted their mental health during and after the extreme weather event/s.
- → They were worried about the health and wellbeing of their families and friends, particularly those they were unable to contact during communication outages.
- → Parents and whānau observed changes in their rangatahi, and the impact of disruption to their sporting and social networks and relationships.
- → Whereas some youth felt helpless and unsure how to help their communities, others were integral to recovery initiatives and played key roles in supporting their community's recovery processes.
- → Rangatahi were an invaluable community support resource, with rangatahi Māori giving back to whānau.
- → There was a strong perception that youth want to be more involved in community recovery efforts. Whereas some felt powerless and unheard, those who were supported into recovery roles found a strong sense of purpose in the mahi.
- → Some youth were activated by witnessing extreme weather events, and are highly motivated to help their whānau and communities to better prepare for, and minimise the effects of, future events.

Recommendation

Local rangatahi are interested in supporting recovery efforts, and thus local organisations should create spaces to listen to their experiences and insights. Local organisations should create opportunities for rangatahi to be active and involved in supporting their communities before, during and after adverse weather events.

2.2.2 Illustrative Quotes

Impacts on mental health & wellbeing

... I was very anxious 'cause not only could I not talk to anyone, but I was seeing all these photos about what's happening and I was like 'oh my God, I need someone to talk to'
- *(Pacific wahine rangatahi, city)*

...'cause we were stuck in four walls, so I was just feeling every emotion bad 'cause I couldn't contact anyone and like lonely. Yeah, and bored out of brains. - *(Pacific wahine rangatahi, city)*

It just felt like a blackout, like socially and almost physically. I felt very lost, yeah, mentally or emotionally. - *(Pacific wahine rangatahi, city)*

The biggest problem was power. My friend, she needed to check her blood sugars constantly, but the only way she could was through her phone. And she wasn't able to do that so she was very anxious that her blood sugars were gonna go too low and she wouldn't be able to get the help she needed. - *(Pacific wahine rangatahi, city)*

We're a village that's supposed to be full of rangatahi. Definitely after Gabrielle, we have a village that is full of anxiety young people who were already anxiety before any of the storms. So you can just imagine how they are now! Going out of home is a big thing because what if we get stuck? You know we can't get home, because most of them they're safe, you know homes are their haven, or their rooms, especially for youth. Yeah so we've seen a huge drop in rangatahi actually engaging and socialising as much as they would usually since Gabrielle. Well we had COVID first, COVID was huge. Other storms that we've had, you know have had a little impact too, but then Gabrielle happened. It was, yeah, we really saw decline in rangatahi engagement. We have a community full of real anxiety people.
- *(wahine Māori, manager social service)*

Disruption to sporting activities & social connections

"...it affected my son significantly 'cause he's a paddler and he couldn't paddle for three or four weeks. And that's a huge part of who he is, so it affected his taha, everything. ...they had to drive out of the region a lot to practice and train."
- *(wahine Māori, school leader, city)*

... my daughter, it was more about her connection with her friends, because she couldn't go across the river. So we were all on this side of the river for that first couple of days aye, 'cause the bridge was sort of a bit closed, yeah.
- *(wahine Māori, school leader, city)*

... just getting your teenagers to understand that life isn't always easy. But I think our kids did really well too, you know, they're a lot more resilient than we give them credit for. - *(Samoan-Māori wahine)*

Giving back to community uplifting, but also an emotional toll

From my perspective it's just, all I can do is just help all the aunties. Yeah, that's what I can do 'cause I can just see that they're hurt aye. All the aunties, you can just see them smiling but they're hiding stuff, you know. ...I just want more bros like me

just to come and help all the families aye. That's why I sorta jumped on this contract with...just to help out the aunties and that with the smashed houses. ....all I just wanna do is just give back to the community 'cause everyone helped me around here. 'Cause I was whangai'd to all the houses, yeah, and now it's just giving back.
- *(tāne Māori, rangatahi, east coast)*

... we take firewood around to the old people. I didn't even know if I'm supposed to, I just do it. I just do it in our work time aye. It's cyclone recovery... there's livelihoods. It's about preparation, prevention is key in health. So if we can prevent that by providing firewood, by providing things, by doing that, by putting in preventions then we say we're getting equipped, yeah. ...You feel bloody good about it. You know, we have great days on those days. Honestly, it's like the Taiao's talking to us, the need now. ... they're really grateful, yeah, it's cool.
- *(tāne Māori, rangatahi, east coast)*

We've got a son that actually works with mahinga kai and it affected him, just what he saw because he's not used to seeing that. Keen and willing to get in there and help the whānau, the community, but it hit him later on how lucky he was with his whānau that he was able to share that, the help with them, but not experience being in that full impact of Cyclone Gabrielle.
- *(tāne Māori, mahi taiao, rural)*

Opportunities in recovery support provides a huge sense of purpose

...most of the youth are not on jobs, they're on MSD, but to give them some form of sense of purpose. They're channelling them our way and then the people who are convicts, people who are recovering addicts. ...all those people, and we welcome all of them, because the mahi is not really about your qualifications. It's about your determination and your being able to just do hands-on work. And yeah, that's how we're doing it and we're doing it all as a community.
- *(tāne Māori, east coast)*

Concerns & future preparations

A lot of the young ones didn't understand what a disaster is like and the impacts of the disaster until they actually were there, hands on.....for them it was like an eye opener, and their talk was like I don't want this to happen to me in the long-term, what can we do to prevent this from happening again? They all wanted to make plans about how to prevent this from happening. - *(tāne Māori, mahi taiao, rural)*

"All the aunties, you can just see them smiling but they're hiding stuff... they're hurt. I just want more bros like me just to come and help all the families and help out the aunties with the smashed houses.

(tāne Māori, rangatahi, east coast)

2.3 Pakeke / Elderly

2.3.1 Key Findings

- → Elderly were often at heightened risk of oversight and isolation during extreme weather events.
- → Commonly used modes of communicating risk (i.e., Facebook) may not be accessible to elderly groups.
- → Some Māori health providers had listened to their pakeke and provided wind-up radios to ensure they had access to the latest information, which proved highly valuable before, during and after extreme weather events.
- → Some elderly were highly vulnerable and not prioritised in evacuations, and when required, evacuations were complex due to physical health needs.
- → Unable to self-evacuate, whānau and community members put their own lives at risk to rescue pakeke/elderly in affected communities.
- → Some elderly with various disabilities and health needs had to walk (up to an hour) to try to find information, food and supplied, indicating that systems of support were not targeting some of the most vulnerable in the community.
- → Various social support and community organisations filled some of the gaps in systems of support for elderly, delivering food and water, checking in on isolated individuals, providing companionship when needed, or support with housing and insurance claims.
- → Volunteer organisations that have a good understanding of the needs of the elderly community felt overlooked and underutilised in recovery responses, and called for more communication and cooperation with Civil Defence and local authorities to ensure at-risk elderly are identified both during evacuations and in the recovery processes (i.e., social support, food delivery).
- → A particular concern for elderly in the days and weeks following the State of Emergency was how to get prescriptions and medical support.
- → While various social support groups and organisations (i.e., Age Concern, marae, Salvation Army) played critical roles in getting prescriptions to isolated elderly persons, it highlighted a need for health and social services to work closer together to ensure at-risk, vulnerable elderly are prioritised in their medical needs during and after an extreme weather event.
- → Many elderly felt shame, embarrassment, whakamaa in seeking out or accepting support (i.e., donations of clothing, heaters, water, kai), often thinking that others needed the help more than them.
- → Many displaced elderly lived with extended family for short or long periods of time. Some continue to wait for permanent housing options, causing considerable emotional and financial stress for them and their families.
- → For elderly persons who had their homes damaged or destroyed, managing insurance and ongoing uncertainty of their futures continues to cause stress for themselves and their families.

Recommendation

Health and social services need to work closer together to ensure at-risk, vulnerable elderly are prioritised in their evacuation, medical and physical (i.e., food, water) needs during and after an extreme weather event.

Photo Credit: Josie McClutchie

2.3.2 Illustrative Quotes

Evacuation challenges, mobility & disability

They didn't know how to get out. Some of them couldn't move out because they were so old and frail. The water was so powerful, they couldn't move anywhere. Some just stayed in their room until somebody turned up. For instance, there was a lady she was stuck in her wheelchair and by the time people found her, the water was at her neck. Elderly were the ones that really – there could have been a lot more lives gone if those young people didn't come to help them and put their lives at risk for the kaumātua. It basically wiped out our whole kaumātua flats.
- *(tāne Māori, lead volunteer, rural)*

So there was still kuia and kaumātua who wouldn't leave their homes until they realised we absolutely should. - *(wahine Māori, rural)*

... they weren't calling for help or anything. There was an elderly guy, he was 90, I think, and he lived by himself..... his whole house was just gone. Everything in his house, everything outside in the sheds were just totalled. Full of silt. ....I stopped in there to see how things were going and he just came out, gave me a big hug.
- *(tāne Māori, lead volunteer, rural)*

We got to the roadblock and there was a guy from the fire service [who] said, 'the road's closed'. And I said, 'I need to go and check on mum'. [They] said, 'everyone's been evacuated'. ... And I said 'have you seen my mother', and Athina said no. I said, 'well she hasn't gone, she will be at home and I need to go in and get her'. How old's your mother? Seventy-six. So we go back down to where the road's closed to talk to the fire service and I said, 'do you guys have a boat? We need to get mum out of there'. The neighbour's kayak was not going to cut it, so the guy from the fire service says, yep, I'll radio to the station. So then the fire engine arrived, a couple of guys from the fire service and the fire truck, and when they realised what was required... So the fire engine turns up, and of course there's no way that a car could've got down to mums, let alone a fire engine, but the guys say they'll go back to the village and get a flat-bottomed boat, a dinghy. But then it doesn't have any paddles so they go back to the village and they borrow waka ama paddles from someone in the village. And because the water's so high, mum's driveway is a bit of a curve and it's tree-lined, so I get in the boat with the two firemen because I've got to help them navigate.
- *(wahine Māori, Gisborne City speaking of rescuing elderly mother in rural community)*

... it is good to have a neighbourhood watch, but a bit harder in the country. They need a vulnerable list... I think at times elderly issues are different. And they are more vulnerable at times like that.
- *(wahine Māori, not-for-profit leader, city)*

Isolation, loneliness

A lot of families are really not stepping up to their elderly. ...loneliness kills. And it does. Because there's so many elderly that are somewhere else, isolated. Especially in that cyclone where families couldn't get to their elderly people.
- *(kuia Māori, not-for-profit org)*

...that kuia that walked all the way over here from Elgin – I mean, a walk like that when you've had a stroke, when you're elderly, that would have taken a good hour to get from - *(kuia Māori, not-for-profit org)*

...that heightened their mental health aye. The anxiety was hurting them. They didn't know where to go, what to do. Do I drink water now? I don't. Can I cook with water? Oh, I can't. You know, who's telling me. That mamae was very evident, you could see. - *(wahine Māori, not-for-profit org leader)*

We had kuia and kaumātua coming in just, they felt the silence, and they'd just come in and have a cup of tea. Have a korero, 'cause town was quite noisy and busy during the recovery. ...they'd just pop in and say oh God it just feels so quiet around town. I just feel like I need to talk to someone, you know so I was like come in.
- *(wahine Māori, school leader, rural)*

...people almost came in because they wanted to check. Bit, freaked out some of our elderly patients especially. And that's what really triggered us around our patients who we see in the homes. It was almost like they were coming to check on us, but wanted to be checked on as well and have a bit of human contact.
- *(wahine Māori, manager medical practice, city)*

Communications, connectivity support

...during COVID, we put out these like radios, you know? They were like the dynamo wind-up radios? And a lot of our pākeke were using those to keep up-to-date even myself, we were using them to keep up with what's happening, particularly in the local level with Bevan. And so that's kind of how a lot of our pāke were keeping in touch as well about what was happening. ...those radios were amazing.
- *(wahine Māori, Iwi health 1)*

I'm finding is a lot is done on online, and on a telephone. Whereas a lot of our elderly wouldn't have a bloody clue how to use a phone, a cell phone and a computer... I had an elderly lady come in, one of our clients. Her phone wasn't working. I said to her, all right then, who do you deal with? Spark.

...she had been in there and they weren't listening to what she was saying... in the end she came here and she said, oh, I'm stressed out, these people are not listening. ...So I walked her around there and we sat down and I said... This lady needs help...and I'm here to make sure that she gets that help. Just like that. No problem. They're not listening to the elderly. ...We don't even exist as far as some people are concerned. - *(kuia Māori, not-for-profit org)*

We got to remember, some have got dementia, some have got Alzheimer's, some are bipolar, some drink too much, drugs. There's a lot out there. Not necessarily the elderly, but this is where the nasty side comes into play with our elderly that have dementia and Alzheimer's. They don't know the first thing about phones and especially a computer. They've heard of it, but how to operate it?
- *(kuia Māori, not-for-profit org)*

Community groups prioritise the health & wellbeing needs

...we even door knocked and there was people there that couldn't get out, especially elderly, no vehicle, living on their own, so we were able to help those people. Even though they weren't our clients, we still were able to help them. Get them food... They couldn't get out because they had no way of getting out. Here in Gisborne, there's a lot of people... ...with disability, I suppose. They can't drive anymore. They don't have a vehicle.
- *(kuia Māori, not-for-profit org)*

Everybody would gather at the marae in the morning, because they cooked breakfast there... after that, we'd have the meeting and the supplies would come, and we'd start packing it and putting them in different areas, and we would just take out for the elderly. Some of them cried, they couldn't thank you enough. Firstly it's a smile, 'Oh, look, we didn't know how we were going to get on. We can't get out'. Sad stories, really. But, oh, thank you so much for your help. - *(kuia Māori, not-for-profit org)*

Yeah so kaumātua in Toko were first priority. So anyone over 65 years of age were seen on a regular basis...They've got no landlines. They don't have cell phones. You kind of had to go up and say to them right, I've got a leeway, who do you need me to ring and I'll ring them and I'll send messages to say that you're fine.
- *(wahine Māori, first responder, east coast)*

Gaps in access medical needs filled by community groups

All the doctors' places... they need to be answerable to the elderly, their service, eh?... They know their patients, their elderly people who are vulnerable, and they're not doing anything. ... because the services today are about ... babies, about rangatahi; where does elderly fit in? Forgotten. Really, it's the elderly.
- *(kuia Māori, not-for-profit org)*

For our elderly...that added to their anxiety not knowing if they were gonna get their medication or not. ...for the first two weeks we had daily updates for the community and the key message I had for all of our pakeke was you need to look after yourself and stay well. 'Cause if there's a medical emergency, you're gonna die here, that was our reality. Having to put that extra responsibility on our pakeke, that they needed to stay well. That actually made them isolate themselves from everyone else. So social isolation was an issue for our pakeke.
- *(wahine Māori, first responder, east coast)*

... and also we came across people with prescriptions, needed pills, that couldn't get out. ...in the end, what we did was we took the prescriptions – of course it's about wearing our name tag so that they felt safe with us helping them, took their prescriptions to the chemist, waited for them, and then delivered it back to them. - *(kuia Māori, not-for-profit org)*

Whakamā

She felt extremely stink, can I say that, you know, because she's an older woman. She goes I've never been like this before in my life, this is so hard for me to do, I'm quite overwhelmed. She's saying this aye, 'cause we've got a, here's a brand new heater you can take to your accommodation now. Help yourself to blankets, whatever you need you take. And she got herself a couple of t-shirts, you know, and she was extremely embarrassed.
- *(tāne Māori, not-for-profit org leader)*

Acute stress from displacement & pressures on whānau

... everything was completely underwater so it was very hard to get in there to help her retrieve some of the things that were important to her. And mum's a weaver and she's probably woven about 20 korowai, and they were all underwater... Fortunately we have space in our home and mum's still living with us. How long has it been now? Eight months, since February. But imagine, you're 76, you've got two walking sticks, how are you meant to fire up a generator and a water blaster and clean your property? - *(wahine Māori, social recovery lead)*

I'm carrying the emotional and financial cost and it's my mother, I love her, I'm not complaining about that, but it means that I work full-time and I manage a business. I'm a mother and a grandmother and I can't have my grandchildren come and stay because we don't have the space. You know, the interruption to our lives; and I'm sure that's frustrating for her.
- *(wahine Māori, social recovery lead)*

... Her story is just a horror story really, you know, at her age and stage of life where security is really important. She lacks the ability to increase her income earning potential because of age and disability and she's felt quite helpless.
- *(wahine Māori, social recovery lead)*

Mum was very angry and frustrated and sad and grieving and affected by the trauma of losing her home and we were very sensitive to that. But it was also very frustrating for us, and there's no escape from it. You know, it's your reality. You live in it 24/7. You can't have any reprieve from the reality of the situation and it puts pressure on your relationships.
- *(wahine Māori, social recovery lead)*

... the impact on her health has been her mental health, her physical health, her hips continue to deteriorate. Apparently ACC have agreed to pay for that and now she's on a waitlist again. Still on a waitlist. So now going back to a two-storey property on three levels is not looking like it would make her life better in the long run... So one of the causes of her current stress is the fear of having to go back and not be able to build a new future with the money that she had invested in paying insurance for all these years to make a different choice. - *(wahine Māori, social recovery lead)*

Her fear of the unknown, her fear of what her future looks like, will she be able to buy another house or not? Will she have to rent a house on a fixed income? Will she be able to afford to do that? We've got a housing crisis in Gisborne that's different from the housing crisis in other parts of the country but there are no rental properties.
- *(wahine Māori, social recovery lead)*

Insurance

... I thought I'd be quite good at navigating mum through accessing the support she was entitled to. I was wrong. The flyer that the Council gave of people you could contact, I said to mum, 'Work and Income have a fund that they distribute to help people reconnect power and water', but she didn't meet the criteria for that, to have her water or power reconnected. With her disability she can't live in a place that has a shower over the bath or anything like that. She's lived through the winter so having a warm, dry place is key. But I just said to her, last week actually, 'mum, I'm going to tell your insurance company that I'm kicking you out'. And she had a look of horror on her face. And I said, 'mum, I'm helping you but I'm not really helping you because you're not going to be prioritised by anybody because I'm taking care of you.
- *(wahine Māori, social recovery lead)*

"Some of the elderly couldn't move out because the water was so powerful. For instance, there was a lady she was stuck in her wheelchair and by the time people found her, the water was at her neck.

(tāne Māori, rural)

2.4 Māori

2.4.1 Key Findings

- → A strong theme in this study was the critical role of marae during and after extreme weather events, providing social and emotional support, information, kai, cash, medical support.
- → Marae demonstrated the power of cultural leadership, manaakitanga, hospitality and knowledge during a State of Emergency, and offered support across communities (including Pacific).
- → Destruction of, and damage to, marae and urupā continues to cause significant distress and sadness for whānau.
- → Damage and destruction of places and objects of cultural significance (i.e., papakāinga, waka ama) cause of cultural grief and sadness.
- → The relationships Māori have with whenua are intergenerational, so being told by authorities (Council/Government) they can no-longer live in their home/on their land is inconsistent with the deep cultural relationships Māori have with whānau and whenua.
- → Inability (due to roading) to return to and visit places of cultural connection is an ongoing cause of sadness.
- → Iwi/hapū demonstrated significant leadership and innovation in supporting community recovery (i.e., health, housing, kai, social support).
- → Frustrated by lack of support, some remote and isolated rural communities and iwi/hapū are establishing their own systems to support each other during extreme weather events.
- → Some Māori observed inequities in who was and was not receiving support, calls for more training and ensuring people in key community roles have the best skill-set in the right role, and more community advocates.
- → Cultural forms of grieving and recovery were important to whānau: karakia and pūrākau (story telling) important for people making meaning of what has happened, and supporting each other during challenging times.
- → Longstanding inequities in housing, employment, health are exacerbated during extreme weather events such that Māori communities and wellbeing are disproportionately affected.

2.4.2 Illustrative Quotes

Marae – manaakitanga
(also see 'Community Hubs')

Te Poho-o-Rāwiri, I think for quite a while, was housing and feeding a large number of people, as were marae in Tokomaru Bay, and Tolaga Bay, and Te Karaka. One thing about marae support in a situation like this, is that it's no big deal with Māori to respond to that. Because manaaki hosting is one of the most important facets of being Māori. So when a house is needed for an emergency, it could be the same, they just kick into action just like for a tangi, or for a wedding, or for whatever. The, you know the systems are all there, the kawa is there. And the fact that your mana is determined on how well you do this, makes it even better. - *(kaumātua, Kaiti)*

You see a marae is not only a facility, it's got heaps of mattresses, it's got a huge kitchen, tables, cutlery, everything, everything there. But they also have people who know how to host many people. It's a skill and we do it without even thinking, we just, as soon as the need comes, bang we're into it... once again, proved during Gabrielle, how important it was. Sadly however, there are some of our marae that ended up being munted like many of the homeless people. One of Pine's houses out at Te Karaka, for instance, hopefully it will be saved, but it was close to being red stickered. - *(kaumātua, Kaiti)*

We went straight to Poho, we had a relationship with Poho. We'd go and get food parcels and some hot kai. - *(wahine Māori, social worker, city)*

...people have a strong connection to the pa, and to marae in general. You get people volunteer, right, like I know many nurses and stuff who will go and help out at the pā when they can. They'll go and check that kaupapa over for things, they'll go and make sure that, you know their health, and their hearing, and all that kind of stuff is checked. So if you want to support that kind of movement where you could support healthcare. You could support distribution of kai, of resources, or just community in general. The pā is so amazing for that, and every community has a pa, that they go to and that is looked after. - *(wahine Māori, Kaiti)*

Well the Rūnanga and Te Poho-o-Rāwiri were amazing. They were amazing. They were out. They were delivering things. They were making sure people were okay. And they were encouraging people who had time to help to go up to Te Poho-o-Rāwiri and turn up and do what you can.
- *(wahine Māori, school leader, city)*

Damage to significant cultural, community sites - collective trauma

...you've gotta think about all the urupā that were affected too... ...for us that emotionally hurts us when we can't go and visit our tīpuna anymore. Or we don't know where they are anymore. So yeah that was probably one of the big grievances, I suppose after the cyclone too, was that knowing that a lot of urupā, or graveyards, had been swallowed up by the cyclone. - *(wahine Māori, Kaiti)*

...the first community space that I saw affected was actually Anzac Park and I saw the waka. That hit home, very close to home, ... I saw broken wakas, I saw them just stuck in mud. The mud came all the way up to the field, which it's never done before. And also the rowing club, their shed was full of, you know mud, and water, and they couldn't get in to get their stuff. Waka tend to be named after our ancestors, so they are very, very important to us.

We love them as if they're part of a whānau. And so to see the wakas like that, knowing that our wakas would also be like that was, yeah that was probably the moment when I realised wow, this was huge. - *(wahine Māori, Kaiti)*

Māori whakapapa connection to whenua

...we don't want to move. We don't believe we should move. So we sit amongst where we're all from and we don't want to move. And we're adamant to stay on our farm and work that. The holistic values of why we are Māori and why we are uri ke te whenua. Holding our pao. It feels like we're the last. - *(wahine Māori, east coast)*

You could see how high it had gone and then just how much it had affected the houses, the papakāinga, not just houses. These are homes that have been passed down through generations where people's whenua are buried.
- *(wahine Māori, Kaiti)*

We just felt forgotten about, we just feel, we had to do our own thing. But, the pressure's on now, like can we continue to live here? But that's their papakāinga, that's where they were born and bred, and will die... This is what the ongoing impacts of events for me means, as I know that our communities are getting more and more alienated through the ability to be able to live. Earn a living, live on their land, and live a decent human life.
- *(wahine Māori, manager, city)*

When you think about your life as a house, you know. And like a property, and like the things in your house, it's really hard to understand how deep that connection is to land, right, to our place? We literally come from that land.
- *(wahine Māori, Kaiti)*

Damage to roading / cultural connections disrupted

(also see 4.5 'Roading')

I'm someone who tries to get home at least like two or three times a year. We go to our marae, we do a working bee, we clean our whare, we, you know look after our urupā. We go and care for our whenua and we care about it so deeply, it is part of us. We have a pito tree that is so high. But the thought of that not being there one day is just heartbreaking. 'Cause that's our whenua, our whenua, we are part of the whenua, so not being able to go home, not being able to put my feet in my ocean. And just wash, you know like horoi and just whakatau myself, has been really hard. - *(wahine Māori, Kaiti)*

Hapū & Iwi support, leadership & activation

Te Aitanga-a-Māhaki done what they done for their people. Like I said, this is Māhaki area. They done it. Just went in there full force and done it. Without that, where would we be today? Probably still knocking on doors trying to sourcing help. But maybe it would have been a lot slower if the Iwi hadn't stepped in and just progressed it all. It was for everybody. If they didn't step up on the mark and help out, there would have been a huge financial impact on everybody, and that would have just caused crazy, crazy stuff going on.
- *(tāne Māori, recovery volunteer, rural)*

But yeah not waiting, not expecting, just gotta get in there and do it, and what I actually found and realised was that it was the local people. The local, Tūranganui-ā-Kiwa, Te Rūnanga o Tūranganui-a-Kiwa and Ngāti Porou, Te Poho-o-Rāwiri ...you know those, our connections kicked in...
- *(wahine Māori, school leader, rural)*

It's gotten to the point where the Iwi up the coast are actually taking the bull by the horns themselves and said, we're not having anything to do with the council or Civil Defence. We're going to go out on our own and sort our own stuff out, because they're dissatisfied with the way the council have operated around, and we've seen it for ourselves first hand, and we can see why. Which is quite a significant thing to go out, set up all their own shipping containers and all their own equipment for when there's a natural weather event like this.
- *(Pākehā male, first responder, east coast)*

Don't matter if you're brown, white, yellow; we're all one, we're all one whānau so we do this together as an Iwi. This is where I felt really proud of our Iwi to step in and do that, to take care of our people. We're all the same, all on the same waka. It's awesome. - *(tāne Māori, volunteer, rural)*

Inequities in support to Māori communities

In this community I'm afraid the ones that are last on the list are my people, Ngāti Porou. They don't seem to have the same level of support as some other more influential people in the community.
- *(kaumātua, Kaiti)*

Whānau community networks & activation

...we had people to talk to eh. We had aunties and uncles that were like, set us on the right path...Yeah we're quite lucky...Connections...we got heaps of support from our aunties and uncles...it's just a whole whānau thing.
- *(wahine Māori, rangatahi volunteer, east coast)*

...the community came together. And, you know neighbours were checking in on each other.
- *(wahine Māori, Kaiti)*

Healing through Māori cultural practices

(also see 'Mental Health')

... they can try and also heal themselves through their narrative. Yeah, 'cause I think that's it, telling your story, sharing that... will also help heal.
- *(wahine Māori, leader, City)*

You do what you do, I suppose, and I suppose when you come from great leaders, as in your whakapapa who are great leaders, obviously that's filtered down to you. I always go back to karakia. It's karakia. So important and it helps. It helps us with our days. - *(tāne Māori, mahi taiao, rural)*

2.5 Pacific Communities

2.5.1 Key Findings

→ Many in the Pacific community found support from their churches, as well as nationwide church-based networks, as well as comfort in their faith.

→ Local Pacific organisations played key roles in supporting their communities (i.e., food, transport, health needs, temporary accommodation), but this took a toll (human and financial) on these organisations with staff and volunteers working very long hours in stressful conditions.

→ The Pacific community drew upon deep cultural and historical knowledge of how to survive and support each other during extreme weather events; relationships critical to supporting and caring for Pacific communities.

→ Pacific communities demonstrated high levels of resilience, drawing upon their lived experiences in the islands during cyclones. They gathered in crisis and practised 'fa'asoa' (Samoan word for seeking quality communication/dialogue/korero tahi); Saoga mea (koha of resources, bringing together to then distribute to need etc); and Tapua'i (prayer and holding 'ava/kava circles for hope etc). Drawing upon their cultural knowledge and experiences of dealing with cyclones in the Pacific islands, they largely put to the side differences (any raru with others, 'bickering can wait for when the rain subsides'), coming together to support one another, and particularly those most in need.

→ Different residency status made some Pacific families feel like second-class citizens, not able to access the support and resources that they needed, or they saw being afforded to others.

→ Some in the Pacific community felt the need to put on a 'brave face' rather than revealing their feelings (i.e., anger, worry, sadness).

→ Pacific workers experienced varying forms of support from their employers, with some left highly vulnerable and isolated.

→ Cyclone Gabriel revealed 'holes' in the NZ immigration in terms of support and ability to enforce their policies on private employers of pacific people. Participants described interactions with department workers who were confused with visa status and people's rights during a State of Emergency and in the aftermath of an extreme weather event. It was often assumed that if you were 'pacific' and didn't have citizenship, then you were an RSE worker, not recognizing differences between RSE and Work Visa Pacific people.

→ Different employment contracts and visas caused confusion and difficulty for Pacific RSE workers seeking support, with a need for translators to ensure Pacific workers know how and where to access support.

→ Different Pacific communities came together to support one another during challenging times, building new connections and relationships, with calls for more conversations that bring the Tairāwhiti Pacific community together.

→ Relationships between Pacific and Māori leaders strengthened during this time, with marae becoming highly valued places of support for some in the Pacific community.

→ Some in the Pacific community feel that their connections with health providers and other key agencies were improved through the event. Local and national governmental agencies need to recognize the distinctive East Coast Pacific identities, values and needs, which are not the same as those living in Auckland or Wellington.

→ Some observed positive changes to how Immigration treats RSE and Pacific people on working visas since Cyclone Gabrielle.

Recommendation

- **Employers of RSE workers should be prepared for extreme weather events and have resources and plans in place should an event occur (i.e., water, generators, torches, candles and food, evacuation plans, first aid kit).**
- **Calls for governmental agencies to work with the Tairāwhiti Pacific community to better understand their unique identities, needs and values.**
- **Translators are important for ensuring Pacific workers know how and where to access support during and after an extreme weather event.**

2.5.2 Illustrative Quotes

Church support

The role of the church, bring the people together, for us, and also the church will look at those who are poor, or they need help. Not only helping poor and everything, but they will have to go and visit them, and prayer for them, mmm. And talk to them, so that they can feel they are looked after... I can see the people coming together, working together. Those people from Auckland, they came and brought trucks with the local food. And we share it at our church, not only the Tongan, but all the Pacific Island people. We share, like before the government helped, the SIAOLA group (Tongan Methodist church) arrived. - *(Tongan elder)*

We ring around and by the time the cyclone hit New Zealand, we can ring around to our people. Otherwise we run around and see. We can target the families that we know they [will need support]. So we targeted, and if we have food, we will say to them, and if they need help, a vehicle to get to school, or doctors. But usually some day we all meet in our church, different churches. And the way we go at the church, we knows everything which family to help, which family is okay. We find it out from the church. - *(Tongan elder)*

It happened, [some are worried] but they prayer, and they sometimes, as I said before, they're getting used to it. It's not a new thing for them, yeah, yeah. But sometimes most of the thing has happened to them, they can cope with it eh? You have prayed to God to keep you comfort, ask him, look after my family. - *(Tongan elder)*

Pacific community groups support for community

I think we had something like 30 something... Fijians alone who were displaced so they had nowhere to live. And then the fear of that and then their families and, oh God, in Fiji and all that stuff not knowing what was happening to them. That was pretty stink. - *(Samoan-Māori woman)*

I think the responsibility of being our organisation and being responsive to young people, it meant that we had to respond to the young people and their families and their communities. But in saying that, it wasn't a 'have to', ilt was an 'of course' we were gonna do it, 'cause it's a natural thing. So, yes, it did affect our staff, you know, our nine to five whatever you wanna call that wasn't nine to five. It was nine to 11, sometimes it was eight to 11pm. Lots of us, you know, 'cause the rains still came and went, there was a lot of anxiety around what that meant. ...being a responsive organisation. - *(Samoan-Māori woman)*

Fijians, northern Fijians cannot, you know, they need more than Fijian time. And Samoans need Samoan time and Tongans need Tongan time. There's a lot of pressure on us to hurry up and make some decisions and put some bloody recovery plan together and all this stuff. And it's like we're still trying to get over being forgotten about, you bastards, you know? You know, we're still trying to recover from not being paid over that time for the two months and then having to, you know? What people don't understand is that some of our people actually were told by landlords that they needed to get out of the house because they couldn't afford the rent. Well, the thing is how could they afford the rent if they're not being paid? - *(Samoan-Māori woman)*

I think our village (Pacific non-profit organization) itself was like the marae, it was like the path for our Pacific people. We had the Fijian community, Samoan community, Rarotongan community, Tongan community. They all feed and all gathered at the village, like it was their marae. So that was probably one positive that came out of it, was that they united, the Pacific peoples, which was awesome and I'm glad we had a space for them to come to. - *(wahine Māori, social service leader)*

Pacific resilience and cultural knowledge

Fijians and every other Pacific nation, people who are living in Aotearoa now, they're used to cyclones. So, but what they're not used to is the non-mahi tahi of the whole, everyone. So, I think that was a bit of, I think that's what created the anxiety was that they were doing just like the marae were doing, just like all of (Pacific non-profit organization) was doing. - *(Samoan-Māori woman)*

We were not prepared for cyclone... but with our experience from back on the Island, when a cyclone hit Tonga... we always prepare ourself. Because there were three or four cyclone a year, so people are getting used to it. And when they had the radio, the radio announce prepare, that's what we prepare. But when we come to New Zealand, we already prepared for that. And people, if there are people, they have no food, have no shelter, we have to help each other. We ring around and see if there is any family that need help, or need food, or need anything. That's how we do it at the Island, and we'll continue doing it here. - *(Tongan elder)*

For me it's different, different way. The cyclone hit Tonga, and also the cyclone hit here. ... but over in Tonga you have to look after yourself. If the cyclone hit Tonga, people in the village and the town will get together in the church hall, or church. They all, somewhere that we all stay together there for a night, two nights, or some days. And we're together. - *(Tongan elder)*

Our life back home in Tonga. No cost. Voluntarily helping one another. We don't work for money in Tonga, like to pay to help, no. That's how our life is. If you have no food, you go to my plantation and get some there. We help each there, we help each other here. - *(Tongan elder)*

Residency status discrimination & vulnerability

...in the eye of the storm, our people, because they didn't hold citizenship and stuff like that, They weren't looked after. ...if you were going to rank and rate who needed to be looked after first, it definitely wasn't us. And I think that's why it was so hurtful for a lot of our Pasifika crew and why there was so much emotion was that they really did feel like they were being forgotten about. Excuse my language. No, that's real. - *(Samoan-Māori woman)*

...there needs to be time given to us as a Pacific people's in Tairāwhiti to actually come together more and have the many conversations that we need to have first within our own Pacific nations and then secondly, as a Pacific collective of people living in Tairāwhiti. - *(Samoan-Māori woman)*

...it's highlighted the need for real, a Tairāwhiti Pasifika thing to come together. ...Tairāwhiti has generations of Pasifika people now being born into Tairāwhiti, you know? We're half halves, you know, we're not just Samoan, we're Samoan and Ngāti Porou or, oh some of us are Samoan, Ngāti Porou and Indian, you know? Some of us are Samoan and Cookie and then Māori. 2023 has highlighted that there needs to be again some time for the Pacific community... to collate what it means to be Pasifika... What is our unique Pasifika existence within Tairāwhiti and what our identity is as Pasifika living in Tairāwhiti. - *(Samoan-Māori woman)*

... we are unique islanders who have chosen to in this part of the motu. We're not Auckland or Wellington islanders, we're the East Coast islanders, you know? I think there's something, there is something unique about that. There's a lot of us that talk about that, that we're not the city islanders, we don't have the same pressures or outlook in terms of our existence here in Aotearoa? Because we've got different values and we've also got different family make-ups, you know?
- *(Samoan-Māori woman)*

Humility and hiding emotional struggle

Yeah there's a struggle there, but they don't want to show it because they know that if they bring in their struggle and people are struggling too, it wouldn't help anybody. So there was one, I think there's so much love, there's so much kindness after this cyclone. And I think that's what we need in those times, in struggling times, the moments. But it is hard to see Fijians being stubborn at that time and struggling, you know? To really see that they were struggling. Because out of all those smiling faces, they were actually hiding something secretly behind. - *(Fijian, City)*

Access to health support

Some of our people, some of our girls, they are nurse, and they get to communication from there. Plus our community, Pacific Island community have communication to the Health department. There are some our people working there, mmm. And there are some that interpret our language from our Pacific Island and community trust.
- *(Tongan elder)*

They [employer] came and told us to go to the hospital. Tthey told us to go to the place, which is also for the SRC, they took us there and we got water, food, we got some medicine from them for back pain (all laughed). One of them [nurse] is from Kiribati, works for them, that is why we speak in Kiribati. She came from Hamilton.
- *(male Kiribati RSE worker)*

...one had major medical conditions. ...the card was expired so he was trying to renew it. But, he was thinking 'cause if he do it himself then it will take a long time to process to get a new one. So he went through the community and he managed to get that straight away, so yeah. Yeah the, one of the positive side that we see about the cyclone is that it got us connected. - *(Fijian, City)*

Worries for family

...I have children in Kiribati, so when the storm happened, I was worried in case there is anything happened with me. ...We all had the same problem at that time, they all needed to contact their family. - *(Kiribati RSE worker)*

Financial hardship, employer negligence

And then we were promised by some of our employers, that you know, they will get money. But, there was just a lot of excuses around. It was, yeah it was really hard, yeah. - *(Fijian, City)*

But when a cyclone goes down, it's kind of like where is the responsibility of that private contractor and then the immigration, NZI, to actually ensure that those private contractors are fulfilling their responsibilities as an employer. So there's human rights stuff, all of that kind of stuff in it and I didn't see that. - *(Samoan-Māori woman)*

...they didn't know when they were gonna get paid. They haven't been paid for the two weeks prior to the cyclone and then, you know, post-cyclone. I mean, let's say six to eight weeks post-cyclone, they were still fighting to get their money.
- *(Samoan-Māori woman)*

...there was a couple of Pacific picking gangs [in the Hawkes Bay] that were left on the mountain and they forgot about them. So, yeah, you took them to safety, but you forgot about them so they had to spend the night in the rain with nothing because somebody forgot that they were up there.
- *(Samoan-Māori woman)*

Job was affected, because the flooding affect the farmers. Yeah. And when the water line thing calmed down, they start going back to work. Mmm. But they were affected, yeah, a week, or more than a week. But the other farmers, they were most affected. Our people come over and there were some, some that have needs. They come and work there and those who are okay, they come out from that place. So that those people can work, mmm. [job sharing so that those who were unable to work on effected farms still had some income]. - *(Tongan elder)*

And then when we started back into the forest access was okay. It just allowed us to go in, in four-wheel drives for work. We are there at the work site, but not paid because we couldn't do the work because of the situation within the forest. Like slides and giveaways and broken trees. It was just hard to get into the forest because there were hazards in there that could really cause slides. You were able to get to the forest, but into the forest that was another problem. And my thinking was like oh we're here now, probably we're going to get paid. But, then when we came back after a week, nothing... They didn't, we never got paid. We never got paid because they said oh you just worked here, you can't get into the forest.
- *(Fijian male, City)*

You know the worst part when we get to the counter, when they have, and then we're pushing our carts, they say it's not enough. We can't put the food back, oh we've got to put back our snacks. And one day I remember, our youngest came in and said dad, it's okay I won't get these because I know you don't have money.
- *(Fijian male, City)*

RSE resilience

We used to have a meeting and talked about what happened, that way we can cook our own food and share. When we come back from work, we talked amongst ourselves, we cooked in a group. Communicating with people, it is very important to Kiribati. - *(male Kiribati RSE worker)*

We mainly experienced bad weather in Kiribati in relation to sea, such as high tide, sea level rise. [Here it was] the wind and we are afraid of the light being turned off, the internet was off. We looked after each other, but the main thing at that time was the power, because we had no power at that time. We tried our culture, started cooking, we took the stainless bucket and cooked inside. Just we needed water, because the pump was not working. - *(male Kiribati RSE worker)*

Visa status exacerbates vulnerability

...it's a whole lot of that visa status stuff and what they thought and they were entitled to and not entitled to. And then the fear of not being able to get anything and then, oh it was pretty gross.
- *(Samoan-Māori woman)*

Out of work, out of work yeah, we just stayed home and that's how, that's how our bills just accumulated, you know? And then we tried to catch up and we couldn't. We're still trying to get that off. Yeah and the saddest thing is that most of our community people, they were on a work visa as

well. And that actually sides up from the Amnesty requirements that you have to be a, well during the cyclone everybody gets paid. But, after the cyclone then they go back to their requirements that you have to be resident and it's tough.
- *(male Fijian, City)*

Language barriers to receiving support

...vocal members of the Pacific community were asking MBIE and all the departments...where are the translators for, you know, for these groups to ensure that they understood what they were entitled to under the RSE programme and all that kind of stuff. - *(Samoan-Māori woman)*

But, for us as Fijians there are some language barriers, it's really hard when it strikes and then we just have to run around and try and get this information to them. - *(male Fijian, City)*

Different Pacific Island Nation Communities supporting each other

One thing I found was the communities were really strong together. You know, like it was just part of family members. People were just connecting and saying hi, how's it going? What do you need? Is there a problem? You know, all along we've been like under the radar, with little things.....But, now this cyclone has actually opened up the door and the opportunities for us. I think that was one of the things, a positive outcome that comes out from this cyclone. That it has opened up major opportunities and major doors to the Fijian community to come out and actually say that yes we are here. - *(male Fijian, City)*

We also thank our communities, the different communities. The different Pacific Island communities, all the help that they have showed us. They have supported us. ...the Pacific brothers and sisters are connected together during those times of needs. - *(male Fijian, City)*

More people are kind of getting involved in response to what a Pacific leadership group would look like in order to respond as one kind of voice without, one voice that kind of captures all voices of the make-up of the Pacific community, living in Tairāwhiti. - *(Samoan-Māori woman)*

Pacific & Māori connections strengthened

And I think that was another thing that was evident was the Pacific community being able to go into like fully, you know, yeah, probably like Te Karaka. ...we're helping out because this is just what we do and I actually think that's a very Pacific way.
- *(Samoan-Māori woman)*

...I was really, really happy and warmed my heart and made my eyes cry was the coming together of Māori and Pasifika. - *(Samoan-Māori woman)*

...we had 164 Fijians come here during the course, but every meal time, we'd have at least anything from 30 to 80 of them coming because during that time they were all put off... it was absolutely disgusting what happened to them... we were feeding them you know, giving them kai 'cause they're men like –The lovely thing about it though was they'd stay here all day to help us move, do, whatever. ...it's actually formed a really strong bond with them... ...it's just built that relationship with us ... and when I went to help get some money for them and they said why would you help the Fijians, I said... As Māori, we say ngā tuakana o te Moana-nui-ā-Kiwa... well, you know, whakaringaringa tērā mahi. And so now we have a lovely relationship with them.
- *(wahine Māori, marae leader)*

...we had 164 Fijians come here during the course, but every meal time, we'd have at least anything from 30 to 80 of them coming because during that time they were all put off... it was absolutely disgusting what happened to them... we were feeding them you know, giving them kai 'cause they're men like –The lovely thing about it though was they'd stay here all day to help us move, do, whatever. ...So much so it's actually formed a really strong bond with them... and one of them actually works for us now. ...so we've got a really good relationship with the Fijian community. The Tongan community, so every day we would open our day with karakia by [Tongan elder]. So him and his wife and this other koroua would come every day and I'd say to him, he'd stay till after dinner, I sald go home and rest. He goes, no, [I] sit here. I said, why [you] sit here all day? 'cause he wants to do something and, of course, none of us will let him so, he goes, no, 'cause I want people see [me] and say Tongan people thank Ngāti Oneone and Poho Rāwiri. And I said, that's so beautiful... and it helped too because then his people would see him ... Otherwise they're shy and whakamā wouldn't come... now [he's] here almost every other day.
- *(wahine Māori, marae leader)*

.. And then the Te Karaka lot realising that actually, these Fijians who were actually needing stuff were the same ones that had been coming out every day to support and get rid of the mud and all that kind of stuff. So there's a lot of tears that were cried, you know, were crying out of their eyeballs because just that whole tuakana kind of thing, you know? Everyone coming together. And now as a result, there's the beginning of a solid relationship forming between different marae and different communities, Pasifika communities. So, that's one of the cool things that's come out of it.
- *(Samoan-Māori woman)*

Local & Central Government

... no government departments wants to take ownership that actually they didn't fulfil their commitment to the people that they had brought into the country to do the work.
- *(Samoan-Māori woman)*

...we're still recovering from that and I believe that the government departments who are trying to push us to come up with this frickin' health plan and all this kind of stuff, it's not because we don't know what we need. It's we need time to articulate it in our way and then we'll present it to you in our way. ...And I'm just like, well, hold up, whose timeline are we going with? - *(Samoan-Māori woman)*

Needs to happen in order for the government to actually understand what regional Pasifika needs are. Because they lump us too much into, oh well, there's 250,000 Samoans. ....So I believe that there needs to be a bespoke research(y) kind of aupapa that needs to come out of what's happened in the cyclone for Pacific nations living in Tairāwhiti and living on the East Coast of Aotearoa.
- *(Samoan-Māori woman)*

These are some of the things that I think local government and the government in terms of how they respond to us as Pacific people in Tairāwhiti. This is some of the things that they actually have to take into consideration. - *(Samoan-Māori woman)*

So far we've had six immigration officers that came down here and they're still visiting us, you know? Most of the time... you're under Section 61 meaning you're overstaying, but what's happening now, they're coming to visit us and saying hey your visa is here, this is what you need to do. I'm going back to the office and I'm going to make sure you put this through and I'll wait. That is not down to the ground and then makes us feel we've been listened to. We're not going to get deported. We have families back home and they're depending on us to be here.
- *(male Fijian, City)*

Yes, to be honest I feel proud, because I tend to know people and people that hold some positions in the government. And now I know where to go and what to do. Now I made a few times with the police officers. We have met a few times with the mayor, and MBI staff and Amnesty staff. And, you know, just, the Minister of Pacific people and most of the community leaders that live together.
- *(male Fijian, City)*

There's still recovery that needs to happen and I feel like, at the moment...I tried to Te Whatu Ora, you know, I know that they're doing the whole, you know, they're responding now, eh? It's that kind of late response and but actually, this whole thinking around, you know, better late than never. Well, actually, it's not better late than never. It's that if you're gonna respond, then don't respond on your terms. Respond on our terms, you know, on the Pacific people's terms. And that is respect the fact that we've had, oh that's another thing . in that time of the cyclone, people in our families between then and now have died. And that might not be a direct result in terms of, you know, it's not like a tree fell on their house or anything. ...the mamae that was carried from that time where you weren't being paid, you were displaced, you know, we didn't know what was going on. Our families from all over the place were wondering if we were still alive... And then having some of our people die between now and then. We're in mourning from being forgotten and then being in mourning from actually having to look after our deaths and stuff in light of, you know, this year. Like, it hasn't been a good year. - *(Samoan-Māori woman)*

"I was really, really happy and it warmed my heart and made my eyes cry was the coming together of Māori and Pasifika.

(Samoan-Māori woman)

2.6 Gender

2.6.1 Key Findings

- → Women carried high levels of emotional labour and care work in their families, communities and organisations, often doing much of the caring for children, elderly parents and other vulnerable family members.
- → Health needs specific to women (and people who menstruate) important to consider: Menstrual products included in care packages much appreciated by those have been displaced or are living in need (See Community Hubs).
- → Innovative, empathetic and responsive approaches developed by women in leadership roles (i.e., local government, marae, schools, non-profit, social services), responding to the varied needs of their communities.
- → The most effective community hubs were led by women with high levels of community knowledge, relationships, organisational skills, compassion, and empathy. Our findings thus show parallels with a recent Australian report titled 'Women's leadership and a community 'saving itself'' focused on the health and well-being impacts of the Northern Rivers flood in February 2022 New South Wales. As in the Australian case, in Te Tairāwhiti, "the community-based response was spontaneous yet hugely sophisticated in its mobilisation. Unexpected findings show responsive leadership was predominantly undertaken by women"[1]
- → Our findings also extend the Australian research, showing the importance of Indigenous women's leadership. In the context of Te Tairāwhiti, wahine Māori effectively led community hubs (i.e., Te Poho-o-Rāwiri, Te Karaka School) drawing upon their cultural values of manaakitanga, aroha and tautoko to support their communities in a time of great need. In so doing, they worked effectively with agencies and organizations, while ensuring the spaces they manage (marae, schools) remain safe places for their communities to visit and be vulnerable (see 'Community Hubs').
- → Women leaders of local organisations (particularly local government) faced heightened levels of abuse, impacting their own health and wellbeing.
- → While men demonstrated less emotion in many of the interviews, they too were grieving deeply for their own and others losses, and expressed strong concerns for the future of Te Tairāwhiti. Job losses, livelihood concerns, damage to homes, properties and farms, and rural masculinity (unwillingness to show vulnerability or seek out support) has led to increased mental health concern among rural men (particularly in forestry, farming and horticulture).
- → LGBTQI+ community lacking systems of support, increased feelings of isolation, and health needs of those undergoing medical treatment (i.e., HRT) (see 2.7 'Specialist Services').

1 Foote, W., Alston, M., Betts, D., & McEwan, T. (2024). Women's leadership and a community 'saving itself': learning from disasters, health and well-being impacts of the Northern Rivers flood. http://dx.doi.org/10.25817/0ekg-2e83

Recommendation

It is important to consider how gender impacts the mental health effects of extreme weather events, and the need for targeted support for different groups and communities, and for those who feel unable to seek out support due to gendered norms (i.e., rural masculinity).

Photo courtesy of the Gisborne District Council

2.6.2 Illustrative Quotes

Women and emotional labour

I only stress out if mum stresses out. If she's all good, then it's all good. And she can hold a lot on her shoulders, so, yeah. ...So, you know, we supported each other and everybody else who needed it.
- *(wahine Māori, business owner, Gisborne City)*

My son is a truck driver. Sometimes he goes right up into the middle of nowhere. So whenever we hear the heavy rain it's like 'okay, you're gonna be off the road', which means I don't have to worry about the babies. 'Cause he'll be home for them, so it's like have you got work, have you not got work? And then for the babies, it's making sure that they have the things that they need.
- *(wahine Māori, social services, Gisborne City*)

Another thing I was concerned about is the Waipaoa River behind us because that was right up when we came across the bridge. So if the Waipaoa broke and we're standing there and we haven't got mum out and we haven't got back across the bridge to town, my then 16 year old son is home alone and I'm also starting to worry about my daughter, son-in-law and two grandchildren that live at Tolaga Bay.
- *(wahine Māori, Gisborne City)*

Abuse of women in leadership roles

If it wasn't [us], and we had two males there, they would never have got the abuse we've had and the treatment that we've had from some of our own, never, ever. I have no doubt in my mind that being woman has also made us an easy target.
- *(wahine Māori, leadership role, city)*

I got attacked online by an iwi leader, and I had one of my good friends mum ring me. And say I just want you to be careful, make sure you're not walking outside by yourself. You know make sure that you go home and, you know, and in daylight. Or, you know that someone's there with you in this period of time, because of the trauma. And how people were feeling might personalise an attack on me. I was like 'nah, I'm all good,' I actually hadn't thought about it until she gave me that advice. So I rang the area commander and they did a bit of a search around to see if the post had been shared and things like that.' And whether there was any contact, they couldn't find anything, which was good and reassuring. But, you know it's the reality of what we are kind of living in.
- *(wahine Māori, leadership role, city)*

Gendered health needs in evacuation and recovery

We had children, we had women with us who had nothing, so when, I say everything, they'd lost, like things like bras and undies were, for us so common. But it was like when you don't have them, and you have your period, you're in dire straits basically.
- *(woman Māori, school leader, rural)*

Rural men's mental health and wellbeing

The men in our management team are the ones out there pretty much, you know, on the ground in the nurseries, on the ground. They just don't get a break, there's just no break for them. And I think in terms of the wider sort of horticultural sector, I think there's still a very much of that suck it up, stoic, 'she'll be right' attitude.
- *(elderly Māori-Pākehā woman, horticulture)*

But like the days after Cyclone Gabrielle, just looking out here, and there would be like a trail, oh man a huge queue of forestry logging trucks. I mean the Utes, Utes, and broken men, and I knew that they were here to see me. ...they came because they copped a lot of abuse, they copped a lot of abuse. ...Oh it was bad, like, you know in the supermarket they would get attacked in the supermarket with their kids, wearing a high viz, yeah. - *(Pākehā woman, mental health)*

...we worry about our rural community, 'cause that's our extended whānau and friends... That farmer out there, he's the coach of my son's rugby team. ... if that man took his life, how is that gonna impact my community? I know 'cause I've seen it happen 10 times with male friends.
- *(Pākehā woman, mental health)*

...older farmers especially, when they are just about to walk off the farm (retire). Now they can't 'cause... their farms have devalued mammothly. So that financial stress, and a farmer doesn't go into that space being wealthy. It's a huge asset, it's a mammoth asset which they have to financially cover. ...that's sad, because then there's a lot of resentment builds up. And then children carry the stress, and the worry, and the anguish, yeah. It's really hard on the families, extended families. - *(Pākehā woman, mental health)*

We packed that out at 500, yeah. And some of those people, it was the first time that they'd ever taken themselves to a mental health event. And I had many mental health professionals under government agencies saying why are you doing this? Stay in your lane! But I was like well obviously I'm gonna do this for the people, because I can see it's needed, and they cried. We had 43 people message that week after [the event], predominantly farmers just saying thank you, thank you. 'Cause they didn't know, they kinda, if you haven't got things tailored to them that, in a way that they can connect, it doesn't.
- *(Pākehā woman, mental health*)

They won't connect, but we did it, we brought in an old sports commentator, Hamish McKay and, you know the rural blokes can resonate with that. So that softens that, and then we hit them with the skills and the coping strategies. ... it just showed how much it was needed, yeah. And then the months after that, definitely escalated, definitely escalated. People are running out of hope. Our weekly intake for us has doubled, yeah, yeah. Monday's always the worst, because people have had time to stop and drink on the weekend.
- *(Pākehā woman, mental health)*

I'm also very aware that if there wasn't mental health advocates like us, there'd be a massive amount of people that would still not be here. And the only reason I say that is that there's been a couple of boys that have been in a shearing shed in a situation very close to not existent. Where they've tried to ring other services, without naming things and their case hasn't been strong enough. Because they haven't felt like that they could break down and confide to those people. That's not the professional's fault, it's just a connection thing, yeah. So I'm like, you know these lived experienced mentors and peer support are very, very needed in this mental health space. Because their approach to mental health is different, it's valuable, it's so valuable. ... So we have had cases where the boys have rung and I've gone 'you have to ring this other number'. This is What you've gotta do, but I will help you ring, even though it's put me in a situation where I know, looking policy-wise, it's probably not, you know. I'm not ticking all the right boxes, but I've stepped out of that lane for the greater good.
- *(Pākehā woman, mental health)*

2.7 Recent Immigrants

2.7.1 Key Findings

- → Language barriers and unfamiliarity with systems made it very difficult for some in the im/migrant community to access the medical, social and financial support they needed.
- → Cultural and geographical differences in emergency communications and recovery processes caused some confusion and uncertainty, including feelings of shame when needing help from others.
- → Living far away from family and social supports can cause additional challenges for recent immigrants.
- → Some immigrant workers felt exploited by their organisations and a lack of respect and care for them and their families.

Recommendation

Recent immigrants should be provided (i.e., by Council, employers) with emergency information, evacuation plans and processes, and targeted support following extreme weather events.

2.7.2 Illustrative Quotes

Language barriers

...we've got a lady in our corps and she's Chinese, so English for her is not very strong. So when she was getting those phone calls, you know, and it goes do-do-do, you know, warnings. Evacuate. Yeah, I mean she was freaking out. She didn't know what it was...Freaking out, you know. And so she, you know, at some ridiculous hour of night, no vehicle, took herself somewhere and got herself there. But then when she came out of that she was drinking the water not knowing that she shouldn't be drinking the water, so she ended up in hospital for three or four days. And so when we saw her we were like oh. Oh very sick, hospital, hospital, water, don't drink, you know. And then I said well yeah, you should know don't drink water, and then she didn't. But 'cause she's got no vehicle getting water for her was an issue. Simple as that. - *(tāne Māori, not-for-profit org leader)*

Family and friend support networks overseas

People doesn't realise, like if they see me, they see me as an Indian. I've told to my close mates, but yeah, but one family from one state in India, it's just like I'm from another country for other Indians. Like I don't understand their language, I don't talk their language, so it is a little bit more different here than what... we were always giving people, so I'm hesitant to get help. People don't go there, get clothes, go there, get food, I don't wanna go anywhere to get food. We were always giving. It is really, really tough for me, I'm willing to spend, but it is really tough. I don't know, I would cry, I can stay without instead of go ask for food, or get the parcels... I always had new clothes, but it's okay. But at that point I have to live for a week, it's okay, but I found in one of the bags, a torn bed sheet and I cried for an hour. It hurts me, I just wanna throw it in a bin, but I don't want that, I never asked you. It is, I don't know, I never got second-hand clothes before, I've never in my life, so it's tough.
- *(Indian woman, recent migrant, Gisborne City)*

Employer exploitation of migrant vulnerability

...he's like yeah I know you are stressed, but you know you wanted challenging work, so do this work. And I had to fix the thing after the water thing, they have, they are setting a new water plant. I have to try finding funding for that, after flood... people are taking breaks, but I couldn't take a break because I need money... Tuesday I went back to work. And my manager was not there, it was so horrible. I went through all of that, so we fixed the water thing, we made the council happy, so the projects moved on. And after two months the company realised the water project had died and the investor has gone. ... I'm not a permanent employee, I was part-time, so I'm the one going to be out first... my manager was a little bit hard on me... I was not treated good... I felt like there was no empathy, that's all... I wanted to run out of this town, but my husband loved his job in this town... I'm a mum, so I'm here. so that three months was tough,... the mental stress of whatever we went through, it's still living with us.
- *(Indian woman, recent migrant, Gisborne City)*

I had really good branded ones [clothes] before flood and people have seen me in that. And after that [evacuation] I could not build that back even after today. I'm trying to, but I did not have good shoes to go to office. It was, it made me feel so bad, but I still dealt with whatever best I had it.
- *(Indian woman, recent migrant, Gisborne City)*

When I came here the government couldn't see us, and I understood that, because the roads are devastated, the water plant is devastated. And close families are supporting their own families, and they have nobody, I have delivered that. That's okay, I have delivered that for that one week, I was sleepless, I didn't know I'm gonna get this support, I guess somebody could have told me. One person should, we are going to be there for you, I'm going to give you this, but I have to live with that for a couple of months. And I think that could have changed a bit.
- *(Indian woman, recent migrant, Gisborne City)*

Everything went good until the flood. And after flood... I told my manager I've lost everything... My manager never ever came and saw where I lived, how I lived. And it was tough, and I went back to work and I have to fix things in the office... my general manager came to me... come let's meet and talk and I thought he's gonna talk about something about me. And then, but he gave me a high important task, a couple of tasks to me... then he's like yeah I know you are stressed, but you know you wanted challenging work, so do this work. And I had to fix the thing after the water thing, they have, they are setting a new water plant. I have to try finding funding for that, after flood... people are taking breaks, but I couldn't take a break because I need money... Tuesday I went back to work. And my manager was not there, it was so horrible. I went through all of that, so we fixed the water thing, we made the council happy, so the projects moved on. And after two months the company realised the water project died the investor has gone? [1.09.55]. You've done something wrong, like they cannot move on with the financial side, so they're gonna cut down the employees... I'm not a permanent employee, I was part-time, so I'm the one going to be out first... my manager was a little bit hard on me... I was not treated good... I felt like there was no empathy, that's all... I wanted to run out of this town, but my husband loved his job in this town... I'm a mum, so I'm here. so that three months was tough, like I had to go to interviews and yeah, but yeah a lot of toughness, forget it. I am here, yeah, I'm positive, I'm happy, but the mental stress of whatever we went through, it's still living with us. Like I could feel it, yeah.
- *(Indian woman, recent migrant, Gisborne City)*

Photo Credit. Josie McClutchie

2.8 Workers and Volunteers

2.8.1 Key Findings

- → Volunteers discussed the positive emotions and wellbeing benefits associated with being in-action and involved in supporting their communities during and after extreme weather events. Others described a desire to be more involved in recovery efforts but unsure or unable to contribute. In particular, rangatahi, pakeke and some with disabilities spoke of wanting to be able to help, feeling guilty about not being able to help, and/or not knowing how best to support recovery efforts.
- → Volunteers involved in the recovery processes experienced considerable stress from witnessing such trauma in their communities. Some did not receive adequate training prior to the event, putting their own health and wellbeing at risk.
- → Some volunteers experienced significant degrees of mental health impacts, including depression, in the weeks and months after the event.
- → Many workers were expected to pick-up new roles and responsibilities during and after the State of Emergency, that put additional stress on staff, impacting their health and wellbeing, and potentially creating risk to themselves and those they served.
- → Some for- and not-for-profit organisations and volunteer groups recognised the toll on their staff and volunteers, and provided a range of support (i.e., cash payments, counselling, time off, wānanga), whereas other businesses and organisations expected staff to return to work with little acknowledgement of what they might have experienced at home (i.e., evacuations) or witnessed through their work.

Recommendation

There is the potential to activate those in the community with a desire (i.e., rangatahi, pakeke) to be more involved in volunteer work, that may take many shapes and forms beyond the physical work of shovelling silt or preparing kai packages.

There are also many health and wellbeing benefits when individuals feel capable, valuable and in-action, rather than feeling unhelpful or a drain on resources. It is thus important to reconsider what support/help looks like in the recovery process, and how to activate and engage those in the community who are willing to help but are unsure how they can best contribute.

Developing a more robust network of volunteers (with adequate training) is important for sharing the huge workloads, and thus more sustainable systems of recovery and support.

Employers should be responsive to the health and wellbeing needs of their staff and volunteers during and in the weeks and months following an extreme weather event. Rather than a haphazard approach, adequate support structures should be in place for all staff and volunteers to receive the psycho-social support that best aligns with their needs and cultural preferences.

2.8.2 Illustrative Quotes

Volunteering: The Power of Being in Action

You know how they've made us feel being the volunteers? Marvellous. We were actually able to get in there and help the community.
- *(tāne Māori, mahia taiao, rural)*

It's just overwhelming just for a person like me, 'cause I'm only young, 21. Just seeing everyone that's hiding all the hurt. No one really asks for help around here unless... Yeah, but once you do it aye, they're thankful as, you know. They're grateful. That's when the tears come, thanks. Some of them are the ones that taught these fullas at school too, you know. And all I just wanna do is just give back to the community now.
- *(tāne Māori, rangatahi, east coast)*

I rang a couple of my friends who are young men who are looking at changing their lives. And I said can you help? An hour later he had 12 Black Power guys down there and they spent a week digging [name redacted] house out of the mud. And those are the sorts of amazing things that have happened, you know through this adversity. A number of so-called 'liabilities' in our community, are being seen as assets because they got stuck into helping...I'm amazed at their desire to help, and in fact I suppose Gabrielle, for most people, was a real curse. For them it's been a blessing because it's given them the opportunity to be seen by the community as assets, rather than liabilities. And that's a very powerful part of this whole process. The potential that these young guys have are incredible. - *(kaumātua, Kaiti)*

...on reflection is, because we in our way like kids don't really have a say. So, it's a wish, but if it's been mentioned, I'm not sure it'll be heard. Like, 'cause I did mention it to my mum like, "hey, why don't our church leaders like, you know, gather us into church and see who needed blankets, who needed food"...That's just a reflection on what we can do in the future, but hopefully coming from the adults and not from us, 'cause it might be heard more. That was really what I wished happened during those dark days. Those four days of no communication.
- *(Pacific woman, rangatahi)*

...when I heard [about] Te Karaka, I wasn't confident to come out 'cause I didn't know anyone from there. ...but I wish I was more out there to help, yeah. I was too scared to even like step out of my house. That's one thing for me is to be more out there and see where they need help and don't be scared.
- *(Pacific woman, rangatahi)*

Unfortunately I wasn't able to get around and check out things and people, because I have macular degeneration, and I can't drive. So this 83 year old half blind cripple with Parkinson's, he's a bit restricted in what he can do in that way. I felt a bit guilty... - *(kaumātua, Kaiti)*

I've been living with a chronic illness for a really long time.... so I had to be really careful, which made me feel guilty about not being in the community helping, which like adds to the anxiety. 'Cause you're like oh there's people who are hurting so much, I wanna go out and help them. But I physically cannot, now I'm sitting in my house, in my nice dry house and they're out there trying to find a place to live. It's like oh, so there's that added guilt on it as well.
- *(wahine Maori, chronic illness, city)*

Work related stressors

I'm put on an important project that I have to take with the water thing and solve with the Council. So I have to work for the council and everything, but the role was supposed to be done by my manager. But she thought she needs a break, because her mum was sick. She was not there for those two crucial important weeks where the whole town is devasted and where GDC's coming for and visit. If the visit doesn't go well they have to stop the factory, so it's a huge pressure on the person who is taking the person, so it's me. And it's not my job, but I went through that also in work, and the part that was really tough to me.
- *(Indian woman, recent migrant, Gisborne City)*

I lost everything, went into the office like a homeless, I still work because I need money. Yeah and that's another stress again and just three months off, like yeah... they are private organisation, they just simply closed and it is not just me. There are so many employees who lost their jobs. Yeah. I was not poor, we could manage with food and everything, but still what I've lost, I wanted to get it back so fast.
- *(Indian woman, recent migrant, Gisborne City)*

It was terrible. That's the most scariest experience to be able to see it, and that's what was my job was to drive out there and talk to these families and explain to them that we're coming in to help with some volunteers. This is where I was getting all the stories and everybody's telling me their experiences and hearing the effects of it all and people crying at you, full grown men, wives, kids, trying to tell you the story. And then there's some people that were okay, but they've seen the devastation to their neighbours and heard the stories about other people and they were sort of like ... their stories were really shaky.
- *(tāne Māori, volunteer lead, rural)*

Mental health impacts of working during a disaster

(also see 'Local government', 'Impacts on health staff', and 'Livelihoods')

I was not good, because it was seeing the impact on how it was for your own community whānau. I think it hit me quite a bit later on. I fell into depression. I think there was a lot of things that added in why I was going into depression. I think what I seen, what I experienced, what we experienced, and just life itself, just the whole thing just started getting ... I think it was quite overwhelming. It just built up over time. I'm still slightly in that at the moment, in healing therapy and all that sort of stuff, for the last probably six, seven months now, since Gabrielle. I'm just trying to get my wairua and my tīnana and everything back on place so I can start focusing.
- *(tāne Māori, volunteer lead, rural)*

...when it was happening we were just all over the place. I was tired, drained...we didn't look at those things until you finished ...until it was all back to normal. - *(wahine Māori, first responder, east coast)*

I was volunteering on the welfare team and we set up the evacuation centres. The house of breakthrough, which was the biggest one, and I just have memories of just like I was buzzing. I think adrenalin just kicks in and then you're just like, you're in this mode, but I just remember, yeah, seeing the people affected. Like everyone coming in who had lost everything and that really, being able to absorb that. Because when you're doing the welfare check, or the needs assessment forms. And you're asking people what they need, and then that's like you're absorbing a lot of this information that is, yeah it was just, it gets to you... it was crazy, and just seeing, you know some people come in with no pants. Or like, I dunno, wanting to trade toilet paper for pants, so just like some of the state of like the poverty in Gisborne as well, is really, really present. And really visual to me at that time, which yeah, was a big, yeah just a memory that's

been sort of ingrained in my mind... I think for me the, there's a lot of anger that came up. Because I'm also a part of a community that is quite well off and so I was getting really angry that, why is there so much injustice? And like inequality, and yeah, getting angry at my friends that weren't helping. And I was like that's not helpful, it's not helpful to be angry, but yeah just all these emotions coming out, that you don't really know what to do with.
- *(Migrant woman, local government, Gisborne City)*

Employers and managers: Acknowledgement, Empathy and Support

You know it's recognised, your managers and that, from time to time, you know give you the pat on the pack and tell you what a great job you're doing. And, you know you're stepping up and all of that, but that only goes so far, you know? I mean the stints we did after, where we were working huge, huge hours... we're salaries, so there's no overtime payments or anything like that.
- *(Pākehā male, local government)*

There was a lot of tears shed and a lot of hugs, but once they had that break and that time off and the time with their family and themselves, I think they come to the point where they just man back up again. Got back on their feet and just got back into it...It was about almost a week after we had been part of the volunteer stuff and they had that week off and had time off to go and get themselves back together, and when we all got back together again, it was like everything was a start over again.
- *(tāne Māori, volunteer lead, rural)*

...I drove from house to house to see if they were okay, to see if they needed some cash to get them through.... ...Yeah, to go and get them their kai. And they all did. Fortunately, we had quite a bit of cash we hadn't banked, you see.. Tuesday morning when the cyclone hit, we still had a lot of cash so we were able to pay our staff in cash. Give them some money to help them out and if they needed more, they knew – ...So they were able to go get food for their houses...
- *(wahine Māori, business owner, city)*

We don't worry about ourselves... [but] we worry about our staff. Yeah, that they were going to be alright. 'Cause we knew we'd be alright, we always will be alright. Yeah, looking after our staff, eh? I mean, they look after us by working for us and doing a good job every day, yeah.
- *(wahine Māori, business owner, city)*

...you know we just checked in with each other, if it wasn't a good day, you know don't come [to work]. But to be honest the staff were quite resilient and so were the kids, 'cause once they got back into the routine of school, it felt as though things got back to normal(ish) a bit quickly.
- *(wahine Māori, school leader, rural)*

For my workers, they went through a bit of trauma, and I had to give them that time off to get back on track. My team, I had 12 of my crew there from mixed ages, ages from 18, 19 to 50. Yeah, they were very taken by – there was a lot of awhi in amongst the crew, my crew especially. I think, come the second week, they were starting to feel the crunches of the community, they were feeling the affects from the health, the wellbeing, the mental states. The exhaustion, the smell, everything overtalking. I did in my project offer counselling and we had organised counselling through the Māhaki to be able to come onboard if needed. I gave my team a few days off work for them to be able to get themselves together. The other group was a Jobs 4 Nature project and they came in with their big crew, they had about 16 workers, and yes, they were affected by this. When we had wānanga, and after all that all happened, and we had our wānanga together and we talked about the devastation and the effects, a lot of them did talk about how it had impacted in their wellbeing, how it impacted them mentally, physically, emotionally, financially. They could see if that was to happen to them, would they get the same help too? Yeah, there was a lot of tears shed and a lot of hugs, but once they had that break and that time off and the time with their family and themselves, I think they come to the point where they just man back up again. Got back on their feet and just got back into it.
- *(tāne Māori, mahi taiao, rural)*

"...when it was happening we were just all over the place. I was tired, drained... we didn't look at those things until you finished ...until it was all back to normal.

(wahine Māori, first responder, east coast)

2.9 Disability / Chronic Illness

2.9.1 Key Findings

- → Community members with various disabilities and/or chronic illnesses faced particular challenges during evacuations.
- → The stress and anxiety, and environmental hazards (i.e., silt, sewerage), of the extreme weather events exacerbated pre-existing chronic health conditions (i.e., asthma, blood pressure).
- → Pre-existing health conditions and disabilities meant some members of the community were isolated longer, or unable to access information, resources and support (i.e., clean water, medication) as needed.
- → Some people living with disabilities felt helpless, unable to support their communities in recovery processes.
- → Identified a need for a more systematic and coordinated response to provide care and a support network for those with disabilities and chronic conditions, particularly necessary for those living alone or without family close by. With communication down and transport limited, some were waiting a long time for support to come to them, and thus in a highly vulnerable position.

Recommendation

Health and disability organisations need to work with Civil Defence and first responders to ensure those with disabilities are contacted and supported if/when evacuations are necessary as there seem to be no planning specific to ensuring those residents with physical and intellectual disabilities had sufficient support to evacuate quickly and safely.

There is a need for a more systematic and coordinated response to provide care and a support network for those with disabilities and chronic conditions, particularly necessary for those living alone or without family close by. With communication down and transport limited, some were waiting a long time for support to come to them, and thus in a highly vulnerable position.

2.9.2 Illustrative Quotes

Challenges for evacuating and responding quickly

...once you saw the state of the river, and the other people being impacted by it the way they were....the stress, and anxiety, and worry that comes with that uncertainty...my ability to get out of a situation was limited. But I have amazing neighbours, and me and one of the neighbours had already decided that if this ever happens again we're getting out. And they have two trucks, and so they already said oh no we'll just put your animals in the car, and we'll chuck you in, and we'll go. And I was like cool, thank you, that's really helpful. So I feel safe, I feel good about that.
- *(wahine Māori, chronic illness, city)*

It's hard when you have mobility issues to think about 'am I gonna be able to get out of my house quickly?' And that's why we've also made the decision to leave before anyone gets evacuated. 'Cause if there's any flooding, or anything that is going to hinder my mobility, I can't get out. Like I physically can't, so I have to be more proactive in that sense, and 'cause I live on my own, so that also changes things.
- *(wahine Māori, chronic illness, city)*

I wouldn't have even been able to get my neighbour's, get them to look at me. And for me that's really dangerous, I'm pretty good at looking after myself, I've been chronically ill for a really long time. ...So there are things that I have in place that keep me safe, but if I had a medical emergency there was no way for me to contact anybody. Living on my own, there's no way I would have got to a hospital.
- *(wahine Māori, chronic illness, city)*

For people like me who are chronically ill, we tend to have it all on ManageMyHealth, but all the information's online, so you can just be like quick, here it is, sweet, thank you. So that was real difficult, the other thing that I thought was a little bit weird was when they said if you're having a medical emergency, to find a police officer. Because you couldn't ring the ambulance, you couldn't ring the hospital, you couldn't ring anybody. And I think they forgot that like medical emergency, like unless you're in town you're not gonna find a police officer.
- *(wahine Māori, chronic illness, city)*

They had extra police out, there was none around my place. So if I had had a medical emergency there was no way for me to contact anybody. Living on my own I wouldn't have even been able to get my neighbour's, get them to look at me. And for me that's really dangerous, I'm pretty good at looking after myself, I've been chronically ill for a really long time. I'm so good that I faint into recovery position. 'Cause I've fainted so much in my life that my body is trained to fall into that position, which tells you about how many times I've fainted as well. So there are things that I have in place that keep me safe, but if I had a medical emergency there's no way I would have got to a hospital.
- *(wahine Māori, chronic illness, city)*

Up-to-Date Information for Health and First Responders

Those with disabilities should be a list that's regularly updated, called, and then when things do happen, you've got that list. Doctors should have them. We need to have a database because when they have civil defence, they have – they have all the manpower, just need to give them the lists.
- *(wahine Māori, social recovery lead*)

That's a terrifying thought, the medication I'm on, I can't not take it, I have to take it. So if I had have got low on medication, I actually have no idea how I would have got more. But because I am young, I look healthy, I don't end up on lists for people to check on, so other than my own whānau, no one really checked on me. So no healthcare providers or anyone checked on me. And I think mostly 'cause there's so many other people they needed to check on, right? Like all of our kaumātua, they all need to be checked on and I'm glad that they do. But my sister is in the military and if she hadn't have gotten COVID just before the cyclone, she would have been with the group that came here. As it was she almost send soldiers to my door to knock on my door and check on me. 'Cause my family hadn't heard from me yet, but lucky Jenny-May ended up at council and I managed to get myself down there and put a notice out to be like we're fine. We're okay, which was a massive relief for my family, but they would have been thinking the same thing. If there's no comms how were they contacting the ambulance? If she has a medical emergency how is she contacting anybody? I can't ring anybody, I can't yell out to anybody 'cause likely I'm passed out, you know. Like, or I'm about to pass out, which means I need to conserve my energy, I can't actually speak in those moments.
- *(wahine Māori, chronic illness, City)*

Heightened health issues

She had a heart attack when she was 47. She has heart disease, asthma, breathing difficulties, and the impact of the stress has manifested in arthritis flareups and inflammation and all those other things. - *(wahine Māori, social recovery lead)*

The thing that started to get hard for me was water, because for me being chronically ill, I can catch things really easily. So the sanitary side of things was really hard for me to keep maintaining.
- *(wahine Māori, chronic illness, city)*

Adrenaline and all of that, you go into heightened adrenaline, and so it just kinda keeps everything at a base level. But as soon as the adrenalin drops, everything does. So luckily my mum managed to get into Gisborne... to look after me. Because after everything kind of settled down, that's when my health declined. And so I got really sick, I couldn't really move very much, my heartrate was all over the place. I had to be really careful, which made me feel guilty about not being in the community helping, which like adds to the anxiety.
- *(wahine Māori, chronic illness, city)*

Health, wellbeing and welfare checks

I think there needs to be a more comprehensive list on the people with disabilities. 'Cause I do have, you know a disabled parking thing, I'm like officially diagnosed with chronic illnesses and stuff. But I'm still on no list to be checked on, and there's so many people like me who are like that. And even if it's just, you know community nurses, I know they were so busy, right? But if they had a crew that went around to people's houses who they know are chronically ill just to, knock, how's your meds, what's going on, do you need anything?

That would have been a massive help, and that would have been a relief. 'Cause I could have turned around and been like I'm good, thank you, my meds are okay. That would have been a relief for me. Also if there's like a little button, I know they have them for old people, but maybe people with chronic illnesses need one of those St John buttons that beeps. And then I know they're gonna come get me, right, 'cause the phone's not working, how are they gonna know?
- *(wahine Māori, chronic illness, city)*

So the most I would be able to get out is name and address, or a quick text to somebody to be like hey, can you call the ambulance for me, which is what my system is at the moment. If I start to go down I just text our family friend, she calls the ambulance for me. She comes to my house to look after my animals and my aunty meets me at the hospital. So that's the system we have in place, the system doesn't work if there's no comms. So yeah that was very scary and I think in the moment I didn't realise how scary it was until afterwards where I was like well I'm really glad I didn't get really sick. 'Cause I didn't get really sick until after the cyclone, 'cause that's how my body reacts to things.
- *(wahine Māori, chronic illness, city)*

Photo Credit: Josie McClutchie

2.10 Environmental Care and Concerns

2.10.1 Key Findings

- → Witnessing the damage and destruction caused by extreme weather events has highlighted the negative ecological impacts of forestry, farming and other environmental degradation over many years.
- → Seeing the effects of such human activities prompted strong feelings and emotions among many in the community, particularly the visibility of large woody debris in rivers, damage to bridges and properties, and beaches.
- → Māori described the grief and sadness at the impacts on taonga species (i.e., tuna / eels, koura / crayfish) and places of cultural significance (i.e., awa, moana) for kai gathering, leisure, connection.
- → Extreme weather events prompted some to take more active roles in river and/or beach clean-ups, and/or become more actively involved in local environmental initiatives.
- → Some described the positive wellbeing effects of being proactive (in action) in the face of climate change.

2.10.2 Illustrative Quotes

Environmental emotions: Grief, despair and anger

I couldn't even cry through the cyclone because I knew it was coming. I was angry. I mean that's the destruction of the roads up the coast and...the rivers...Bridges...and there's years worth of slash, years and years in the back country still to come...still to waiting to come.
- *(elderly Pākehā woman, coastal)*

All I could see was mostly the slash issue. And how it was damaging properties, and how it was all on the beaches, and on the roads. And was devastating. - *(tāne Māori, east coast)*

Every day I'd go out and spend a couple of hours cleaning plastics and detritus stuff off the beach that shouldn't be there. You couldn't do anything about the driftwood and the slash. But unfortunately, councils so-called transfer station is located in an old flood path. And this is common of all over New Zealand, so we ended up with a lot of dump on the beach, which we were continually cleaning up, dragging out the way.
- *(Pākehā couple, east coast)*

I think for me it's more emotional. We started this 18 years ago knowing that these adverse effects were coming, climate change was here. At the 2020 Climate Change Summit for Gisborne, we knew this was coming. It just felt like it fell on deaf ears in a way. It's not until you see it and then we know it, yeah. - *(wahine Māori, east coast)*

I was angry. I knew this was coming. We've been trying to shake our leaders for so long. Leaders of environmental projects who are not environmentalists. - *(wahine Māori, east coast)*

Environmental heath is human health

The world is in deep shit, climate change, we have to start recloaking the whenua. Recloaking Papatūānuku might seem like a, you know, not necessarily a health thing. But actually it is a health thing. It's a huge wellbeing thing. Like, yeah, we've gotta look after the awa, you know? It's like, for them it's live, it's the real earth. We've gotta look after the whenua, we've gotta look after the Awa.
- *(elderly Pākehā male, horticulture)*

But when you see that it's a real eye opener to far out, what next?
- *(wahine Māori, rangatahi social worker)*

If I am the whenua and the whenua is I, then how are we treating that? How come, for provisional areas, we should have provisional regulations that suit us and not a national way that suits all? Because what happens here is totally different in Taupō or somewhere else. Their geography is all rocks, hard rock. We're a soft, young country. We have different regulations. ...awareness is prevention and prevention is key to health. We're not aware.
- *(wahine Māori, east coast)*

That was quite upsetting seeing that volume of slash. I actually went right in amongst it, not realising that we weren't allowed to. I was dwarfed by the logs. They were huge and it was just thick, thick, right from one end of the beach round to the other side. There's just been no letup. Our beaches are now no longer beaches.
- *(wahine Māori, sole parent, city)*

I think there is a place for forestry in our region. But what I don't understand is how slow we are at realising there's a space for biodiversity and the work that comes along with that... we don't really value planting of natives or farmers who wanna bring regeneration on their farms... That really needs to be valued. - *(wahine Māori, artist)*

I thought we might have...another decade at least to enjoy our beaches without all the slash, without all the erosion, you know. The roads wouldn't be so wrecked. So yeah, that does my head in a bit because I feel like our mokopuna, our kids have been robbed. - *(wahine Māori, sole parent)*

Damage to taonga species, kāpata kai deeply impact Māori

...the land is not the same as what it used to be when I was young. I could just go diving and I could go get a crayfish or, you know, crayfish or whatever. Now, I just see logs jammed in there, pinecones. - *(tāne Māori, east coast)*

Our rivers are full of silt. The oxygen that feeds our species in the awa is not there for them anymore. It's covered, it's smothered. The numbers are down. The eels are getting ugly, the colours are changing. No swimming holes for whānau. - *(tāne Māori, lead volunteer, rural)*

Hope and healing through action

Doing this mahi gives us hope. Being able to put some trees in. Today we planted Anaura Bay urupā. So that was where the chasm was, so being able to do those sorts of things and bring in Mangatuna School...whānau ki te whenua, we're fostering kaitiakitanga... - *(wahine Māori, east coast)*

We've done quite a few riparian plantings and so thinking of the river levels rising. And then just some of our plants getting absolutely smashed with sediment. Yeah that had an impact, and also just thinking of the fish, and the life in the rivers. And the, yeah the impacts of flooding, so yeah that did, had an effect. And like massively put our projects on hold as we sorted through things. But yeah it then creates just more motivation, I guess, to restore. - *(Pākehā woman, manager)*

There's definite worry for the region. There's worry to be able to get in and out. There's frustration that people don't clock it, or that people don't think that it's up to them, you know, like to do their part. That's frustrating. You know, like the mindset of oh, we'll be right, like I'll just carry on how I am but other people can sort that out. That's not gonna work now. We all need to come together. But there's also hope, yeah, that we can do it as a region and, yeah I guess be a showcase for the rest of Aotearoa of how we can build back up together.
- *(wahine Māori, artist)*

The work that I do with the East Coast Exchange and where we're trying to move things is to really get people to understand the importance of regeneration and looking after our whenua. Creating better food chains, local food supplies and how important that is especially when we're getting cut off from the rest of the world essentially. Just looking after what's here first before exporting everything out of town. And yeah, just getting people onboard. - *(wahine Māori, artist)*

"I was angry. I knew this was coming. We've been trying to shake our leaders for so long. Leaders of environmental projects who are not environmentalists.

(wahine Māori, east coast)

2.11 “Climate change is real”: Community action, environmental care and calls for urgent change

2.11.1 Key Findings

→ Overwhelmingly, communities demonstrated care and compassion for each other, checked in on family, friends and neighbours, with many involved in days/weeks of volunteering and ‘mucking in’. For those seeing their communities come together to support one another, it offered feelings of pride in the community, and hope in humanity.

→ Many described how recent flooding events had radically changed their relationships with rivers, recognising their power for destruction. In particular, large woody debris had become a source of terror and anxiety for those living downstream of forestry operations. Changing river dynamics (particularly with new flows and silt deposits) were also of significant concern to local residents who no longer feel safe when it rains, and are thus experiencing increased forms of ‘rain anxiety’ which is impacting their sleep and felt in their bodies in a range of ways (i.e., blood pressure).

→ The effects of climate change are not being felt evenly. Te Tairāwhiti was already a region with huge disparity between the wealthy, and those living in poverty. After Northland, Gisborne has the highest rate of in-work poverty (9.3 per cent), with the East Coast having some of the highest socio-economic deprivation in the country. It is well-established that people living in more deprived areas are more vulnerable to environmental risks. In Te Tairāwhiti, rural and coastal communities were the most badly impacted in terms of infrastructure (i.e., damage to houses and roads), and health and wellbeing (i.e., trauma, rain anxiety), further exacerbating pre-Cyclone inequities.

→ Calls for urgent and coordinated efforts towards resilience and adaptation have increased as a result of the extreme weather events increasing in frequency and severity in recent years.

2.11.2 Illustrative Quotes

Te Tairāwhiti: A Community in Action

I love how our people just move and do. ... Just community stepping up, leaders stepping up and I’m proud of those efforts.
- *(Māori-Samoan male, city)*

Because everybody went into like, they were just so vulnerable, even leaders of the entities were vulnerable... they felt empowerment by helping others..... The next day, yeah, it’s like get the boys together...who’s got space, who’s got gumboots, who’s got food? Who can look after all the kids? Yeah. Community effort, like we had two or three mums that just stayed home looking after the kids, yeah so that the rest of us could just hit the ground running. - *(Pākehā woman, mental health)*

It was such a beautiful site to see all these people just come, come along and support each other and the community, the wider community. Absolutely! But hopefully it never happens again.
- *(tāne Māori, mahi taiao, rural)*

It was amazing, the most greatest bits of humanity came out from the forestry workers. They were the first ones to give their Utes, their cash out of their pockets. Their wives cooked meals for the farmers. Like we saw unity. [In the media] there was a lot of emphasis on division and anger, but I've just seen the greatest form of humanity from fishermen and forestry workers for the rural community.
- *(Pākehā woman, mental health).*

Living with Rivers: From Aroha to Anxiety

We took it for granted and another cyclone warning blah de blah. So and I actually had to force myself to go to sleep and it sounded like a railway train was going past my backdoor.
- *(wahine Māori, east coast)*

Our rivers are full of silt. The oxygen that feeds our species in the awa is not there for them anymore. It’s covered, it’s smothered. The numbers are down. The eels are getting ugly, the colours are changing. No swimming holes for whānau.
- *(tāne Māori, rural)*

If the council didn't build their stopbanks down there, then our house would be fine. So, the council and the ratepayers have got some responsibility in the position that we're in, because 50, 70 years ago, when the house was built here, there was no stopbanks down the way there, and as I say, it wouldn't be an issue for where we are.
- *(Pākehā male farmer rural)*

The change of the waterways, and the waterways mean there’s a whole lot of sediment coming from the eroding lands. And filling up the waterways, so the, what you call the bottom of the streams are higher, and when they're higher, then the water gets high. And comes out over the edges, so there’s always the threat now that we’re gonna get isolated on either of the three accessways. Well there’s the Waitakaha, which is from our home here out to Tupāroa. There’s the Repōrua, a smallish stream and there’s the one at Spencer’s Farm, it’s the main one between here and Ruatoria. It’s not if we’re gonna get flooded, it’s when. Well the East Cape, this region from here back up to Te Araroa, East Cape, is always prone to cyclones, we always clip it, from the Coromandel, it comes across the

East Cape. So we've always had cyclones, but now with the changing environment, what happens is, like I said, the river beds have increased. Now the water cannot go down the rivers, it goes over the sides. And with all the debris and stuff that falls into the river, that creates another level of barrier and it brings the riverbeds up.
- *(kaumātua, east coast)*

...there was lots of water and whatnot, you know, gas and whatnot so we thought we were gonna be not bad. But yeah, didn't turn out like that. It actually was a lot worse. Just watching the water levels just rise rapidly. ...watching the water rise and logs just getting fired down like darts. Hitting into the piers on the bridges and just going whack. Like logs longer than this room, the water was that powerful. It was just throwing them like darts at the bridges. So loud too, boo-boom, boo-boom, boom, boom, you know, hitting each other. Hitting the piers. ...it was just unbelievable... the power of that water and all those logs that were just getting thrown like toothpicks and watching them smash into these piers and, you know. Something's gotta give aye. You know, we've got five bridges, you know, just short distances from each other. There's five bridges! - *(wahine Māori, east coast)*

...we could see the water rising in the creek behind us, and we didn't used to see as much water that we did coming down from this back valley. ...I think there's like four football fields of slash at the back of our place now. It's only 100 metres, 150 away from the home too. But they actually pushed right up the stream at the back of our house as well and I just watched the water come, fill all the crevices, come together, meet and join together. ...then it went dark, which was the scary thing. ...when I started seeing it rise rapidly, that's when I was calculating in my head. Okay, so by the time I get to 12 o'clock at midnight, one o'clock you should be kissing my doorstep. ...And we were right on the mark. It was 390mls away from coming in the home, like a handspan. We didn't sleep, we stayed up the whole time.
- *(wahine Māori, east coast)*

Yeah, you could hear it. You could hear it. I could hear it from my house along the river. It sounded like a train, like honesty just choo-choo-choo-choo. That's all just the wood rolling on top of each other. Sounded like a train. - *(wahine Māori, east coast)*

The effects of climate change are not felt evenly: The Exacerbation of Existing Inequities

We're treated like second class citizens that don't matter. - *(wahine Māori, east coast)*

I'm glad I'm 60. This is beyond climate change and all that. The world's going to hell in a handbasket. I'm ultimately a very positive person, ... The addictions and the family violence are the bad things. They don't come because of that. They come because of societal inequality, of watching those rich people in Wainui while you have nothing.
- *(Pākehā woman, mental health)*

... we've been forgotten about entirely.
- *(elderly Māori-Pākehā woman)*

...I worry that we will become an economic backwater with all of our social problems exacerbated for a much longer term. ...all the stuff that we do up here is plasters on bleeding wounds and that the underneath issue is colonisation, capitalism, and economic prosperity, and housing are the two things that are the end point of it. So colonisation and capitalism are the wrong things, which is why I work on devolution to iwi. But, given that that's the system that we're in, the two things that are needed to stop addictions and family violence are better paying jobs and nice houses. ... The family violence and addictions that go on are because of shit lives, and shit lives include not just not having work, but the kind of work that's available is not fulfilling work, and is dangerous work, and is precarious work.
- *(Pākehā woman, social recovery lead)*

Now I know it's been politically expedient to make Māori dependent and keep Māori dependent. But it's a much broader dependency now, it's not just Māori who will be feeling that dependency to the state, because what they've lost during that cyclone. But I am very aware that there's some very sad people around. One of the areas of concern for me is the growing rate of suicide amongst our young people, especially our Māori young people.
- *(kaumātua, Kaiti)*

Calls for Urgent and Coordinated Efforts Towards Resilience and Adaptation

...climate change is real. Our house is 45 years old and I've thought, were we really dumb buying on a cliff face? But I actually I talked to the council soil engineers before we bought it to say, is there any erosion likely on this, and they knew the area well and they said no, just make sure if you're chopping a tree down, plant another tree and you'll be fine. And the two things that ... a cyclone is not a normal thing. It's not a wet winter. So none of us were dumb to have bought where we bought in all those houses that are slipping, because it's the top of Russell Street, it's Ferguson Drive, it's Makorori. These are all places that are long lived on. The second part of that is that you cannot count that there's another 30 years before another cyclone. You know, Bola, Gabrielle, 30 years on, it's now five and 18 months. El Nino is supposed to have happened. Well, we're bloody raining all the time, actually, still. The thing for our house is, yeah, maybe we'd survive in normal weather patterns, but we only need another wet winter and the house collapses. So climate change is real, and our level of resilience and adaptation needs to escalate.
- *(Pākehā woman, social recovery lead)*

Climate change is real, and our level of resilience and adaptation needs to escalate. That's where to me, the big thing that we need to focus on, is a voice for the region that is joined up. I think the way in which we come together as a community is the good thing. I think that iwi is the good thing. That it is true that never waste the crisis. This is an opportunity to get some stuff through, and that includes devolution to iwi.
- *(Pākehā woman, social recovery lead)*

2.12 Emergency Evacuation Response

2.12.1 Key Findings

→ Levels of preparation varied widely across the community. Some were very well prepared, engaging closely with weather maps, following announcements via an array of media, and preparing their home with additional supplies. But those living in poverty are less able to prepare themselves (i.e., extra food in the cupboards, fuel, cash at home) making them more vulnerable during and in the aftermath of the event.

→ Many described a widespread complacency among the community which impacted preparedness and readiness to respond.

→ Many used previous experiences (e.g., Cyclone Bola in 1988; Cyclone Hale January 2023) in making their decisions to evacuate or not (i.e., 'we were fine here in Hale').

→ Many were caught off-guard and experienced surprise and shock at the severity of Cyclone Gabrielle.

→ Evacuation planning and response was impacted by various factors (i.e., pets, animals, elderly, disability, complacency, access to information and alerts).

→ Many felt the response from Council and Civil Defence was inadequate, with isolated communities overlooked for too long. Some felt that the priorities of Council were on the city, and less in rural, remote and isolated areas, prompting questions about the priority areas in an emergency.

→ Most often it was communities evacuating, rescuing and supporting each other. This was particularly the case in valley communities (i.e., Waimatā, Tupāroa, Ūawa) who demonstrated high levels of self-sufficiency, with residents coming together, sharing their resources and supporting each other under extreme circumstances.

→ A need for more social support as well as physical health, welfare and wellbeing checks in the days and weeks following an extreme weather event.

2.12.2 Illustrative Quotes

Community Preparations: Proactive Approaches

...we had the car parked up the driveway, the grab bags ready to go, I was in full, 'cause we thought we were just going to be walking up into the bush to get away from the river and the road was closed, so we were dressed in our tramping gear, I had my tramping boots on in the house and we just watched the river as the sun set. We thought, we're not getting her up unless we have to. And it went higher than it ever did, and I had marked a line where if it crossed that we were getting in the car and going... - *(woman, city)*

...because the cyclone was coming and we were aware, we filled up the bathtub and we filled up heaps of buckets with lids. ...Because we lived through Cyclone Bola[1] . So we knew what to do. ...But we weren't expecting that bad. ...It wasn't until a few days later when that water pipe broke, eh, that we had no water. - *(wahine Māori, Kaiti)*

...the council was sending out messages about the water supply. ..so the day of, we did have water. We had, what were those, 20 litre buckets, we had about six of those and we filled the bathtub up. - *(wahine Māori, Kaiti)*

My kids are like, why did you fill the bathtub up with water? I said so you can go the toilet, so I don't have to send you out in the garden. So we'd get a bucket, we filled the cistern up and then we can flush it. - *(wahine Māori, Kaiti)*

...my neighbour asked if I could go to the council to pick up a camera to put on the culvert that notoriously blows out and had been an issue. So Murray Cave was issuing a, you know those hunting cam things, I don't know what they're called, to us. And our neighbour was going to go and place it somewhere (Waimatā Valley) so that the council could get a live feed of the culvert about another 2ks up from our place. - *(wahine Māori, rural)*

I went round, straight to Bunnings and they said look we know that generator's somewhere in here. And I said look mate I'm going home at lunchtime, you'd better find that generator soon and here, you've gotta phone me back. And he phoned me back 45 minutes later, ...so anyway picked up the generator. Made sure the fuel container was full, made sure my daughter made a choice of coming home, or staying in town. She chose to stay in town with her little car and they (Hospital) set me up with a work radio. They said oh you take the work radio with you... and off I went home. (Waimatā Valley) - *(wahine Māori, rural)*

How far do we go with trying to educate the community without putting the fear of God in them, I suppose? That's sitting in my mind whenever we get a weather event. Yeah, it's different to a tsunami or an earthquake, but it's the same sort of thing. It's that level of anxiety in the community... We'll never get it right. ... I just think the further we go with educating and promoting what's going on, which is good because we are getting better at these weather events, in the same breath, it's raising the anxiety levels. And then you don't want to be the boy who cried wolf if nothing happens too, so it's a fine line, I think. But you can definitely come into a little town like this, if we know something's about to happen... people are evacuating when we're asking them to. We're not having to have a state of emergency for actually physically removing some of these ones out at Mangatuna. They know what's happening and they go now, which is really reassuring because it's not putting us at risk having to move them later. We've probably got 90% of our population will self evacuate, which takes the pressure off us. It used to be, "we're not going anywhere, [you can't] make

us" sort of thing. Yeah. And look, a couple of years ago we were doing drills and that wore off pretty quick because people were starting to say, oh, it's a drill; oh no, we won't worry about it. So we've stopped doing that, because it was complacency. So we don't do drills now. ... We have to do our homework well and truly before. Four days out from a cyclone, we know it's going to hit us. We've already done our homework 10 days out when it's come from New Caledonia. We track all the time – four days out, two days out, we've got everybody on the move, and it will hit at 2 o'clock in the morning.
- *(Pākehā male, first responder, east coast)*

Complacency

People obviously thought, oh we'll be fine and they weren't, and there were a lot of people who didn't take it serious and they didn't have the moorings. The power was down so they didn't have their radios, these days, people don't have transistors, and they were on their own.
- *(Pākehā couple, horticulture)*

We'd had so many weather events and just thinking it wasn't going to be a big deal. We were just going about our business and doing the things that we needed to do, and I think I had an appointment somewhere. And, the lady said, do you want to cancel? And, I was, like, no. It's just a bit of rain, carried on, and sort of did our thing. And so, I wasn't at work but, you know, council was issuing warnings and saying you need to make sure you've got food and get some cash out. And, we were just, like, this is a bit of overkill, [we] didn't really think anything of it. I got home and said to my partner, did you get some food? Did you get some money out? And, he was, like, no, I've been at work.
- *(Pākehā mother, city)*

Drawing upon historical references to make decisions

...when I first arrived at the Kura three, nearly four years ago, one of the teacher aides I met. ...she's a local..."you know Kōka, they say we don't flood. But we only flood at that end, and we only flood at that end. She was one of the first people I saw when I actually got through to Kura.... And she just looked at me, ...she was like fuck, complete shock! Yeah, because she had told me, oh, but we don't flood here Korks, oh 'mea rawa ake' (next minute)
- *(wahine Māori, school leader, rural)*

I've got a young family, me and my partner. When the cyclone did happen and hit here, Gabrielle, I just thought to move [us] to town. Just instantly, get my family outta here, that's what I thought. I was just like fuck, my son aint getting hurt. I just took him straight to my brother's [in Gisborne]. When they were talking about Mangatokerau as well, that's the big flood (2018) I remember 'cause our house got smashed by 800 tonne of wood. Yeah, and both our houses got lifted off the ground, got smashed. - *(tāne Māori, young dad, east coast)*

Pets and animals impact evacuation decisions

It was horrendous. I personally have a lifestyle block just up the road two minutes. And got severely flooded. I have animals, so I had to get them to higher ground, or to the best, you know off the land. I have a creek that's around my property, which the council had not controlled for a number of years, which made things work, as in clearing the creek and allowing water to flow out. For safety I self-evacuated the first night up to the higher grounds of neighbours. They have a very hilly section, so they were extremely high up.

Whereas I'm on lower ground, so I had to take my three border collies with me. They slept in the car and friends kindly gave me a bed for the night. Only because the high tide was coming in the middle of the night and that's the scariest time 'cause you just don't know. The water was up over a seven wired fence, so that's extremely high, right through property. And just flowing, so it was probably, maybe one and a half metres away from my house.
- *(Pākeha elderly woman, rural)*

We didn't sleep, we stayed up the whole time. We have dogs, 13 dogs, we had to put them on a trailer, back them into the shed. It wasn't just scary for us, it was scary for the animals. And preparing ourselves and getting all the sheep moved as well as the horses the day before was pretty stressful. So yeah, there's livelihoods, animals to save first before moving gears and things like that.
- *(wahine Māori, east coast)*

Surprise, Shock and Fear

...so we got power up, so I managed to get the internet backup for a little bit. And then we lost all internet for a while, it was getting worse and worse, a few branches [coming down the river]. And anyway I was listening and I could hear the logs coming down the river and thought oh goodness. And so I made a call, you can't stay up all night, so at one o'clock in the morning I went around the outside of the house with my headlight, everything's okay, you can go to sleep now. Surely it's not gonna get any heavier! So I went to sleep and I woke up and I could hear the generator, so I woke up, I think, 5.30 in the morning. I get up and go down to the generator. ...and I can hardly see the generator 'cause it was surrounded by silt and the end of the house is flooded. 'Cause the landslide, between me going to bed and that had come down and I didn't know it at the time. So a perfect storm, a culvert blocked, a slip came down, so that water and that mud combined and came flowing towards the house. - *(wahine Māori, rural)*

I came in just to see Civil Defence for the afternoon debrief. And they were like [name], how is it out your way [Waimatā], you made it? And I said it's really bad, do you have any idea how bad it is out there? And then [name] said yeah it is bad, but Te Karaka is really bad! She said they all had to evacuate, escape, she said, not evacuate, they escaped to the top of a hill. And I said they did what? And I was like oh my God, so, and I was thinking yeah, 'cause it looked really bad when I was coming. And I thought some people are way worse off, this is bigger than we think.
- *(wahine Māori, rural)*

[Husband] went over to get the neighbours, and came back with them. I was going to make them a cup of tea. I think we suggested that she go and lay down on the bed with the baby and get a bit of rest, but then the water came in the door, but it didn't come in like this (slowly from the floor upwards). It sort of came in sideways through the door so fast, like a torrent. I've been on this river over 60 years and it did take us by surprise, just how quickly it did come up. Usually you've got time to sort of think about things. I had time to put some cars up on our raised driveway, but all these tractors here, seven tractors and everything we got here was all underwater, two cars written off. About two hectares of grapes been flattened and seven hectares of grapes not being harvested. When the water came into the house, it came in so fast. Us and the neighbours and their five week old baby got on the bench in the kitchen. The water was up to the top of the bench, and she [mother of the baby] said once the water started going down, I was ready to put the baby in the top cupboard (above the bench) in the kitchen. Luckily, we didn't have to. Plan B wasn't looking all that great. We had nowhere to go. It was at the top of the bench. We're sitting on the bench for over five hours, I think. We just sort of talked or dozed off. We watched the river come up and hoping it would peak soon and then go down. None of us really said anything. We just sat there, just hoping that the water wasn't going to come any higher. But it came up so quickly. - *(Pākehā couple, horticulture)*

The scariest part was when it was still dark and we lost power. We managed to get a little gas light before the power went out, just in case, and had that on bench so for a few hours until it got light, that was the only thing we had. Yeah, it was a bit scary not being able to see. And obviously, we couldn't go out the door because we didn't know what was out there.
- *(Pākehā couple, horticulture)*

Emergency response and support: Inadequacies and Inequities

I had a personal locator beacon for when I go fish fishing on my own. We set it off up there and it's light was flashing. Hour and a half up at [neighbours house], he had a thing out on the tennis court for the helicopter to land on. Just for the baby's sake, it was only about five or six weeks, she was pretty little, and nobody came.
- *(Pākehā couple, horticulture)*

No one ever came to us, no one came, no one come to us over the last five events, that's going back two years, five events we've had. And no one came to us, we're off the radar, we're watching other regions on the television when we had power and access to television. We're watching other regions which are just over the hill being accessed with helicopters and assistance. And for us, we saw it as yeah, a bit of a gripe, 'cause it looked like those that were managing the services, were taking care of their own whānau, which were in those other regions. And those services of assistance didn't have whānau out our way, so we dipped out. That was our take on the way things were going. What did you guys require from the responders? [To ask] How are we? How are we? Do we need anything? Just to see a face, that someone trying to connect. And just to take the questions. - *(kaumātua, east coast)*

The focus of civil defence, the focus for the council and all the emergency services was, well, if the councils get the water back up and running, it was get the power running and get telecommunications, we had no telecommunications for, what, six days. So all the focus was on that. Where I'm driving around going, nobody's talking to these people, nobody's even thinking about these people. Maybe if you're on a farm up the coast or on the back hills and helicopters are trying to find them, but these people here are completely on their own and they're in a state of shock. And that's what got me and I thought, shit, what can we do to help them?
- *(Pākehā couple, horticulture)*

So day two, so we're on Tuesday now, no we're on Wednesday I think, anyway late Wednesday forestry crews got through to us. So they managed to chainsaw and get a big truck through, and that created a path. So Wednesday afternoon I was able to drive out and that's when all the emotions sort of took over really. - *(wahine Māori, rural)*

Well the first we knew of Gabrielle, the cops comin' around at nine o'clock, one person going door to door saying you've got to evacuate.
- *(Pākehā elderly male, rural)*

No-one wants to see our whānau left up on the hill to die in Te Karaka, which were the words that were said. No-one wants to see that. You know, we went from 'never trust you again' to 'look at us now'. Time has healed, time has brought us back together. You know, why did we have to go through horribleness? Why did we have to go through horribleness to only get to where we are now? We need to think before we behave, before we speak, because it can bring out the worst and sometimes the worst isn't forgotten.
- *(Pacific male, first responder)*

I actually thought the Civil Defence response was quite bad, really. I knew we were safe, but we had a five week old baby with us and the next morning the flying conditions were fine and probably about 6 o'clock, I guess, we saw the river, and to me I would have thought Gisborne Council or Civil Defence would have put a helicopter up just to fly the river, maybe up to TK or to Whātatūtū. That never happened. I know in Bola, my brother was over across the river there and there was no contact at all. My brother and his son, they were on the barn roof to get evacuated by Helicopter. ... the only helicopter we saw was probably about 2 o'clock in the afternoon. It flew over our house and possibly over towards our neighbour, did a U-turn and came over right at the top of the house. Once again the baby in mind, was out on the back veranda there waving my arms. It was very low and it just kept on going. So yeah, a little bit disappointed, I guess, in that aspect. - *(Pākehā couple, horticulture)*

Communities Supporting Each Other

..so I just kept cleaning and so every night we ate at a different person's house. Everyone just bought what they had, which we all wanted to use up, 'cause we were on generator power still. So whatever we had, I had enough to make salads every night for four nights, so I took salads and we went to everyone's house each night to make sure that everyone was okay. To listen to the news together and just kinda figure out a plan for the next day. So that was really cool as a valley, yeah, and borrowed a tractor to help clear silt and yeah.
- *(wahine Māori, rural)*

Being isolated. Being isolated, being isolated, meaning the waterways when we could traverse through has changed. And isolated probably 61 of us in the three hapū here for a week and a half. Because of the change of the waterways, the river that isolated and took out the roads, we were isolated from the rest of the community, which is probably Ruatoria and beyond. We're out on a coastal reach, three hapū here, so there's 61 people here, we got isolated. And we pretty well had to fend for ourselves, or take care of our people.
- *(kaumātua, east coast)*

We were blocked in obviously so we had no power, no gas. Yeah, we were blocked in for seven days up where we were. Yeah, so we were sort of running out of a lot of things, you know, food, water. Couldn't pump, got no petrol to use the pump to pump the water up. Well no good pumping up from a dirty creek anyway. Couldn't pump the water into the heading tank, so it sorta stuffed us there. But yeah, food was starting to go off 'cause no power for the freezer and that stuff. So we pretty much just had to dig our own way out, just taking way too long. So yeah, and then eventually, I think it was on the fourth day our neighbour, they were probably about 400-500 metres away from us, they dug us out so we could get to their place. They were the ones that actually gave us fuel for us to pump, use our pump to pump some water in from the tank to the heading tank so we could have drinking water.
- *(tāne Māori, mahi taiao, east coast)*

2.13 Mental Health / Weather / Wellbeing

2.13.1 Key Findings

- → The extreme weather event (Cyclone Gabrielle) caused considerable stress and anxiety across the region, particularly with communication and power outages, and worries about family and friends.
- → Those in the most affected communities experienced high levels of stress, grief and trauma during and after emergencies and evacuations.
- → Some in less affected communities experienced feelings of guilt for not being as badly impacted.
- → Mental health support was variable across affected communities, with most commenting that it was largely invisible, unavailable or not targeted to the specific needs of communities.
- → Some received psycho-social support following traumatic evacuations and destruction to homes and properties, but many did not receive (or know how to access) formal mental health support.
- → Many experienced shame, embarrassment or whakamā in seeking out mental health support following traumatic events related to adverse weather.
- → Acknowledging the pain, grief and trauma in their people, some cultural leaders (i.e., of marae, schools) sought out culturally appropriate mental health support.
- → Taking time to have a chat over a cup-of-tea was frequently mentioned as a small but important way of connecting with and supporting others. Importantly, the most effective support occurred in places where people felt safe, with and around people they trust (see 'Community Hubs').
- → A strong theme was the chronic mental health effects of repeated extreme weather events, with rain continuing to cause considerable distress across the community (referred to widely as 'rain anxiety').
- → Others acknowledged the cumulative effects of repeated rainfall (referred to as 'climate fatigue'), ongoing uncertainty (i.e., unstable land, slipping, river levels, future weather events), impacts on work and livelihoods, and the slowness of recovery (i.e., roading and bridge repairs, Council/government decisions and insurance claims), taking a significant toll across the community.
- → The trauma, grief and stress are felt as a heaviness or a fatigue across the community, which is interpreted and experienced differently based on individual coping strategies and support structures, as well as the conditions of individual and whānau lives.
- → Police, first responders and various health and social service providers all observed an increase in mental health issues across the community, evidenced through increased aggression, relationship problems, domestic violence, panic buying, social isolation and disconnection, and fatigue and exhaustion.
- → Weather-related mental health is widespread, but most felt mental health systems of support are not designed to recognize the impacts of repeated rainfall on flood-affected communities.
- → Some described experiencing forms of PTSD with repeated rainfall, with rain triggering high levels of stress, anxiety and depressive responses.
- → Community members adopted an array of coping strategies to support themselves and each other through weather-related mental health affects (i.e., karakia, prayer, pūrakau / storytelling; meditation, exercise, alcohol, vaping, drugs).
- → Some pushed back on claims of East Coast 'resilience', referring to this as an overused word (overused by those outside the region) that fails to acknowledge the significant emotional and financial toll of having to constantly pick oneself (and/or a community) up again, and diminishes the responsibility of government to invest in adequate support (and land use / climate change policy changes) within the community.
- → Many participants (particularly Māori) described feeling deep sadness, grief and stress in observing extreme weather events damage to places of cultural significance (i.e., marae, urupā) and natural environments (i.e., rivers, hills, beaches, oceans).
- → Māori participants spoke of a cultural grief over damage and destruction to natural environments, highlighting the importance of whenua to hauora.
- → The widespread community grief and sadness related to damage and destruction to natural environments, highlights the need to acknowledge that human health and wellbeing is significantly impacted when the whenua is unwell.
- → Some acknowledged that the repeated extreme weather events are on the back of the COVID-19 pandemic, where many were already stressed, burned out, exhausted, isolated, and thus leading to deep exhaustion and high-levels of anxiety across the community.

Recommendation

- **Mental health systems need to directly respond to how climate-change anxiety is impacting communities affected by repeated extreme weather events, and develop mental health supports for those who are being retraumatised or stressed with each heavy rainfall, but perhaps find it challenging to articulate their weather-related mental health experiences.**
- **There is a need for more culturally responsive forms of weather-related trauma recovery and mental health support.**

2.13.2 Illustrative Quotes

Acute stress and anxiety across the region: During the event

Stressful...cause we couldn't get out. Yeah and just like the destruction of the land...everyone was freaking out...we'd been through like all those other ones before... This one we'd been isolated. This one was like we were cut off from everybody.
- *(wahine Māori, east coast)*

Once you saw the state of the river, and the other people being impacted by it the way they were. There was a little bit of heaviness that started to, you know touch us, come over us like a dark cloud full of rain to drop again...the stress, and anxiety, and worry that comes with that uncertainty...my ability to get out of a situation was limited.
- *(wahine Māori, chronic illness, city)*

... I just remember the stress on mum and just the whole – psychologically, it was hard to sleep, and I had my core role as a policeman on top of that. I just vividly remember mum because she's a pretty cool customer, how stressed she was for my brother and his kids. They ended up being fine, but they just had no power, no phone.
- *(Pākehā male, east coast)*

There's just so many things that happened in that period of time and emotions. Emotional rollercoaster, and the stages, I'm sure there was like a lot of adrenalin in those first kind of hours and days...and then that kind of exhaustion, and then that kind of anger, and where that goes, and frustration. - *(wahine Māori, city)*

What are your most vivid memories from Cyclone Gabrielle?... Where do I start?... I saw confusion, I saw pōuritanga, I saw mamae, I saw rawakore, I saw panipani... , I saw all of those happening.
- *(wahine Māori, marae leader)*

...the days following turned more into panic I think especially around no comms. It wasn't even like the water like flooding in the backyard or anything. It was, communication. And then the realisation of like not being prepared and not having enough kai, not having enough clean water. yeah, and then sort of having to rely on systems that had become sort of phased out like cash, like physical money, to be able to get things. Yeah. Initially calm, and then panic. - *(NonBinary, takatāpui)*

To be frank, when that rain was coming down as hard as it was and the phone went off ... I suppose there was a bit of fear, there was a bit of anxiousness, there were lots of thoughts going through my mind around 'what am I going into, how has this impacted our region thus far, what are going to be some of our priorities we need to focus on and is everyone safe'?
- *(Pacific male, first responder)*

Most affected communities experienced high levels of stress, grief and trauma

I think for me the stress is [impacting] physically. I think I did not sleep well initially. And I started having numbness. Recently I feel numbness in the right side. One day I went into emergency thinking that I'm having a stroke. So they tested me with some tools and they said you're fine, go home. Even when I'm not associated with Gabrielle, it's little things that happen. The medical system's different here. It is like, it has not affected your brain in the name of stroke, so just talk and you'll be fine. So I think, I personally think when I go back, I'm gonna go and have an MRI scan.
- *(Indian woman whose home was destroyed, Gisborne City)*

The impact for everybody was the financial, the loss of homes, no food. There was just a shortage of everything, and it was all panic stations. Everything was all about panic. What are we going to do? Where are we going?
- *(tāne Māori, volunteer lead, rural)*

His father had passed away due to the flood got him and dragged him away. For us to hear that, and to talk to the son that was standing there at the time, that was really the saddest part of that morning. - *(wahine Māori, rural, horticulture)*

I vividly remember just seeing water, just mud everywhere. And people walking around like zombies... I think there was just a period we were going through, like waiting for someone to turn up. Because we were, like we were just in a state of mourning, you know like what the heck's just happened to us? It was like, you know, I hoki ki te pō, engari ka toru rā whā rā pea ka puta ki te ao marama ma tatou ano, tatou e hiki! (So we returned to the darkness), however it took about 3 to 4 days and we were back in the light again. And it was because of us, we ensured that we looked after ourselves.
- *(wahine Māori, school leader, rural)*

...we lost one of our community people, JC, he passed away in the, during the cyclone. Going back into the deep waters to save one of his animals and he risked his own life. And his life was taken, so that was a devastation as well, ...I vividly remember was just there was mourning happening. But mourning not only for homes that were lost, it was people, because everyone realised by then that JC had passed. So it was incredible the support that we were able to provide, with the help of quite key people in the community. - *(wahine Māori, school leader, rural)*

We were so untouched we couldn't believe it, but we could hear everything. We could hear the river roaring and everything, and then for us to actually see the impact, it just blew us away. It got me crying. And how it affected me for Pūhā, okay, it devastated me. The fact that [name], a pou for our community in Pūhā, and to actually be there and then hear that digger going down and thinking, what's happening down there?

It's flooded. Everything's flooded. Not realising that he was down there looking for his father. ... That's what blew us away. That's what blew me away straight away, knowing that this guy who does so much for our community... I suppose our little Pūhā township because we all are family. They're Pākehā but we all get on.
- *(wahine Māori, horticulture)*

Every time we had to evacuate everyone along the river, you know that would cause anxiety...but we've just stood up, brushed ourselves off and carried on with life. Realistically it wasn't until Gabrielle that they started talking about psychosocial services. The need for psychosocial services, I guess, for us [is] after every weather event.
- *(wahine Māori, first responder, east coast)*

Sadness, empathy and guilt felt by those not affected for those they know badly impacted

...just the despair basically...Obviously the worst case scenarios were horrific and quite traumatic just to see so much heritage lost...shock, just shock everywhere...It was a warzone...So my anxiety went "oh my God what's gonna happen now?" But what happened was those people actually stepped up and looked after people that have never experienced anxiety... I reckon if I'm being one hundred percent honest and if I think about everything I've collated. Three weeks of shock, three weeks of intense shock, right? And then four, five, six weeks of guilt that we survived it and we're not as bad... feeling so bad for feeling bad.. I shouldn't feel bad cause somebody else has got it worse off. But we've observed huge marital stresses, massive, yeah, and just children coping the anxiety, yeah. Now, for a lot of people, they are just owning up to the fact that they are tired and burnt out since Cyclone Gabrielle...
- *(Pākehā woman, mental health)*

I almost felt guilty that I didn't, nothing happened at my whare here. And I saw some of the other people who I know, whose homes were red stickered because they were so bad.
- *(kaumātua, Kaiti)*

A lot of people think that your property has to be impacted for one to be seriously affected. But a lot of things that we've been hearing, it's more seeing the harm across the community and feeling that in terms of, and seeing its effects on other people that actually, it does impact you. ... I think you don't realise at the time, but it is cumulative and that's why I say I'd get home at the end and it was like, I didn't wanna watch TV. I didn't wanna talk about it, I'd share with [wife], you know, what I was seeing out there. But, yeah, it adds up, it does add up.
- *(elderly Pākehā male, horticulture)*

Mental health systems overloaded: Local initiatives responding to community need

The reality is that the whole system's so overloaded. It's so overloaded, you know? You've got so many issues for so many people, it's a global crisis, the mental health issues. Certainly in New Zealand, it's a, what I only know, what we know from our own experience is you get people who are suicidal, who present at the hospital and they're sent home 'cause they've got no room. So, they're told, yeah, you're not important enough. So for people who are just struggling to deal with all their accumulative stress, the system just isn't working. But in Tairāwhiti, you know, Here for You, Mates of Tairāwhiti, all these things are fantastic initiatives. But they've actually come out of the community seeing the need and going, we're gonna do something and they haven't come down from the Ministry of Health and the government. I think that's very Gisborne though. That's so Gisborne. Because we are forgotten. So that's what breeds these organisations because they look around and go, well, there isn't anything. So we need to do something here. So really localised approaches. People responding to real community needs that aren't being met by national systems.
- *(elderly Māori-Pākehā woman, horticulture)*

So we see the tip of the triangle where the people who are triaged as most in need get A level of support, and what we don't see is the invisible layer of stress on the whānau who are making sacrifices and picking up the slack for what the response systems are unable to deliver on.
- *(wahine Māori, social sector, leader)*

Tauawhi men's community offered to do all our free counselling...they were like "we'll do all the boys, get them in, get it done, don't muck around. No-one can get to a GP right now, that's not working". Three Rivers had reduced their hours significantly.. but mental health happens 24/7, so we are organisations that have chosen to do this.
- *(Pākehā woman, mental health)*

Whakamā to seek recovery and mental health support

Our people are not good at asking for help. So I don't know how open people were about asking for help. - *(Pacific male, first responder)*

I think there's still that stigma of what mental health means, and I think when you come from a stoic community, a lot of people are probably not willing to still put their hand up and say 'I think I might be experiencing some mental health issues'... if you've never experienced anxiety before, you're not going to know that you are experiencing it or what those triggers are. You're just going to be like, 'I don't feel right' or 'why am I not going to sleep at night' or 'why am I erupting at my partner or my kids?' If its been brought on by something like this and you've never experienced that in your life before, you may not actually know that something's going on with you. - *(woman, local government)*

that's one thing I really want to talk about is the mental illness that is presenting itself to us even still now. Of people that have never asked for help or never wanted it until they've got to the point where they're suicidal and they realise they've got to do something or they're leaving. The panic and anxiety that sets in on those whānau that were really affected when it rains is also something that we need to address. We had women sitting in our offices shaking backwards and forwards in fear. We had victims turning up that couldn't even talk because they were so traumatised. And this is weeks after... I just had another male, and it's mainly males presenting that hadn't asked for any help. Have been isolated, have been living off a gas and a fire and no refrigeration you know? And just too humble to ask for help. So the mental illness and emotional effect of this cyclone is going to be long lasting, yeah. And we just need more input on that... totally traumatised. And they still are. And I don't feel it's been addressed properly.
- *(Pākehā woman, not-for-profit org leader)*

...I had to ask them, would you guys be okay if I bring volunteers in and start cleaning your houses up and help you get all your rubbish out and blah, blah, blah? Some of them said, nah, nah, nah, we'll do it ourselves, no, we don't need any help, we're just too stressed out to have people around us, and stuff like that. I had to assure them that this is what we're up to and ...I think a lot of them were just whakamā too. They're shy just around people coming into their homes. And being a poor town, a very poor town, and this is what needs to be said, a poor town where basically they're fending for themselves, and just whakamā, very shy to get the help that was needed, and they just cried.
- *(tāne Māori, volunteer lead, rural)*

Well one of the things that I think is a major issue is the people who are most traumatised, are the people least able because of ignorance, or lack of knowledge, or how to access the support that's available. You know you wanna try working with ACC, or some of these other government agencies. Now a Māori, many of our Māori people have great difficulty dealing with those agencies. I think we need more kaitiaki support for our people.

... there are a hell of a lot of people who just don't use what resources are available, 'cause they don't know how to. - *(kaumātua, Kaiti)*

Just asking people too, like knowing people. 'Cause there's a lot of people around here that don't ask for themselves. You know, like whaakama, they're shy.
- *(wahine Māori, CD volunteer, east coast)*

There are a lot of people going through the cracks that are getting left behind. That could be a variety of reasons. They might not want that help. It might be the wrong help. They might be too proud. A lot of people were too proud to come and pick up those kai packages during the during the thing. That's who they were for. ...there was a lot of people that were going through the gap. And it's the same for our mental health and any of those sort of – I suppose accessing those services. Yeah, if you go looking, you'll probably find it but some people probably need that push or need to be approached, I think, first.
- *(Pākehā male, first responder, east coast)*

... everything revolves around money. ...for us it's just like no, don't worry about it, it's only kai, give it away, you know. Do what we gotta do to keep people calm. I think that was the biggest thing was people getting quite angry. Unfortunately a lot of our people don't understand it's okay to ask for help. They're too whakama to ask for help.
- *(wahine Māori, not-for-profit org leader)*

... our financial mentor and part of their thing is they might say well I can't get my medicine because I need to pay for the script. So there's a whole raft of things that we don't hear about that are actually bubbling away for our community. And I think some of it too is that, especially as Māori, we're not forceful people. We've got people that are forceful but most of us are just like oh, kei te pai, I'm all right, don't worry, you know, and will struggle on. we get very whakama to find a place to ask.
- *(wahine Māori, not-for-profit org leader)*

Cup of Tea and a Kōrero

Taking time to stop and listen is an important and simple way to reduce stress levels/anxiety...we would have whānau just turn up and all they wanna do is someone to talk so or a cuppa tea. Pretty basic manaaki aye, they want a cuppa tea and someone to talk to. That's huge, and that's mental health. And a lot of people with mental health were also coming in very distressed.
- *(tāne Māori, not-for-profit org leader)*

I didn't realise how traumatised we were aye, until we've had to talk about it. I think it was more anger and frustration about what wasn't going on to help people. - *(wahine Māori, school leader, city)*

We realised very quickly... day three, that it was becoming overwhelming... taku tirohanga ki te tangata (my observation of the people). And really, we didn't have time to stop to have that cup of tea. I didn't and some of the ones who... helped me drive it. And I was thinking, actually, no, we need actually people who know ... the mental health field... I just happened to work there, so we rung up [name removed] and asked if we could have a team down on rotation... for as long as this takes... we had our team, our Mataora from Te Waharoa come and they did soft approach... they actually ended up doing our cup of teas and cakes and biscuits and stuff. Just from when people walk in the door... and then you can see te taumahatanga e pēhi nei te tangata (the heaviness on people). So they would say come and have a coffee and then do it that way... Just talk to them. People would have big fat tangi (cried), but it was okay, no-one was looking at them. - *(wahine Māori, marae leader)*

The strength was always there. In the background it was always a strong community, a strong based community. I think this sort of shocked everybody, put everybody on the backstep. There was a lot of confusions, a lot of upsets, a lot of things going on, but once they sort of got over that barrier, I think, as they were gathering around at afternoons at the main school, being able to sit and share food with each other and talk, they were starting to see, and you can hear the kōrero because I used to go there and have meals after I finished in the afternoon and go and sit down and you can hear them talking about, oh, this group over here come in my house and did this and did that, and, oh, someone was over here doing this and that. There was some jokes, there was laughter, there was a whole lot of humour going around, which was cool. That's what you wanted to hear. That's what the community needed to do, was bring the humour out and start having a bit of a laugh about it. But at the same time, still aware in the back of their minds that it just wasn't clear, it wasn't safe at all, things just ... it was terrible. - *(tāne Māori, volunteer lead, rural)*

...that was the worst night of my life, he was quite shellshocked. ...I had to stop at one of the neighbours, and I had dark glasses on, and he said are you all right? I said no I'm not. ... he said do you want a cup of tea? I said no, I just need someone to talk to and a little moment together.
- *(wahine Māori, rural)*

Rain anxiety and repeated weather events

...when it rains I stay awake all night because I'm that close to the river...if the river meets this one tree that's by my house that's a getaway...just get in your car and drive to the closest place you can go to. - *(wahine Māori, east coast)*

Some people already, that same day when they know a big storm's coming, they're already packing themselves and heading into town. It's affecting them mentally. It's affecting them. They're scared.
- *(tāne Māori, volunteer lead, rural)*

...we've got lots of whānau who experience panic attacks and anxiety every time there's a sniff of rain. - *(wahine Māori, east coast)*

I don't sleep [when it rains], I keep getting up and looking at the river levels. - *(Pākehā male, rural)*

There's huge anxiety whenever there's bad weather coming our way and that hurts them with their work or just their daily lives. - *(Māori-Samoan male, city)*

...if there's a weather event advertised, you notice the stress levels in the community go up. And that's not necessarily coming out in domestics or people fighting or arguing. But you drive around town and you get a sense of there's a real fear in the community. ... Like you going to the shop and you can sense it, you can feel it. I really think you can. I don't know if that comes down to just human instinct or I've been in the police so long I can pick up on that. ... If we know there's a significant weather event potentially going to hit, you come into the town here, man, and you can sense you can sense everyone's on edge. People are panic buying. People are stressing out, and the anxiety levels are going through the roof. You can smell it, I reckon, and that to me really stands out, and that was really vivid... - *(Pākehā male, first responder, east coast)*

Just the toll on my hubby, because he'd had a heart attack when he was 56 and he's 75 now. ... when it rains, that's when the anxiety sets in.
- *(wahine Māori, health lead)*

Yeah, I just think for everyone living out here under the hill, whether you're at that end and you have immediately been affected, but you're at this end thinking am I next, when's this gonna come down? Or... it's raining, you can't sleep. You've got different scenarios going through your head and also you're thinking of the future. Like, you know, is there going to be a point where they do move us all out...It's just, it's an uncertainty that's quite impacting on everybody out here.
- *(elderly Pākehā woman, coastal)*

It is raining again, and I can feel today at work, I could feel people. We're gonna get 30 or 40 mls of rain, but it triggers people. People were saying today at work, 'oh I hear there's an orange, we're on an orange warning today'. You know, people are very in tune with what's going on with the weather in a way that not before, you know? People's stress levels are very heightened, everyone's very twitchy when these events happen again It's the old Chinese water torture. It's drip, drip, drip and it's just, so yeah, people's ability to be resilient, yeah, their tolerance I guess. As I say, they're very twitchy, they're very, everyone is on edge.
- *(elderly Māori-Pākehā woman, horticulture)*

I think there is a lot of anxiety within the organisation and in the community every time it rains as well. The other night, I think it started raining and I used to love falling asleep to the sound of rain. And, I was just, like, it's fucking raining. It feels like it's always raining. ...I think the community needs to do a lot of, well, there's a lot of work to be done and there's a lot of healing to be done. And, I think it's going to take a long time for people to really not get over it, but just be able to move past it.
- *(Pākehā woman, local government worker)*

I used to love rain, but now I'm just like any time we have it... It's just very negative. ...knowing that I have friends and families where it's most affected... It's not a relaxing day when it's raining, it's like "oh what's gonna happen now"?
- *(Pacific wahine, rangatahi)*

I remember the second evacuation, I was in town here and as a whānau, I panicked. ... I just, in my head, saw this big huge tidal wave of water coming from that way. ...I thought oh shit, we're fucked, we've gotta get outta here. ... So I do remember feeling very stressed and anxious myself when one of the other evacuations was in place, where there was flooding happening in Gisborne. Yeah, so quite scary, and therefore, impacts the way that I feel impacted on my sons. They're okay now, but I still feel anxious when there are rain warnings in place. - *(wahine Māori, school leader, rural)*

I don't think we're talking enough about the stress and the anxiety that people feel when it rains. I feel it. I watch the weather in a way, I mean I've always taken notice of the weather, but now its become quite ingrained. It's more of a need to know that the coast is clear, you know, that it's not another hit. And I worry about children and I worry about older people... and it doesn't matter whether

you're on a hill or on the flats, everybody's affected but affected differently. I think that there's a whole level of stress here that nobody's talking about.
- *(wahine Māori, social recovery leader)*

Weather-Related Mental Health Affects in the Community

Mental health is obviously not an offence but the behaviour that comes as a result of that episode can be an offence. So smashing that window, having that argument, assaulting your family member, that can all be directly impacted from a mental health episode. Mental health has definitely increased. I can only speak from a policing perspective, but I'd say, yes, it has increased calls for service for those having a mental health episode. - *(Pacific male, first responder)*

The mental health side of things was, you know, everyone was all go-go-go, then over time, once the adrenalin's gone and you've caught up with yourself, some of our whānau were in need of psycho-social help, which was the buzzword going around at the time. They just needed support.
- *(Pacific male, first responder)*

.. more aggression. More aggressive, very aggressive. Very aggressive to get what they want. We saw people in here who basically had been sent from place to place to place, you know, and they come and they're very angry. By the time they get to us they're quite angry. So once again, come and have a cuppa tea, kei te pai, we'll get to what you need. Have a kai and a cuppa tea. That's what brought them down.
- *(tāne Māori, not-for-profit org leader)*

There are a lot of people that are trying to (a) see a positive future for themselves, (b) how can they make that happen. And many people just can't see a way forward...because of what they've lost during that cyclone. I am very aware that there's some very sad people around. One of the areas of concern for me is the high rate of suicide amongst our young people, our Māori young people. I mean young Māori male, they top the list. - *(kaumātua, Kaiti)*

I think some are quite complacent with 'oh well, here we go again'. I see some people that have, over time it's just taken away a bit more of them, you know, and some of our whānau that have had some near misses with their homes and things have got worse. Some of our urupā that have been eroded away and the impact that's had on certain whānau. I hear and see all this. Yeah, so I see a bit of a mixture from, 'oh well, here we go again', to being really, really impacted and mental health effects. I know some people, if they hear rain on the roof, they immediately become anxious.
- *(Pacific male, first responder)*

You've got these layers. You've got COVID, then you've got all the business people, the labour challenges that flew out of that and supply chains. But for the people in the community, I think COVID they got through pretty well. I mean, it was stressful for people, but a lot of support structures were there and I think the climate-related, they're huge, you know? When you're watching bloody logs flying past your house and, or you're sitting in your house and there's water as far as the eye can see and climate change and all the messages are only gonna get worse. And then you look at Ukraine and now bloody, or in Gaza in the Middle East and you're going, woah. And then I drive around and I'm going, wow, there's some local companies who have been part of this community for a long time closing up or shrinking. It worries me for this region. It's like I'm just going, where is the future? I think it's a death by a thousand cuts.
- *(elderly Pākehā male, horticulture)*

Sunshine, you just can't under-estimate what sunshine does for the spirits. When it starts raining in Gisborne day after day after day after day, we were all really affected by it. It's like, oh my God, not again. It kind of triggered for me, it triggered all that stuff - *(elderly Māori-Pākehā woman, horticulture)*

...people are still stressed and still hurting from what's happened. I still think that there's a lot to play out as far as people's mental health goes and people getting back to work and the standard that they think is normal. Because it's a new normal now. I suppose the new standard is going to be a new normal for a lot of people as far as work goes, as far as being able to get to work and that sort of stuff. - *(Pākehā male, first responder, east coast)*

...the impacts that we have to experience from them [weather events] definitely heightens the emotions. And if you're already vulnerable in some spaces with trauma or anything like that can definitely lead to enhance any feelings of abandonments, suicide, loss, all of those sorts of things that is not good for your mental health, yeah.
- *(wahine Māori, east coast)*

I think we're just exhausted, but you can feel the angst in the community. I think it's pretty prevalent at the moment. We get it walking through that door every day. - *(wahine Māori, medical practice, city)*

'Cause often the waiting, the not knowing. The anxiety, whether it's bundling support for business, or, you know clearing of large woody debris, or silt, or homes that have been, you know, damaged or destroyed. It's often that waiting stuff that puts the most pressure on..
- *(Pākehā woman, mental health)*

... when the sun's shining and you get a bit of sun and everyone sort of cheers up a bit, and then you get a couple of consecutive days of bad weather and everyone's mood comes down... I do know that not just those weather events, but with a lot of rain and bad weather, it does bring everyone's moods down and stuff. And you could compare it to, I suppose if the All Blacks lose on Sunday, there'll probably be a few domestics. It's just the way it is. It's how people operate, I guess, but it's a mindset. If the sun is shining, people's moods are better.
- *(Pākehā male, first responder, east coast)*

People are so flat. People are tired, they've got nothing in the tanks. We're going into that season of cyclones again. So actually, it's, yeah, people are tired, people are so flat and it's just like not again, you know? Not again. Resilience, you know, is an overused word and, yeah, I mean, we've had to develop a hell of a lot of resilience over 40 years in business. But, yeah, we all have our limits!
- *(elderly Māori-Pākehā woman, horticulture)*

Mental Health Support: Inaccessibility and Responsiveness to Climate-Related Anxiety and Trauma

There's not enough support for mental health generally, so why would there be support for trauma associated with weather related events right? I really don't think there's anything that health can do. Like the community need to find its own way around how to do that. And it might be through, you know these collective conversations that are happening.
- *(wahine Māori, local government)*

The supports are there if you know where to look. But what I've found is the further you get away from Gisborne and I reckon it gets worse as you go up the coast, the less supports there are. They are there if you know and people know which people to approach. But then we've got situations where there's people here that they weren't contacted by the council. They were only followed up eventually through local knowledge otherwise they would have just been left.
- *(Pākehā male, first responder, east coast)*

There needs to be more options for whānau when they are seeking mental health. Because there's some organisations that they don't want to go to because they're kaupapa their doesn't align with theirs. So just a few more different places for whānau to be able to explore and seek help.
- *(Pākehā woman, not-for-profit org leader)*

...it's so PC now aye, you sorta can't ask "have you got any mental health issues?" But you notice that even for people who are in distress, their mental health was way up here. And those who already

had mental health issues were very distraught, you know. 'Cause no doctors, no nothing, so you know, they're running around. The hospital was down to X amount of staff. You could only go in if you had this, this. So that shows that our whole system of caring for people is broken down, especially in Gisborne. It's just broken down, you know. Not enough doctors, not enough nurses. They had lovely Māori volunteers down there trying to help manaaki people aye.
- *(wahine Māori, not-for-profit org leader)*

PTSD: Persistent Torrential Sudden Dread

This event has brought it all back in the manner of PTSD, which I call persistent torrential sudden dread. It's big in that way and there are effects of it. Like not being able to deal with the normal stuff of your life. I've got to pay that bill, I've got no motivation to do my banking or vacuum clean my floor, stuff like that...when you have to dredge up energy for stuff you can and you do, but the rest of the time it can be pretty ugly.
- *(elderly Pākehā woman, coastal community, house affected by land instability in the past)*

Chronic events and natural disasters, they impact people. Mental health can, you know lead into high rates of suicide and things, we've seen that with the Australian floods and droughts, and all that kinda stuff. And when I lean into my work, the compounding significant events over multiple years is severely impacting communities. It's impacting livelihoods, economic productivities of land. Just the, you know having to throw yourself over a river to go to get your groceries, or go to your job, or whatever. So for me, whenever we have another event, I just think I hope there's no collateral damage to life out of this.
- *(wahine Māori, local government manager)*

They [elderly people displaced by the floods] don't want to go home. Some of them have been burgled and some of them, it's just a place of trauma, really. Yeah, it's a place of trauma.
- *(wahine Māori, social service leader)*

Coping strategies: Connection, Exercise, karakia, vaping and alcohol

...if I compare with Hawkes Bay, I think we connected more with our communities and I think we saved lives by doing that. And I think in Hawkes Bay it was bigger than what they could cope with, and that organisations didn't connect as well. Not that it's always about organisations, sometimes it's just knowing one key person in each valley so to speak. And I think overall in this district we did better at that and it showed. Hawkes Bay, the self-inflicted deaths afterwards, yeah which no one really talks much about, yeah. It's not rumour, you know we know some of those people that took their lives and I just, you know I think wow, you know, we've done incredibly well here. Even if we just go across the driveway and shout at the neighbour, we're going like "hey are you all right, are you alive?" Yeah! - *(wahine Māori, health leadership)*

Just I knew that's what I needed to do, and there were a few of us that just showed up and cranked out a workout and it was good. I actually coached the ladies for quite a few sessions. Sometimes it was a lot, like, going home, cooking dinner and then going back to the gym, but I loved it. And, it's the, like, doing something, keeping busy but also doing something that makes a difference.
- *(Pākehā woman, manager)*

For our team it's around self-care, what is your self-care? For some they'll work from home, so then we just, you know chime in. The majority are starting to get braver and come back in. So if you're coming in, what is that you need to do? Some will just go for a walk during the day just to help regulate themselves. And it's a constant, we have one that has an 11 o'clock routine where he goes for a walk. ...so, you know they've got their self-care plan to keep them going. - *(wahine Māori, social worker)*

... I am having counselling through some beautiful Māori healers... realising just how tired you are.
- *(Pākehā woman, not-for-profit org leader)*

...when nine days out of 10 a whole pile of us would end up at [neighbour's name] drinking wine every evening, or vodka. And it was like lockdown in a way that you just felt the need to be together.
- *(elderly Pākehā women, coastal)*

So a local shop was letting people tick up things like what they needed. They needed alcohol and they needed vapes, is what a lot of the whānau will tell you they were ticking up.
- *(wahine Māori, school leader, rural)*

...in my personal case I think that I've done 20 years' worth of meditation. For this purpose [house recently red-stickered]. Leading up to this moment...I do two hours a day and I have done for 20 years, so that keeps me in a good place... in a clear mind...I think that's an amazing tool for me personally...that's my way of keeping my shit together. - *(elderly Pākehā woman, coastal)*

I say to people, it's okay to sit with your feelings, like, you can have a down day and you can have a day where you mope around and feel sorry for yourself. And, don't get out of bed or whatever, but make it a day, not a week, not a month, like, and then you pick yourself up and you carry on. And, it is about finding things, yeah, I do like to be busy but also exercise every morning, pretty much. - *(Pākehā woman, manager)*

There is no secret, but you have prayed to God to keep you comfort. Yeah, yeah, ask him, yeah, look after my family, yeah. - *(Tongan male, elder)*

One of the things that also helped us was we'd start the day with a karakia and end with a karakia. And so we always did that, that helped settle us.
- *(wahine Māori, social worker)*

I need help, you know we need a wananga type environment where whānau can come and go. Get all their medical checks done, learn strategies of how to deal with anxiety. Plus a lot of us need wairua healing. - *(wahine Māori, east coast)*

We karakia. Every morning. We definitely karakia, and it's all about moving forward on the day that we're here for our whānau, our mokopuna. It's all of that and just reaching out, reaching out, reaching out to our whānau. If it's not whānau, it's those that we know that we can have a kōrero with, just someone outside of the whānau.
- *(tāne Māori and wahine, rural)*

But everybody was just still in a daze about everything that's happened, just still blown away. I think it was just the people themselves sort of calmed themselves down by being in a group of each other and being amongst each other and feeding off each other. Supporting each other at the local kura. I think that's what it was mostly, the way of keeping their wellbeing intact and not letting them lose themselves over this whole thing. And share. Sharing these stories with each other to hopefully, and which it did, eh, to make them feel better about themselves being safe in the small town that basically ripped through their homes.
- *(tāne Māori, volunteer lead, rural)*

Trauma associated with damage to cultural sites of significance and connection

...Not everyone can afford to go to town to the pools. Can we still swim in our sea? Is it safe? Is there a log under that whitewater? There's all that, so we're totally socially disrupted, culturally disrupted, physically disrupted, emotionally hanging in. And we're lucky we're resilient. We're resilient people. - *(tāne Māori, east coast)*

Our maunga is right by the ocean and, you know that's slowly getting eaten away. My nephew, I gifted him a name and the name of our maunga is in that. You know that's how important our maunga is to us, but she's becoming lost. Every time the ocean gets higher, every time there's big storms in, you know the creek turns, and starts cutting into the maunga instead. And that impact is really huge, but I haven't been able to go home and put my feet on the land. - *(wahine Māori, Kaiti)*

Grief and sadness associated with environmental damage

I didn't fully appreciate how important the whenua, ngahere, Papatuanuku is to Māori until Bola happened. All the Pākehās were out there measuring up how much fences they had lost, how many cattle they had lost, how many sheep they had lost, doing the sums. Māori were saying "oh my God, at Awa is never gonna be the same again", "that maunga is never gonna look the same again". And they were more concerned about what had happened to Papatuanuku than the financial loss. The weather's really hit Papatuanuku, but I think the damage we have done is greater. When you get the two, Bola and Gabrielle, and then add to that the abuse we have had on Papatuanuku, it's pretty sad. - *(kaumātua, Kaiti)*

And it still, as I say, happens this day with the roading system. You know you get rain, it just, yeah the area just doesn't cope. Just the recent, last week with extra sort of surface flooding, all still, with the slash and everything coming down. And then coming into the harbour blocking the bridges, having to close off the bridges, so the big machinery can get in. And just take out the slash and turn it around, and let it go out to sea unfortunately. And then it comes back up on our beaches, so we're just back to square one. The beaches are atrocious again. It just doesn't stop. The weather gods have it in for us. I still personally get anxious when it rains, yeah.
- *(elderly Pākehā woman, nurse)*

We've gotta look after the awa, you know? We've gotta look after the whenua, we've gotta look after the Awa. Spiritual wellbeing, emotional wellbeing and physical wellbeing for your whānau, it all rests on the whenua in the Māori world. And the whenua is broken and bleeding and weeping and rupturing. And I look around at the community and people are broken and bleeding and weeping and rupturing. And it goes back to the whenua.
- *(elderly Māori-Pākehā woman)*

We learn a lot about the environment and that was one of the things that opened my eyes up around what have we done to our environment; in the past years, what have we done to our awas – have we looked after them?
- *(tāne Māori, volunteer lead, rural)*

Who's been managing our lands for the last 30 years, filling our pockets instead of putting mechanisms in place for long term longevity of sustainability....we need to be in a state of reproduction, regenerative, reduction. I get a bit, probably the most I probably cried since it. Yeah, it's so hard after it all that you just don't have much.
- *(wahine Māori, east coast)*

COVID-19 followed by Repeated Extreme Weather Events

...I think that the resilience is shot in this whole region, and I think that people's temperaments and mental health is already frayed after COVID. And then just this rolling sequential, just rain event after rain event, as people that deal with the post trauma. I have definitely noticed that people's patience has gone. People's levels of being rational is gone and the mood in the wider public is definitely not a happy one...
- *(Pākehā woman, manager)*

When it rains heavily, my body, my body just instantly reacts... I look out my window, okay, how bad is it, judging. ... The trauma of weather conditions is still there... I see the trauma signs, or trauma impact signs... ... Yeah there has been a heightened awareness around the community-wise in regards to the cyclone. 'Cause everyone's still recovering from COVID, so, you know you get the COVID recovery, and then you're onto the cyclone, so there's always something. And we do have a lot of whānau who are coming in with high anxiety, low moods. You know sometimes the anxiety paralyses them, so for them it's more comfortable to stay home and just yeah, you know.
- *(wahine Māori, social worker)*

...the addiction side too, I mean we know that when people are struggling they will turn to addiction. Addiction stuff keeps them calmer, and that's what I'm saying, we're always trying to give alternatives rather than the stuff. You know, kei te pai if they're gonna have a little bit of a wine or a beer, but for a lot of our whānau they go well overboard. And then there's a whole lot of domestic violence, ... Didn't get paid this week, you know, the violence begins. We know, we see that all the time, people coming in and they're saying, that's why I'm loving Tauawhi's new house, you know. Just a respite for men who might, you know [be struggling]. The police come, rather than arrest them take them there to cool off. ...I've got a real high tolerance for stress and, work related stress, any kind of stress anyway. But I don't doubt that it has had an impact on me in some way. I think it's impacted everybody in our community in some way or another. And that's off the back of, you know COVID as well. So yeah, no, we were already, our behaviours and psyche must have changed in some way around not having all that social contact for a very, very long time.
- *(tāne Māori, not-for-profit org leader)*

... we just thought we were out of the blue of COVID and bang this comes so it's kind of like we're being sucker punched over and over and over. And we still are. Whereas the rest of the country think we're back to normal. That's what we get sick of. We get sick of hearing that. It's like they don't want to hear about it anymore... So in regards to injuries, more mental yeah.
- *(wahine Māori, medical practice, city)*

S.O.S: Stop calling us resilient and invest in our people and places

I just want to say to government, I want them to stop calling us resilient and I want them to just help. We're allowed to call ourselves resilient, I think it's a cop out when they do it. And I think they need to stop doing that, taking it for granted. Because then the rest of New Zealand turns around and goes oh they're fine, they're so resilient, that's not okay. We're only resilient because we have to be, we have no choice. Well we've had to be for a long time, with or without cyclones. So please stop saying that. Stop saying that and tell us how you're gonna help us. And stop saying that we need to remove people from communities that their whānau have been part of since before they were even in New Zealand. Right, before Pākehā came to New Zealand our people were on that land, so stop saying we need to move out of those communities and put money in to help with the infrastructure instead.
- *(wahine Māori, Kaiti)*

Resilience, you know, is an overused word. I mean, we've had to develop a hell of a lot of resilience over 40 years in business here. But, yeah, we all have our limits... Immediately after the event, the word was, we need to make a noise because if we don't, we'll be forgotten. Hawke's Bay's all geared for the sunshine and they'll steal the thunder. We've gotta make a noise. Hawke's Bay's organised and they're getting the money and they're getting the attention. They're getting the media. But this has been happening as long as I've lived here [over 60 years]. We've always been the poor cousin, because as they say, out of sight, out of mind. And the East Coast region is a relatively small economic contributor to the country. And if it's Auckland... the money and support will be there, but for us, well, the kitty's empty.
- *(elderly Pākehā male, horticulture)*

2.14 Community Hubs

2.14.1 Key Findings

- → Local community knowledge and relationships are critical in understanding the needs of, and supporting communities, during and after an extreme weather event.
- → Community hubs (i.e., schools, churches, marae) became important places where local communities could gather for information, food, water, electricity, internet access, clothing, emotional support, basic medical needs and/or mental health support.
- → Some community hubs are existing places where communities gather, others have developed in response to recent events.
- → When undamaged, many marae were critical resources for communities (tangata whenua, tangata tiriti, and tauiwi), very well-functioning and well prepared. However, this manaakitanga was often at their own expense (human and financial), exhausting their reserves (i.e., kai, fuel, finances) without adequate or established systems for reimbursement. For future preparedness, there is a need for greater resourcing and support to the marae playing key roles in community emergency and recovery.
- → Te Poho o Rāwiri (serving a community of 12,000 with high deprivation and social needs) in Kaiti was praised highly as an innovative and responsive pā where residents could come for various forms of support (i.e., information from Police and other key agencies, medical, kai, water, showers, psycho-social, advice from WINZ, etc.).
- → Marae are vital in community support during extreme weather events, but it is important that external organisations respect marae leadership in how they present and what they do in these spaces. Marae-based volunteers would also benefit from access to regular training and planning with Civil Defence and other emergency services.
- → When community hubs are acknowledged by local or national agencies as an effective place to connect with and support the community, it is important that communication and coordination occurs in ways that respect the rules and values of the hub. People come to these places because they know/trust the leaders and staff (and thus feel safe to be vulnerable and to ask for/accept help), so it is important that these places and the people running them are respected and supported.
- → In some communities (i.e., Te Karaka), schools also played a key role, offering a place for people to come for food, comfort and support, shelter, basic health needs, and access to information.
- → The people leading and volunteering in community hubs (particularly marae and schools in most affected communities) worked very long hours, often without breaks, caring for their communities (even while concerned for their own whānau), but this took a toll on their own health and wellbeing leading to exhaustion and burnout. It could be useful to have a debriefing process amongst those involved, with the aim of developing more sustainable ways of working, while maintaining a commitment to serving in both paid and voluntary roles.
- → Churches (and church-based organisations) worked with local and national networks to get supplies to the most vulnerable.
- → Community hubs (marae, schools, churches) often worked together, sharing resources to ensure the most impacted communities had supplies.
- → In the majority of cases, it was women (see 'Gender') leading the most effective community hubs with high levels of community knowledge, relationships, organisational skills, compassion, and empathy. Our findings thus show parallels with those in a recent study of women's experiences during and following the February 2022 flood event that impacted the Northern Rivers of New South Wales, which found women's leadership as key to community 'saving-itself' in unprecedented trauma: "the community-based response was spontaneous yet hugely sophisticated in its mobilisation. Unexpected findings show responsive leadership was predominantly undertaken by women."
- → Some isolated and remote communities were frustrated by the lack of support from GDC, CD, have come to believe they can only rely on each other, with community networks and relationships critical; in response to inadequacies in existing systems, some communities have created their own hubs to ensure they are better equipped to support one another in the future.
- → Many identify the need for funding of community hubs (particularly marae) as critical to disaster response and recovery.
- → With community hubs playing such an important role during an emergency, many call for these people and places to be supported (with funding) to invest in future preparedness (i.e., generator, SAT phone, water supplies, food storage, first aid supplies, personal hygiene products, incl. menstrual products).
- → Future preparedness planning should not rely on the assumption that primarily volunteer-based community hubs will be ready and willing to operate, particularly given the financial and emotional cost to those running these spaces during/after an event.
- → Those leading and working in community hubs were responding to the needs of their communities, but some found applications for reimbursement frustrating and time-consuming, and not founded on a trust-based approach ('we need all the receipts') that recognises the complexities of operating during a period without power, tele-communications or digital payment systems.
- → While some community hubs have been 'given' SAT phones or Starlinks, it is often the responsibility of the hub to then pay for the subscription, which is often not realistic (i.e., for a small rural school to add the monthly fee to an already stretched budget) - while some of these technologies are on a subscription basis to pay when required, the process of connecting can be complicated and difficult in an emergency.
- → Some community hubs in remote and isolated areas call for greater communication and support from Gisborne Civil Defence, and for relationship building and knowledge sharing to occur in the downtime between events.
- → Some community hubs emerged from a recognition that existing infrastructure is inadequate, and thus communities turn to those people and places they know and trust for support.

2.14.2 Illustrative Quotes

Community Hubs: Grounded in Local Knowledge, Relationships and Manaakitanga

We just did day by day, we would do something, something to actually improve the manaaki we could give or offer. And so that people coming here, 'cause we had people coming here days and days for comfort, really. We have a high population, they call it a Decile 10. ... So we have a huge drug problem in Kaiti, but we understand the effects of no drugs on some of our families. It was the same that we did through COVID. We understand that if they don't get drugs, the home could spiral really out of control. We understand some that if they don't have their alcohol fix, the house could spiral out of control. We also know that a lot of those houses have got wee ones in it... We all do how we see best to do ourselves and our people. We've done it, the pā's 96 years old, eh? It has been the only bastion for Māori in Kaiti... So, why would we ask anyone permission to do anything we do... so that's the other good thing, it actually works for us. It helps that I can be grumpy... I absolutely understand that now 'cause that grumpy moves mountains.
- *(wahine Māori, marae leader)*

We had kai packs set up 'cause we were also doing COVID response when that hit... so we had kai. We could give whānau a pantry pack, meat pack, hygiene packs, depending how many were in their family, giving them a couple of those things to help their whānau for that time. We begged and borrowed barbecues to take them out to some of our communities, particularly Waikirikiri area to ask this house if they could cook a barbecue. We took them everything they needed for their neighbourhood... we dropped off barbecues around the place with kai and tables and chairs just for people to sit at.
- *(wahine Māori, marae leader)*

Community hubs: Places were people feel safe to be vulnerable

People don't like going to the clubrooms so my thoughts, I thought if we took it back to our four maraes that we have in Toko. Yeah, make them hubs...that will help. People will feel more comfortable...we should actually take it back to our own maraes and then our maraes feed our people. Our marae should take the people just so that...They're comfortable in their home and they connect...70 percent of Toko are marae-oriented people. I think people will be way comfortable, workers, the people, I think they'll be way comfortable walking into the marae and getting their packs or hot food. Or a hot shower or whatever.
- *(wahine Māori, first responder, east coast)*

When we came here [to Tairāwhiti], there was no place for us to come together. And it was so fortunate to have this accommodation that accommodated us during that time of stress. Where we could come together and sit down together and plan things out.....And then the community here, like cookies and they come up to us because we had just a little hub, one of our residents. We used this leisure centre where we were able to try and reach out to other families as well. - *(Fijian, city)*

Poho was so good, they were so awesome. They were looking after everybody. I went down to drop some stuff off and it was just amazing. They were pumping, they had people from council, and people from, you know Ministry of Education and all sorts giving korero to the community. So everyone knew what was happening. 'Cause while we had no comms we didn't know anything unless you had a radio, or sitting in your car. So they were so good, I was so impressed by them and the way that they held the community, especially in Kaiti.
- *(wahine Māori, Gisborne City)*

Marae: Pā at the Heart of Community

...people are living day to day...And that was the beauty of the Marae here, especially Poho-o-Rāwiri. And right up to about a month ago they were still feeding anyone who came up, they were still giving out supplies... - *(wahine Māori, local government)*

... it's interesting how everyone labels you as something. So we were deemed to be an iwi response, we were deemed to be a hub, we were called all these names. But really, we were just a pā.
- *(wahine Māori, marae leader)*

I s'pose we were lucky in that prior to Gabrielle hitting, over the COVID years, we've popped up our kitchen to cook meals and we put them in that, so that's an outside, that container's a freezer. And we freeze them and then we get low, and then we re- pop up, you know, and we pay our ones to cook and they'll do a hard out cookout for, say, two weeks and fill the freezers.
- *(wahine Māori, marae leader)*

When I think about the network of marae, so when this all happened, that network of Ngāti Porou Marae, and Kahungunu Marae, kicked into high gear. Everything they got came from donations They weren't funded, they didn't have that money from somewhere, that came from other people outside of the community putting into it. So all those marae in Auckland, and in Wellington, they stood up and they got in contact with the marae here. And said what do you actually need? And that was the list that went out to the whānau in those other communities and it was huge. They managed organised trucks, and choppers, and all sorts to get the stuff to where it needed to go... When you want to make a community move it'll happen at the marae... - *(wahine Māori, Kaiti)*

You see a marae is not only a facility, it's got heaps of mattresses, it's got a huge kitchen, tables, cutlery, everything, everything there. But they also have people who know how to host many people. It's a skill and we do it without even thinking, we just, as soon as the need comes, bang we're into it... once again, proved during Gabrielle, how important it was. Sadly however, there are some of our marae that ended up being munted.
- *(kaumātua, Kaiti)*

...when we were up at Poho you could see that there were people that were really worried about medications and stuff. ... then of course things were limited, so it just makes people anxious around not being able to access those things. And so they had to work really hard to make sure that... people were okay and knew that they were gonna get what they needed I guess.
- *(Pākehā woman, school leader)*

We had our emergency centres set up before the cyclone hit. And Te Poho-o-Rāwirishould have had more support there, so we were on the back foot there. Yeah. But I think things kind of worked its way out in the end and it became quite a central hub to triage. And take in people, yeah, so that was really good. - *(wahine Māori, local government)*

People were saying... they need to have a shower 'cause their thing's off... so we organised them to come here and shower. Just things like that... doesn't cost anything... but it helps a lot... we had a cup of tea, we had got a cook in, him and his wife and the sisters and the cousins, they all came and drove our kitchen and they were just... cooking kai endlessly. And so anyone could come for breakfast, lunch or tea, every day and we just had a roving kitchen and roving cup of tea. And people just found comfort in it.
- *(wahine Māori, marae leader)*

We... shanghai'd that hui, we ended up running that here. So we had one Māori young guy... and his wife and their two kids, they were sitting there... the police, he did his spiel... the police would do a report, health department would do a report, social welfare, all the government agencies, civil defence, they would all do a report. And then he would say, anybody got any question... And this young boy stood up and he said, oh we've just come and like to offer our help... so I went over and sat by him and I said, what can you do for us? He said, I'm a doctor. You're fucking kidding... His wife had got a job and she was doing a specialist training, she's a surgical nurse... they were doing something here in Gisborne Hospital. So they had just moved here, he hadn't started any job –... So we set up... a doctor's corner and said to him... if someone needs a private consultation, just walk over there and that's the mattress room.
- *(wahine Māori, marae leader)*

The pā is so amazing for that, and every community has a pa, that they go to and that is looked after. And I think that's really important, if the pā had vehicles, so they could go and pick people up and bring them to the pa to give them a feed, you know? That was another thing, most people couldn't buy petrol, and so they couldn't get to the pa. And so they were at home trying to survive off their, you know empty cupboard, because ooh I was getting paid today. And ooh my pay didn't go through 'cause the internet's down and now I can't pay anything. And I don't have cash to buy food, 'cause who has cash? That's where the pa fits in, like they started delivering. Drop-offs, door to door meals. Pre-cooked meals to the community, especially the community surrounding the marae, yeah. But if they had more funding they would have been able to do that. Like it would have been better on them, it would have been easier on them. We wouldn't be burning out our people, 'cause it's not fair that they keep bearing the burden of that. And they don't get the recognition they deserve. We recognise them all the time, but do other agencies? - *(wahine Māori, Kaiti)*

Community hubs as used by local or national agencies: Respecting house rules

They said, oh this is the plan of it nationally, I said I'll tell you, that doesn't work at the pā.
- *(wahine Māori, marae leader)*

And there were about 14 public service leaders and we got them all together in the room and then we went around, 'right, who are you, what's your priorities'. And we quickly gleaned from all of those sectors what their priorities were. We set up a priorities board and we said we'd go to Poho-o-Rāwiri and we set up there. That was one point that the community went to. All our Fijian men, RSE plus the forestry guys, they were just there. So we went there, got a Starlink set up, we ran services out of the wharenui. That took a couple of days'. So we got that set up and then we created a space in the whare kai for our whānau to come in and ask questions. - *(Pacific male, first responder)*

...well maybe it was a week or two, they set up a hub at Te Poho-o-Rāwiri where they had some GPs available and they were coordinating kai parcels. That was their only access she [elderly mother] had to a GP. - *(wahine Māori, social service leader)*

By Wednesday, I realised suddenly our whānau couldn't access their benefit to get stores and they couldn't use their car. so we went to WINZ and arranged for WINZ to set up a table in the wharenui, and so we ended up having three or four tables set up for whānau to come in....so we had, so we had social welfare, we had Ministry of Social Welfare, WINZ, then we realised that my nephews who have got bracelets on, couldn't do check-ins or if they're on PD. So we had PD, we had Corrections set up a table here. Then we realised some of them who were paying, you know, Inland Revenue, their benefits and stuff that are back there... Someone here in Rata came from IRD and they set up a table... MB come with the employment thing. They said, oh do you need someone from Kainga Ora, aunty? I said, yeah, bring them, get them in too.

So we had Kainga Ora, we had MB. then after a while I says, you better tell Immigration to get here otherwise I'm going on TV and I will slam them. So he rung them, they came for one day. then with all of that, we had mental health working in here. The guy who works for Kainga Ora, he came up to me and said, oh could my wife help somewhere? And I said, what does your wife do? He said, she's a lawyer, but she's just sitting around waiting for me. I said, oh cool, so we had her sit in the dining room to help people with insurance.
- *(wahine Māori, marae leader)*

We had triage there so when Pinnacle came in, they came with a doctor, three nurses... if we had've done we could have probably done immunisations. But, you know, you think to yourself, you're the medical, what else, what other opportunity could you do here? The only thing I did say to all of them was, we're not doing any surveys and shit, we're not doing that. We just want to come in, help them so they can leave with a bit of dignity,...we had MSD stay for four weeks, but we kept the kitchen running for eight weeks before we took it down.
- *(wahine Māori, marae leader)*

One day I came in... and there was eight people, council workers... Just sitting, you know, everyone's working.... I said, oh for goodness sake, who are you all? we've come from the council, we've just come to see... what you're doing. I said, who wants to know? They said, well, you know, is there anything you need? I said, there's fucking lots of things to need. but you fellas having one truck each, using petrol and driving around is not a good look. If you don't know how to wash a dish or set a table, piss off... then I followed them, I went back and I said, Dallas, I've just told your lot, don't come back to the pā, I don't want them there. I can't, she said, I think they're just trying to help. I said, no, they weren't, they were sitting there making themselves look more important than they really are. and I only want people who can work stuff, I don't want to whakaiti (belittle) anyone, but crikey... sitting in the middle of the kitchen table, everyone's bloody busy and they're just watching. And, of course, you know, if people sit there, something, kai, will land in front of you so they're happy...

I said, you guys don't realise, we've got people out there who hurt, they've got no money, they've got no petrol, they can't use their car, they've got kids. I've just had one woman here walk with her six kids from the top of Waikirikiri. here you fellas are driving around. I said, drive around the streets, if people are walking, pick them up and give them a ride. But all of those sort of things... just led to frustration. But it did annoy me how... all the major players, not just government, other players too, were having say over what was happening when I couldn't see the benefit here for the people.
- *(wahine Māori, marae leader)*

...apparently we became the talk of town and then [health provider] stepped in... I could hear them talking. Oh yes, no, you'll have to do this and you have to do that. And I said, who are you? He said, who are you? I said, well, I'm running this show, what are you doing? ...What are you doing here and who are you? He said, oh I'm so and so and we're gonna do, and I said, no, who are you, where'd you come from, what's your whakapapa? I was getting fucking wild with him... then as it turned out, he was from [health provider]. I said, if I came to your house, I wouldn't have the audacity to walk into your house and rearrange the furniture... so don't come into our house and rearrange our fucking furniture... I said... I've never come across anyone so rude. There's people in there who are distraught, they're not even a little bit as rude as you... It ended up he became quite nice. - *(wahine Māori, marae leader)*

You wanna get something done in a community you go to the local marae and ask them first. Then you go to the church groups, right, they're the other ones who, you know you can go and talk to. Then you go to the community spaces, that's how you get into a community, and that's how you get to the community. And I think a lot of our big organisations forget that. - *(wahine Māori, Kaiti)*

Schools: Spaces of Refuge and Connection

At Te Karaka Area School, being able to sit and share food with each other and talk, they were starting to see, and you can hear the kōrero... them talking about, oh, this group over here come in my house and did this and did that, and, oh, someone was over here doing this and that. There was some jokes, there was laughter, there was a whole lot of humour going around, which was cool.
- *(tāne Māori, rural*)

Our school is the Civil Defence headquarters, and so we had 107 people living there. Because they'd been displaced, they couldn't go back to their homes. ...the school became the place of refuge and was quite a pertinent space for the recovery, and still is now. - *(wahine Māori, school leader, rural)*

...we had our men who couldn't shave, who didn't have shavers, you know all of those sorts of things were, sometimes you'd consider luxury. ...it was quite eye-opening to see what people needed, were some of the most simple things. But things that you didn't think about until someone came to you and said Koka, I've got my period, I don't have any pads, or undies.
- *(wahine Māori, school leader, rural)*

...the school's were quite fit for purpose, so our gym became eating and kind of recreation space, coffee, tea, cups of tea just rolling all day in our gym. The Civil Defence headquarters was where the Civil Defence team were, so they were all kind of, there were people kind of constantly in and out there, communicating with the head of the Civil Defence team. And then we [TK School] had two people in charge of incoming donations and then we had two people in charge of donations going up. We had someone in charge of all the health resources that were coming in, nurses, doctors.
- *(wahine Māori, school leader, rural)*

Up to 300 a day, three to five hundred people we were feeding three times a day. And then yeah just all of the, you know so we were collecting donations. We were making hampers and delivering them as well to whānau who weren't coming down to the school.
- *(wahine Māori, school leader, rural)*

Provided shelter, provided refuge, provided sustenance, provided basically all the things that the displaced and community needed to probably get to a stage where they could return home. Or found whānau, but the school operated in that way for 18 days, so we had whānau living with us for 18 days. - *(wahine Māori, school leader, rural)*

...what really got us through, my message to everyone that was helping on the ground, everywhere, was that our school values. Our school values of manaakitanga, whakatauki, whakawhanaungatanga, remain at the heart of everything that we did. All the decisions that were made, all of the communication that was made, was made with those three values in mind.
- *(wahine Māori, school leader, rural)*

...manaakitanga, so, you know just absolute, kind of unconditional support awhi, help, sustenance. Just being able to look after people, manaakitanga. Whakaute, respect, so in all of our dealings, all of our communications. You had to maintain a respectful demeanour, in order to keep relationships well. Because people were already feeling at the lowest that they've probably ever felt in their lives. - *(wahine Māori, school leader, rural)*

Tireless Leadership takes its Toll

So the days were long, you know we were doing 14 hour days. ...first thing in the morning, and then the last to leave in the evening. Made sure that the whare kai was all ready to go for the next day, mopped it all out.
- *(wahine Māori, school leader, rural)*

"we realised very quickly... day three, that it was becoming overwhelming... taku tirohanga ki te tangata (the heaviness on people). And really, we didn't have time to stop to have that cup of tea.

(wahine Māori, marae leader)

The Power of Collaboration

So on the first day, we emptied out our pantry which we had just restocked, and that all went out to Te Karaka for my sister, and she was running the kitchen out there... every paper plate, every paper cup we had, every disposable thing, every rubbish bag, that all went to them. I think the other...little problems we had... when the power went out in the shops that we use that we could put on account, were closed... I went round and borrowed some money off this sister, that brother, and this cousin, and you know? To kohikohi pūtea (my observation of the people) to get sausages and stuff really. And that worked. - *(wahine Māori, marae leader)*

We realised very quickly... day three, that it was becoming overwhelming... taku tirohanga ki te tangata (the heaviness on people). And really, we didn't have time to stop to have that cup of tea. ... And I was thinking, we actually need people who know ... the mental health field... so we rung up [name removed] and asked if we could have a team down on rotation... for as long as this takes... we had our team, our Mataora from Te Waharoa came and they did soft approach... they actually ended up doing our cup of teas and cakes and biscuits and stuff. Just from when people walk in the door... and then you can see te taumahatanga e pēhi nei te tangata. So they would say come and have a coffee and then do it that way... Just talk to them. People would have big fat tangi, but it was okay, no-one was looking at them. - *(wahine Māori, marae leader)*

New Community Hubs: Doing it For Ourselves

...it's coming down I think to a lot of those communities in these isolated locations, is them being proactive. ...they keep relying on us and they have the resources. - *(kaumātua, east coast)*

It's gotten to the point where the iwi up the coast are actually taking the bull by the horns themselves and said, we're not having anything to do with the council or Civil Defence. We're going to go out on our own and sort our own stuff out, because they're dissatisfied with the way the council have operated around, and we've seen it for ourselves first hand, and we can see why. Which is quite a significant thing to go out, set up all their own shipping containers and all their own equipment for when there's a natural weather event like this.
- *(Pākehā male, first responder, east coast)*

... we were severed by communication, there was no, no outside contact with us. We took charge of ourselves, we basically grouped together and took charge of ourselves, and set up a hub. And the priority was to look at those medical needs, people in our collective of 61 people. Who were the emergency needs and how can we provide assistance if needed. And how we were to access medication for those that required it urgently.
- *(kaumātua, east coast)*

We're putting in place how we're gonna better cope and deal with the situation when the next event comes, not the health services. It's us here as locals in this group and this hub that we've set up.
- *(kaumātua, east coast)*

You know the three hapū here had absolutely nothing. It came down to one of the neighbours coming around and knocking on the door and saying how are you uncle? We're just going around and doing a check on everybody to see if they're okay. This is probably the second, or the third day after Gabrielle. They did the same in the earlier event and then I was saying to her hey, I think what I see at the road where we're isolated. It's going to take a while, why don't we formulate our own hub, because from the past experience there is gonna be no services coming in our direction. Let's take charge and we'll put you and a couple of others with our consent to represent us.
- *(kaumātua, east coast)*

The permanent Civil Defence, not the local one, needs to come out and visit these hubs. Because it reinforces the support, but it also allows them to see any changes that occurred within the hub, change of faces, change of needs and that.
- *(kaumātua, east coast)*

Funding and investment in community hubs critical to disaster response and recovery

Community things like, you know, marae and House of Breakthrough that's where people were going. These places tend to be quite self-funded. So, they've got all this stuff ready to go and they're ready to just welcome people in and we need to make sure places like that are fully resourced. And, that we have stuff ready to go for them.
- *(woman Pākehā)*

...I would advocate a shared responsibility for the upkeep of marae. We have something like 86 marae in Tairāwhiti, you know there is lifesaving facilities right throughout. We are so lucky, but there are a lot of them that are struggling to keep them up to scratch. - *(kaumātua, Kaiti)*

I think there needs to be more funding to those community groups like Super Grans and also the Maraes. Because naturally anywhere, in a civil defence emergency...they're just serving the community. They don't care whether you're Māori or not, but I think they naturally become Civil Defence hubs, so I feel like they should be future-proofed as well. - *(wahine Māori, local government)*

I feel Marae [are] taken advantage of, hey, we'll do it anyway. But given that they are such an important resource, I feel that it should be the responsibility of central government to make sure that those resources are kept up to standard. And are supported, and being able to be provided, you know they're lifesavers in many cases. And, you know we hear lots of, it's not just for, as a sanctuary during a weather thing. A marae is a place where Māori can grieve, where Māori can celebrate, where Māori can learn, and Māori can share. - *(kaumātua, Kaiti)*

About a month or maybe two later, council's came back and said, go back to NEMA 'cause they had a huge underspend. I said, how can anyone have an underspend for a cyclone event. I went back,.... they said... but we need receipts. I said, you'd better send someone here, they sent two fellas here, oh they set me up with this Pākehā fella. I showed him around and he said, oh we still need receipts. I said, why did you come here, 'cause we all knew that before you came here. because if the cyclone hit us tomorrow, I would have to do the same thing I did then. And we don't have a receipt for every little thing. He said, well, perhaps you could put it in for... the petrol you used during the time. I said, the petrol, we run a Taiao crew, we have petrol on hand, we have vehicles that are always full... We don't have those, and 'cause it had to be from the date of the cyclone. When everything went down? I said, are you listening to yourself? That doesn't make sense. 'cause no-one had anything, we fed all these people with what was in our cupboards already and in our chillers. There was nothing open. And when they did open, the trucks got stopped with kai. - *(wahine Māori, marae leader)*

3.0

3 Health Systems

Firstly, some context is important for making sense of the following 11 sections under the umbrella theme of ‘health systems’:

- → Te Tairāwhiti has the highest level of deprivation than any other district, with two thirds of the population **(65%)** living in Decile 8-10.
- → **53%** of the population identify as Māori, with **77%** of Māori in Te Tairāwhiti living within deciles 8-10.
- → **78%** of Māori children under 10 are living in Deciles 8-10.
- → Social inequities are the most important determinant of health for Te Tairāwhiti.
- → As stated by Te Whatu Ora Tairāwhiti, “As a result of our population make-up, Tairāwhiti has the worst health burden nationally. We have the highest rates of overall avoidable mortality and morbidity, and high rates of ambulatory sensitive hospitalisations. Our access to some health services are the poorest nationally, for instance access to some cardiac treatment services and renal services”[2]

3.1 Inadequacies / Inequities

3.1.1 Key Findings

- → An overwhelming finding from both community members and health professionals was that the health system is inadequate for meeting the complex social and health needs in Te Tairāwhiti.
- → Extreme weather events have (and continue to) further exacerbate longstanding inequities, including access to appropriate medical and health services.
- → Extreme weather events result in health services being unable to reach people who need assistance, so households and geographic communities need to build local capability to provide basic care and be equipped with basic medical supplies in the event that professional support and external resources are unavailable – determining the levels of capability and supplies (that often have limited shelf-life) will be a challenge given the long-standing under-resourcing of the professional health sector.
- → The loss of telecommunication systems had an impact on the provision of health services at least as significant as the loss of roads and electricity supply, possibly more given access to patient electronic records was affected.

2 https://www.hauoratairawhiti.org.nz/about-us/who/tairawhiti/

3.1.2 Illustrative Quotes

Inequities: Before, During and After Extreme Weather Events

...before the weather events and before Covid, Tairāwhiti had problems... family violence and addictions issues, and that's all exacerbated by this. And so if you're talking about what does social recovery look like, it looks like a community which is not addicted and does not beat up its whānau. So, ultimately dealing with housing in category three is what we need to do this month and for the next six months, but there's a point where we need to deal with the fact that family violence is worse, addictions are worse, and that's the long term answer.
- *(Pākehā woman, leadership role in social service sector)*

I've seen first-hand I've seen the unconscious racism in the health system I've had staff who've had heart conditions and we get the ambulance to take them up to the hospital and they'll go up there and show my presence to get the attention. 'Cause I see how they are! And older Māori don't demand, they are humble. They don't wanna make a fuss, well, some older Pākehā are like that too. But then they don't get the care they deserve
- *(Pākehā male observations of racism in health system)*

.. it's interesting.. the whole of the Ngāti Porou rohe... So from Whangara up... their needs were way different, they're way different. They were roading, they were connectivity and getting food in and out to a house or some houses. Whereas here, the capture is more of a social wellbeing and this is about... a huge capture of druggies, It's a huge capture of just different, way different dynamics, but it's a capture of 12,000 people nonetheless. And so when I say... if this little community said, well, we need this, that and the other and I say, well, actually, I need that times 5,000, it just doesn't seem fair. And if you don't live here or you don't know our demographics, it looks like I'm the greedy one.
- *(wahine Māori, marae leader)*

An Exhausted Health System: 'Five weather events in a row annihilated us'

We can't get into a doctor. The hospital struggles to recruit staff. You can't get into a doctor and if you aren't registered with a doctor, you can't register, you can't. They're all full, the books are closed.
- *(elderly Māori-Pākehā woman)*

For the health needs, there's a huge mismatch, huge mismatch. ... They say the health system's broken... our people here, just go on the list and they wait and they wait and they wait, unless you're acute. And you're acute, you're on a helicopter or you're on a plane to Waikato and from thereon, it's pretty good. But on the ground? It's really concerning. - *(elderly Māori-Pākehā woman)*

Think about the system for response to a cyclone. Needs are unmet, even with the assistance of a navigator. That's the status quo right now.
- *(wahine Māori, leadership role in social service sector)*

Going away, flying out, driving out, cost of living, all of that impacts on an already stretched community... And that's what I don't think people who don't live here weren't experiencing it, they just don't get it. They still don't get it. We're still surviving... We didn't need that cyclone just when we'd started breathing again after COVID. Five weather events in a row that annihilated us!
- *(wahine Māori manager of medical practice)*

"Think about the system for response to a cyclone. Needs are unmet, even with the assistance of a navigator. That's the status quo right now.

(wahine Māori, leadership role in social service sector)

3.2 GPs

3.2.1 Key Findings

- → Staffing of GP practices was a key consideration when staff homes were flooded or they couldn't get to work via the roads/bridges, so an important first step was learning who was available to work, and this was complicated when communication systems were down.
- → Once staffing was confirmed, a clear plan was important, in how to say open to the community (often on reduced hours).
- → In the days following the event, GPs coordinated with other relevant agencies .(i.e., Civil Defence, marae) to take medical care to the most effected and isolated communities; some (both health professionals and patients) reflected that it took too long for medical practices to get out into the community.
- → While providing health care to communities was of utmost importance, many staff were also significantly impacted and thus managers were simultaneously trying to provide care and support for their impacted staff, while also ensuring their staff at work were safe and supported (i.e., cash payments).
- → With communication systems down, usual systems of accessing patient details, contacting patients and renewing prescriptions had to be reassessed.
- → A key learning was the need for paper documentation of patients, medical histories and addresses of patients.
- → GP practices had to be creative in how they got to patients, with some investing in a four-wheel drive vehicle, and others coordinating with Civil Defence to get helicopter access into remote communities.
- → With power and communications down, it highlighted the importance of paper emergency script pads to record patients, prescriptions and other important medical details.
- → Many felt that GP medical centres were largely unavailable (i.e., closed or heavily reduced open hours), with support into rural and isolated communities taking too long.
- → Rural and isolated communities often have to travel into Gisborne City to visit GPs, or wait for a visiting locum. When the roads were damaged and destroyed (or being repaired for many months after a heavy rainfall or flooding event), this meant many rural communities were unable to access GPs when/as needed.
- → Some urban GP practices collaborated with community hubs (i.e., marae, schools) to set up spaces for local residents to access medical care.
- → Some GPs and nurses were flown into isolated and remote communities to provide medical care.
- → The health systems for rural and isolated coastal communities have long been underfunded, with many identifying significant gaps in the availability of GP care.
- → Key learnings: the importance of having a good emergency plan, being well prepared, strong liaisons with GDC, Civil Defence and other key agencies.
- → A desire for medical practices to be more involved in high-level communications and emergency response, so that they can better support their communities when an event occurs.

3.2.2 Illustrative Quotes

Staff health and wellbeing a priority for safe operations

So my main role was to ensure safety first of the staff and the team. Who was here? Who wasn't? Who had heard from people? And then of course our community. And I think we were all a bit caught out at the extent of that damage. ... But, a lot of our team, you know, some of my nurses, my senior nurses, community nurses, their houses were under water. You know, so they got smashed, so that was pretty hard, but we just kicked into overdrive. So our first thought isn't ourselves, it's our community... establishing a plan number one, for who did we have available to actually service the community? And number two how were we going to do that?
- *(wahine Māori, medical practice, city)*

...it was a balancing act for me and the owners to sort of give awhi to the team members that needed it, and there were a lot. Heaps live out at TK. Lots of staff were stranded so we weren't running at full capacity either... so we just had our doors open seven days. We didn't shut. We broke up into teams. So COVID taught us a great lesson and that's how to switch from business as usual to emergency basically. But, we did get caught out on many things which we've learned.
- *(wahine Māori, medical practice, city)*

We have 20,000 patients we take charge of. You had to get medication up the coast...The mahi that the community teams and the medical professionals in this town did, they worked day and night to do that. Like many others did as well... ..., we're open 'cause we need to be and 'cause whānau need us. And we worked in conjunction with the pharmacy 'cause no scripts, no paper. - *(wahine Māori, medical practice, city)*

We'll never close our seven days, you know? You name me another practice that's open seven days a week? A general practice around the country, it's few and far between now. Most shut Sundays. Most shut Christmas days. The owners and the management team here are dedicated to providing [week-long, year-round care]. And we're the only ones with open books. We're the only ones who see casuals, visitors, all the RSE workers. But, yeah we'd just like a bit of slack every now and then.
- *(wahine Māori, medical practice, city)*

Strong coordination between GPs to other agencies

This was the hui place, for the health, or clinic. So a representative from everyone would come here... because we had comms we Zoomed in every morning. We had a catch-up, how did it go the day before? What do you need? So we know what we're doing now. We plan ahead.
- *(wahine Māori, medical practice, city)*

Management working under extreme pressure: Leading with kindness

So my payroll was due on Wednesday... BDO had a Star Link and we had to send staff there with a laptop to try and send the pay. Even though people couldn't get stuff out, but bloody mortgages and that bounced. You know, it's ridiculous, that sort of thing. And I had to grab any petty cash or money we had spare and hand it out to staff who couldn't buy anything from the shops. So it's very lucky staff who had cash on them shared it out and yeah so. - *(wahine Māori, medical practice, city)*

Seven days with no comms. And what we did in that previous week ‘cause we had to go back and load everything. So the administration after a week of not having that, then going from manual, we have to put it all into the computer. So we stayed, we kept our hours short so the clinicians could catch up. So we still only did eight til four for the Monday, Tuesday, Wednesday after the cyclone went, the worst week. And just communication internally. Meeting every day, huddle every day. So it’s back to daily huddles and checking in on everyone. Who needs what? And of course this went on for months because the staff that lost homes, were still displaced.
- *(wahine Māori, medical practice, city)*

Access to patient files and records

Comms, comms, we can deal with no power, no internet, but actually having no physical comms with anyone made me think, do we get satellite? But, then we’re like who are we actually ringing? ‘Cause you can only ring another person with a satellite phone. So we sort of kaiboshed that. Yeah not being able to communicate was very hard. - *(wahine Māori, medical practice, city)*

...we got the message out, ‘bring your packets’. ... Then you bring that in, give it to us, bang. And we just would go straight to the pharmacy and they’d get 14 days. The pharmacy would just give 14 days of everything.
- *(wahine Māori, medical practice, city)*

Paper based filing systems

The other thing was actually having, now we should practice this and we’re meant to print off manually. So if there’s a storm coming, even if it’s like that last one, it was bad, but it was ...So however we print off all the appointment books...We print off, we now have lists of our community, patients who we visit. ‘Cause I have community nurses, rest homes, we do all the rest homes. So actually knowing who they are and where they live. And having a vehicle that can get access to them. So we’ve bought a little four wheel drive now. So we’ve got one vehicle. I mean most of us have four wheel drives anyway, but we have a community vehicle that can access those to get patients. But, yeah the comms was horrific. - *(wahine Māori, medical practice, city)*

GP medical centres largely unavailable with long wait times

The GPs just weren't functioning, they just weren't there. There were just no GPs
- *(pākehā woman, pharmacist)*

... you say to someone you're gonna need to take that to your GP. Oh why would you bother, they never answer the phone? ... an overall theme of frustration and accessibility. Our GPs are under huge pressure. - *(pākehā woman, pharmacist)*

There was a lot of diverting, or they had to go to another medical centre. Because they didn't have GPs on site, there was also the satellite doctors as well, when that did happen. But think about it, for our whānau who go to Puhi Kaiti, most of them would be living over in Kaiti. And then making the trip over to A&E at a time where you may not have money, cash money. So getting petrol, you had to make the choice between going to get medication, or food. Yeah and that’s just what they had to do in that moment in time, was to figure out how do they still get the medical treatment that they need. Even the hours had changed, they had reduced the doctor’s hours because of having staff available. Because, you know these teams were out as well, because they had whānau, so that was reduced. I know that some of the pharmacies had half days, so it was just figuring out a plan that would work.
- *(wahine Māori, social worker)*

GPs (finally) went mobile

... it didn’t come fast enough. It should have come sooner. - *(tāne Māori, rural)*

[Elderly mother] needed access to medical care. So to be able to see a GP [at the marae] was really important. She got some sleeping pills, because sleep is paramount.
- *(wahine Māori, social sector leadership)*

...the medical centre out here [Te Karaka] was great. Because they set up something at the school and any medication you wanted, no problem. Because they all knew what they were on, so it was marvellous and it’s good to come back home to come here and see the one doctor.
- *(wahine Māori, Iwi Health 1)*

I do remember one of the days both the bridges were closed. ‘Cause I live on the Kaiti side of town, so that was a little bit scary knowing that you couldn’t access any medical care because nothing was on that side. The Kaiti one and De Latour Road were both closed. So there was no medical assistance on that side of the bridge. I remember thinking that was not a great thing.
- *(wahine Māori, city)*

Their whole valley were in the same boat ...their road got cut off so if any medical situation came up they will have been screwed because they couldn’t get out. They couldn’t get out to the clinic in Ruatoria. - *(wahine Māori, city)*

Medical staff and teams flown into remote areas

Tokomaru was in the worst state. So they'd put a doctor in there and keep them there so that they had a doctor and a nurse, and then flying them out as needed...Then the road between Ruatoria and Te Puia opened, and so there was a bit of flow there, but pretty much they had medical people staying on site up Te Araroa, that department, so that people's service was going there.
- *(Pākehā woman, east coast)*

Rural health care underinvested (see ‘Rural health’)

It’s one and a half days a week, our problem is we’ve only got one doctor to service the Coast. So everything else is done by locums, so they fly them in, fly them out. But that’s if they can get here, yeah, the doctors were located at Te Puia hospital...you know that’s a well-funded health service that was reliant on volunteers to get their staff there from work every day. It’s just not right.
- *(wahine Māori, first responder, East Coast)*

I mean having a doctor that comes from time to time, is good, but it’s not ideal. [We need] a permanent doctor here. - *(tāne Māori, east coast)*

Key learnings

[A key learning was] connecting with other providers and we were a bit slow in that to begin with. Lesson learnt, we’ll never be that slow again. And it’s just like having us involved in Civil Defence. ... Now we have a pretty established plan around the powers that be for health and wellbeing. Getting together straight away, a big part of the Civil Defence messages and yeah.
- *(wahine Māori, medical practice, city)*

We just did eight til four every day and at least the community knew we were here if they needed us.... And my community team were out in the region, out driving around checking on everyone... ... we used my community nursing team... who

have a relationship, know the whānau. My nurse practitioners did the rest homes... And no comms with them so that's where I was saying we realised, oh we do need a list, a current up to date list. ... that's another lesson we learnt as well. But, if we get that warning, [we need to know] who's current? Who's the most vulnerable in the community? ... 'Cause a lot of them I assume without power, that would be an issue for them as well. Yep if they've got any machines or oxygen or anything like that. So this team were out and about doing that...
- *(wahine Māori, medical practice, city)*

We were surprised at the amount of patients who came in. So, you know, we were, 'cause I don't think any of the other practices opened and we did. There was a little bit of a lack of communication in that respect. Number one comms, so you know, those are all the lessons we learned.
- *(wahine Māori, medical practice, city)*

I think having the proper vehicles to get around and that there's a check in place now so we worked with the PHO and Te Whatu Ora. So basically if something like that happens we all know we gather. Those who can get to here, get to here. Those who can't, don't. And then we will send out people to check and do it through the kumara vine, [which] works very well here.
- *(wahine Māori, medical practice, city)*

The emergency, we call it Code Black now, not Code Red, it's a Code Black. We have all the staff's addresses. We have that anyway, but it was all online. So we now have it in our business continuity plan. So what our emergency plan, so what that highlighted was a big overhaul of all of that. And we had to change it because cyclones or big storms here now actually do cause damage every single time, so... if a storm is coming 'cause we do get at least three days warning, having contingency plans for your generators. Make sure they're full. Make sure we've got diesel stored. So we've done all of that. Real little things that affected [our operations a lot]. 'Cause we had the generator, but of course if ran out, and then all of our immunisations, you know? All our fridges, all our medical supplies... we need fridges so, and we did have a generator, but she ran out of diesel. But, it wasn't enough to power up. So we now also have a satellite... Star Link... that effectively gives us comms, Facebook or something like that.
- *(wahine Māori, medical practice, city)*

We've learnt that we always have to look at the stocks and supplies you have in the building and make sure you're prepared for Code Black. So if Code Black happens, what do we need the most of? And make sure you're always [ready], because you do get a bit complacent. You get too busy, you're time poor and yeah.
- *(wahine Māori, medical practice, city)*

Calls for Greater Communication and Coordination

...the difference in the communication between the key stakeholders of this community was way more effective second time around (June 2023). 'Cause it was shit the first time... No, so we were all caught out. We were all as bad as each other. And I can remember standing down in the, and I went has anyone seen the PHO? This was like Wednesday or Thursday and we hadn't even heard or seen or been check on. But, we hadn't checked on them either. And they went no. And it was funny the next day they turned up, so they were out and about, but we kind of all forgot about each other ...We have to be part of that Civil Defence, [we just] have to, it's just a no-brainer... ... We bummed our way through really until about Wednesday, Thursday when everyone sort of connected and went shit! And I'm like, 'what are the other practices doing'?
- *(wahine Māori, medical practice, city)*

We need support with funding, infrastructure, staff, better lines of communication. Actually knowing what the hell's going on. And we don't want to say, if we were paid what patients are worth, you know, or what GP's and nurses are worth, we could do so much more for the community. And we could be, so they want us to work, you know, not in silo which I think we do do quite a bit in this town unfortunately. And you do it everywhere. Health is a bit like that. You get, 'cause you're head down, bum up. So they need to get that capitation formula right. They need to allow practices to say what it is our whānau have told us they need. And we know what they need 'cause they tell us via a complaints process, which we're very open about. ... We know, ground level up, they need to frickin' include us around these decision making tables. Not the same old palangi white pale and stale males they've got around those tables, sorry! But, it's true. I've sat in those meetings for years. Yeah they need to actually know what the bloody hell we do in general practice 'cause they actually don't know, no! They'll get some data off our registers and play with that a bit and threats of audits to make sure we're doing what we're saying we're doing. [But] they're missing the human element!
- *(wahine Māori, medical practice, city)*

"I mean having a doctor that comes from time to time, is good, but it's not ideal. We need a permanent doctor here.

(tāne Māori, east coast)

3.3 Prescriptions

3.3.1 Key Findings

- → With power and communications down for an extended period of time, and roading infrastructure severely compromised, prescriptions (repeat and new) became a major health issue during Cyclone Gabrielle.
- → The GP Liaison and pharmacies played a key role in refilling prescriptions, and were highly creative in how they got prescriptions to patients (i.e., four-wheel drive; helicopters).
- → Funding rules and regulations regarding prescriptions added additional challenges for pharmacies, requiring lots of coordination, driving between GPs, pharmacies and patients, and then spent many weeks after the event following up incomplete paperwork.
- → For some, additional costs of emergency prescriptions were difficult to cover, particularly if they didn't have access to cash.
- → Getting prescriptions to patients in remote and isolated communities often required a coordinated effort between GPs, pharmacies, and Civil Defence.
- → Some patients were trapped for up to a week without access to prescriptions.
- → Pharmacies and clinics experienced some safety concerns when communities panicked about not being able to access prescriptions.

3.3.2 Illustrative Quotes

Prescriptions challenges: Communications, roading and infrastructure

We were getting a lot of infections, but yeah comms here, obviously couldn't, they had blocked the road into town. So as soon as that opened up I was running and picking our meds up and just delivering them to the school [Te Karaka] and to our Whātatūtū whānau as well. And then the local cop would meet us at the bridge, so he'd take the Matawai medications up there to them. So yeah I think it was just trying to find ways to make it easier for everyone. - *(wahine Māori, rural clinic)*

Medically it was a really tough time. I'm lucky that I had just refilled my scripts before the cyclone, not on purpose, just by chance, which I was very thankful for. Because once all the internet and everything went down, they couldn't look up our files anymore. So it was really hard to get scripts at the pharmacy, because they couldn't look you up. Doctors appointments, they couldn't look you up. You also couldn't ring them to ask in advance, so you would have to go, wait, give your information. They would have to write it down. You would have to know what your prescription was called, or taken, you know scripts and all of that so they could see what they were meant to be giving you. Because they had access to none of that, and neither did we, 'cause like for people like me who are chronically ill, we tend to have it all on ManageMyHealth, but all the information's online, so you can just be like quick, here it is, sweet, thank you. So that was real difficult.
- *(wahine Māori, chronic illness, city)*

You know a lot of our patients are on blister packs, or like meds that they need to take daily. So whether they got wiped out in the flood or anything, I think that was our main priority, was just making sure everyone had those.
- *(wahine Māori, rural clinic)*

I was ringing people and they're like 'oh it's the yellow one', 'it;s the pink pill', the pink pill?
- *(wahine Māori, Iwi Health 1)*

[Elderly parents in law ran out of their heart medication while trapped in a remote area]... they were using each other's. You know, what do you do in that instance? You've got no power, no internet, no nothing. - *(tāne Māori, mahi taiao, east coast)*

Funding rules and regulations

...patients who were on regular morphine, they'd come in, there's no prescription here for them in the system. So we can't legally do anything about that. So we got in our car, and we drove around and we tracked down GPs, and we got them to write prescriptions in front of us on a piece of paper. But then you spend six months chasing it up because in actual fact strictly speaking that's not a legal piece of paper. Because it's not on the right triplicate form, it hasn't got a barcode, all those legal things. So you do it in good faith, which was sort of, you know probably pushing the rules there a little bit, face to face with a GP. - *(woman, pharmacist)*

But we have heard of people who struggled and are still struggling to get their medication, you know. People are still struggling to pay the script fee.... You gotta pay $20. So we've put money aside that if people are struggling to pay for their script to get their thing then we would pay for that, 'cause we believe that people need to get their medication. We've got some funding, we've set aside some of our money so that we could be able to help people get their access to their medication.
- *(wahine Māori, not-for-profit org leader)*

Coordination efforts to deliver into remote areas

On our rounds going around, have you got anything that needs to go to TK today? Have you got anything that needs to go up the coast today? So we were, and then at our meetings at the hospital, we would find out that someone who was driving out to TK, who then would physically pick up those prescriptions and take them out there. Do a run on behalf of everyone else. And then Civil Defence were helicoptering out the coast. So we would do a round every day and then get in touch with someone who would then take the stuff to the Civil Defence and put it on the helicopter. And that was a bit of a moving target, because the people who were available to do that seemed to change quite a lot. And that phone number, there was a bit of confusion there around who you rang to find out what the times were. Who was picking up the stuff today, or who you contacted if you had something today, that seemed to shift quite a lot. ...that was a little bit messy probably. And that might have been a little bit, I think because there was this operational sort of thing going on with health up in the hospital. And then there was Civil Defence happening at the council building. And those two things needed to come together to get the prescriptions and stuff up the coast. And there was just, I guess, a lot going on, communication was poor, it was hard to get hold of people, so it had got quite messy. - *(woman, pharmacist)*

Community push-back

...in emergency, you know, or a pharmacist can dispense without a prescription if they know someone's regular script, without a current. So there's things like that, so whānau were very heightened, they had an expectation of the clinic staff. Clinic staff reported that community wanted to commandeer clinics and Hauora equipment, or for kaimahi to do what they thought was a priority. So [staff] were really conflicted, because, you know I still have this role to do. And whilst I'm not clear what the whole overland is, and the alternate plan, I still am here in this role, I still have to run this place, and be this person... - *(wahine Māori, Iwi Health 2)*

Key learnings: Message to patients to Keep a Copy of Prescriptions

...we got the message out, 'bring your packets'. So that's another thing for whānau to remember. Either write down what you're on or keep a box of each of them –.... Or a bottle. Then you bring that in, give it to us, bang. And we just would go straight to the pharmacy and they'd get 14 days. The pharmacy would just give 14 days of everything. - *(wahine Māori, medical practice, city)*

...for our whānau who have got multiple medications, a [key message going forward is] you can get a printout from the pharmacy, so simple to have, you know, just put it in your wallet, put it in your purse, put it in your phone. You could take a picture, or you can have a hard copy, something nice and easy that you can have tucked away. And then every time you get a change in your medication, get a new printout to keep. - *(wahine Māori, Iwi Health 1)*

"Elderly parents in-law ran out of their heart medication while trapped in a remote area... they were using each other's. You know, what do you do in that instance? You've got no power, no internet, no nothing.

(tāne Māori, mahi taiao, east coast)

3.4 Pharmacies

3.4.1 Key Findings

- → Pharmacies play a critical role in community health systems, especially during disaster (6 pharmacies in Gisborne city, also providing to rural and remote communities).
- → Staff came to work if they could, but management also acknowledged the importance of staff mental health and wellbeing during and long after the SOE.
- → Communications between GPs, hospital, MoH etc very challenging, often impossible, when power down and telecommunications out.
- → Some pharmacies had access to patient information that was otherwise not available if stored (by GPs or Hospital) in the Cloud.
- → Cash: Prioritising customer/community needs over profit, often at pharmacies expense.
- → Stock was an issue, particularly for the drug and alcohol recovery programmes which required different processes of coordination between pharmacies and heightened security considerations.
- → With an increase in civil disobedience and lack of access to recreational drugs, security of staff was a concern at times, requiring revised processes to ensure staff safety.
- → Rules, regulations and legalities of prescriptions caused logistical challenges; changes to policies were made in time but not well communicated (e.g., rule change announced via email when all tele-communication channels were down).
- → Pharmacies spent weeks-months chasing up the necessary paperwork for prescriptions, usually with no compensation for additional staff time involved in this work.
- → Important role of GP liaison communicating between GPs and pharmacies.

Recommendation

- **Strong co-ordinated responses are required between pharmacies to support communities (urban and rural), and between pharmacies, health providers and other key agencies (i.e. Civil Defence).**
- **Participants identified the need for a trust-based model during the SOE, recognising that pharmacies are doing their best to respond to the health needs of their communities and operate within the rules, but a window of flexibility would be very helpful.**

3.4.2 Illustrative Quotes

Pharmacies: A Critical Role in Community Emergency Health Response

... some of the earliest customers were people who were coming in because they needed stuff. Because they couldn't get back into their home, so then it started to dawn on you, the seriousness of what was happening. And so these people were coming in with no money, no access to money and having just had to walk out of their homes with nothing. And so we worked immediately trying to facilitate ways where people could access stuff, even though they had no access to money. That was probably our first biggest problem. - *(woman, pharmacist, city)*

I think it has increased the awareness about the value of pharmacy in the community, and the health system. I think it happened with COVID, and I think it's happened with the cyclone. So consequently they're letting us do more... There's a recognition that we have perhaps been an under-utilised resourced. Because suddenly they realise that actually we are the door that's open all the time. So I definitely think there's been an awareness that pharmacy can and does provide that first response. And takes the pressure off other systems if it's allowed.
- *(woman, pharmacist, city)*

Staffing Issues: The Immediate and Longer Term Effects

If they were on duty and they could get here, they tried to get here. And then people who were aware of what was going on and felt that they might be needed, tended to show up. It was pretty random because no one could communicate. The communication thing was really bizarre... we've never had an entire communication system go down where actually you just actually have no way of contacting anybody. So it just unfolded and yeah, and once again we just did what we needed to do and the staff were amazing.
- *(woman, pharmacist, city)*

...you're dealing with your customers and what's in front of you. And then you try and look after your staff, and then your staff are trying to look after their families. And it's, yeah it was quite big, but I think everyone, initially, was amazing. Initially everyone just kind of gets on with it. And then you kind of, yeah, you've just gotta take it day by day.
- *(woman, pharmacist, city)*

Cash: Doing the best for patient and customer

We just gave people credit, we just didn't charge for stuff. We had to keep track of names and phone numbers, 'cause we couldn't access our computers or anything. Initially it was definitely down to each pharmacy to just make sure people got what they needed regardless of whether there was money involved or not. And I think those pharmacies did that, and I think we always do and I don't think that we get a lot of acknowledgement for the financial issues that come with that. ... We always do that and we try to keep track of it but it's a financial risk that always takes a little time before there's any real acknowledgement of that. And I would like to think that that kind of gets acknowledged a bit earlier if it ever happened again. - *(woman, pharmacist, city)*

You can give out three days emergency supply, but there is no funding for that, so that's a cost to the patient. So that was where that financial thing came in, 'cause clearly people didn't have any money. - *(woman, pharmacist, city)*

Staff security and safety

... there was a lack of access to recreational drugs because of lack of money. And we wondered if we perhaps might have become a bit of a target, we didn't actually, but that did blast through our minds, yeah. You sort of think oh well no one's got any cash to buy vegetables, but you don't think ah, no one's got any cash to buy their drugs, but we didn't get targeted. But we are careful where we send delivery stuff and we also might pick and choose staff depending on their experience in dealing with those sorts of situations. Or you might send two people if you feel that you need to.
- *(woman, pharmacist, city)*

I think probably our regular alcohol and drug programme patients didn't really miss out too much as long as they could physically get to us. I'm not aware of anybody that couldn't get to us, but someone else might have had problems in that area. I know that probably, there were probably issues in Tolaga Bay with a couple of patients up there. The problem probably was for those who are not on the programme and I think that probably created some potential security risks around town.
- *(woman, pharmacist, city)*

The Need for Informed and Timely Advice

One of the first meetings I went to that came up with the DHB. They were, I think one of the other pharmacists brought it up just, you know how, prescription funding and stuff like that. And there was a lot of, we felt, political speak and dodging the kind of issue. I guess it was difficult for them, they couldn't make commitments on behalf of other people. - *(woman, pharmacist)*

...portfolio managers ... didn't really understand the technicalities of what pharmacy was trying to deal with in terms of prescription rules. And funding rules, and what we can and can't do, and there were a couple of sort of precise questions where actually the person who could have answered it just wouldn't, and walked out the door. I thought there was a kind of arrogance there that kind of, what they were doing was too important to, you know I got a little bit of that feeling. ...I don't think they made themselves quite as available as they could have done, whereas everyone else was amazing in terms of accessibility.
- *(woman, pharmacist)*

When they central [MoH] started to try and make arrangements to allow pharmacy to do things that we're not normally allowed to do. They sent that out by e-mail, we weren't getting any e-mails. ....the information was starting to become a little bit second and third hand. - *(woman, pharmacist)*

...they changed the rules so that we could do more. They actually allowed us to do new prescriptions for, I think initially it was a week. And then they rolled it over for a bit longer, and a bit longer, so that came, but initially we were just having to be quite innovative. And probably struggling to operate, strictly speaking, within the rules, yeah. We were doing our best to obviously make sure we were clinically sound and covering our bases.
- *(woman, pharmacist)*

...the biggest change for us was kind of the change around the legalities of what we were allowed to do and how that unfolded. And that was always out of our hands, and we hope that the Ministry has learnt some lessons about that. So that that maybe happens a bit faster, or a bit more smoothly next time... - *(woman, pharmacist)*

Health Communications and the Importance of the GP Liaison

....all of the health information for all of the GPs, and I believe are the hospital, are all in the Cloud. So it was absolutely one hundred percent not accessible, so the only people that had anything that was fitting on a hard drive that we could look at, was in pharmacy. - *(woman, pharmacist)*

There was a GP liaison, she was amazing, it was a really important role for us. Because if we had issues to get the GPs on board with the problems we were having. And to look after their customer, we could go to her, tell her what we needed, or what we were trying to do. And check that it was okay with them, and she would go around all the GPs and come back to us, so that was excellent.
- *(woman, pharmacist)*

The communication has, and always has been between different parts of health systems. I think that's the health system's biggest problem across the board, is the IT that doesn't talk to each other. And the difficulty it is getting messages from pharmacy, to GPs about things that are going wrong. Whether it be stock issues, or funding issues, or, there is no system that allows for easy communication, you know? ... So given those problems, some of those liaison people, they are actually quite critical, particularly in an emergency. The communications infrastructure all falls over [in an event like this] - *(woman, pharmacist)*

Stock and the need for a coordinated response

The biggest issue for [our drug and alcohol addiction recovery programme] was around stock. Stock was a huge problem. Getting stock in 'cause all the roads were closed. The hospital, there was a pharmacist up at the hospital who did an amazing job of coordinating that. Initially we were going around, us driving around picking up handwritten orders from everybody, or printed orders. Taking them up to the pharmacist coordinator at the hospital, she was working with the wholesalers. And they were flying stuff in, and then we would share stock amongst ourselves. With the drug and alcohol programme, it's our methadone mixtures, liquids of various strengths, pharmacy. And we just shared it around, so we would ring up and say have you got this and that? They would say yes, and so then you, and there's a protocol for doing that, we'd drive around and pick stuff up. And I was actually driving around the pharmacies picking up stuff and taking it to other pharmacies. So I'd go around and say what do you need today? And then I'd go around, because we'd have to drive around just to do everything. And then, you know, have you got this? Can you, I've got this list, and then we just all worked together. So the coordination amongst pharmacies was awesome, yeah!
- *(woman, pharmacist)*

You know, the pharmacy people were just amazing – And I was like, I'm so sorry, we were trying to get the comms going from here [Te Karaka] to town. We were using the RT and 'cause like we were like, are you there, are you there? Like, running across the roads, to write the list out and then we'd run across the road to [Tūranga Health] drop it off. And then figure out who's going back out this way [Te Karaka] and do one drop at a time like we were trying to be a little bit efficient around our timing. And I'll tell you what, we just worked together, you know? It was all like trust-based –Dispensing and then coming back to it later. That's pretty much what they did. - *(wahine Māori, Iwi Health 1)*

Literally driving around, calling in at each pharmacy finding out, telling them what information I had. Finding out what problems they were having and needed to know. And then I'd take that information back to the next meeting and then do it all again. And we were doing that twice a day.
- *(woman, pharmacist)*

Need for a trust-based model during State of Emergency

... On a slightly more trust based model, rather than us just deciding we're gonna be trusted. Someone actually saying 'well we trust you to do what you need to do for the next 48 hours and then we'll review it, and just document what you're doing'. - *(woman, pharmacist)*

Systems for Future Preparedness: Whose Responsibility?

The generators and Starlinks are all down to individuals. I don't think the medical centres even get generators funded. Previously, I've known of some medical centres refusing to spend the money on a generator, because they didn't feel it was their responsibility, and then central won't fund it. But the generators and communication issues are ad hoc and entirely dependent on what business owners are prepared to spend. And I don't really think that's good enough. - *(woman, pharmacist)*

Photo Credit. Josie McClutchie

3.5 Māori Health Providers

3.5.1 Key Findings

- → With community knowledge, trust and relationships, Māori health providers went ‘above and beyond’ to support their communities during and after the State of Emergency.
- → They were largely well prepared with good planning and provisions (i.e., cash, kai, water, batteries, fuel) ready for an extreme weather event, and thus were able to respond quickly.
- → Leaders took lessons learned during COVID-19 and engaged in community-led innovations to provide for the health and social needs in urban and rural communities (e.g., shuttles to the supermarket; distributing cash; access to Starlinks to communicate with concerned whānau).
- → Staff connections with, and knowledge of, rural communities was important in guiding the organisational response.
- → Māori health providers collaborated with some marae and social agencies, sharing essential infrastructure, to provide health needs to most vulnerable in community.
- → Māori health providers also engaged in creative approaches to support the wellbeing of affected communities (i.e., mobile ATM machines, Starlink availability, sending coffee and/or ice cream trucks to Te Karaka). Such initiatives were important to wellbeing as they demonstrated to communities that their needs were seen, valued and prioritised.
- → Many lessons were learned from Cyclone Gabrielle with highly proactive approaches being developed towards more sustainable and robust systems to support urban, rural and remote communities.
- → Māori health providers demonstrated highly responsive leadership based on their knowledge, relationships and connections across their communities. They had the skills and confidence to deliver to many of those communities often in collaboration with other key partners and agencies.
- → Various initiatives are required to support community wellbeing and connection in the long processes of recovery (i.e., community events).
- → As well as caring for their communities, Māori health providers tried to take care of the health and wellbeing of their staff during and after the event (including time in lieu; subsidised holidays; psycho-social support).
- → Regional and national networks of medical staff coming in later were highly valuable and necessary to give local staff time off; looking after your workforce is critical to building a strong and sustainable organisational culture.
- → A call for national agencies to be willing to listen and learn from Māori health providers, and to offer some leniency, understanding and trust as to their responsive approaches to providing for the complex needs of (often high deprivation) communities during a State of Emergency.
- → Māori health providers are proactive and investing in more sustainable and robust health systems (i.e., generators, communication systems, health campervans).

Recommendation

- **Much can be learned from Māori health providers in the innovative and responsive approaches utilised during extreme weather events, and their proactive approaches towards developing more a more robust and resilient health infrastructure that meets the complex health needs of the communities of Te Tairāwhiti.**

Photo courtesy of the Gisborne District Council

3.5.2 Illustrative Quotes

Responsive approaches guided by community knowledge, trust and relationships

....whatever presented, we just kicked in and responded. We sort of set up our kind of systems and processes just to kind of make sure things were pretty lean and efficient. We had our own, our kaimahi that were impacted so there was no expectation about them coming to work. And then leaned into whatever needs sort of came through the door or the comms and it was normally like face to face at that stage... We put BAU [business as usual] to the side and so staff knew that, yes, we would respond.
- *(wahine Māori, Iwi Health 1)*

I mean, this is our backyard and to not respond would be doing our whānau a big disservice big time. But we're around and we always have to front our whānau. So we weren't gonna let up.
- *(wahine Māori, Iwi Health 1)*

...relationships were key, eh? ...we'd lean on our existing relationships to give us some traction in different spaces... - *(wahine Māori, Iwi Health 1)*

... we were concerned with those with multi conditions, maybe some of our mamas and their pepe. And mental health, and whaikaha whānau. It was through the teams and their leads to go back and go back out and do the knocking on the doors. Also we just relied on the front door being opened so whānau could just walk in as and when need be. - *(wahine Māori, Iwi Health 1)*

Tūranga Health, they're the only health provider that I would say were very active right through the, everywhere. They were everywhere. They kicked into gear straight away and they knew where they had to go aye. - *(wahine Māori, school leader)*

Well prepared with good planning and provisions for SOE

... we knew we were gearing up, it was probably a week before I remember running around town and getting supplies, and a bit more funding. Oh it was just your basics, toilet paper, kai, making sure we had some, so I was running town getting some extra water containers just in case.
- *(wahine Māori, Iwi Health 1)*

Yeah, and I think too that we had the resources in place to be able to unlock real time. We're talking about genies, trailers, coffee carts, kai cookers, all that sort of resources that was my role, to get into the community. - *(wahine Māori, Iwi Health 1)*

..we'd done the prep before the cyclone hit. We'd done our own whānau, you know, kai and stuff, but also at mahi, you know, we knew it was coming. ... the boys had built up, had diesel, you know, the genies were prepped ready to go...and water and stuff like that came later. But all that sort of stuff we'd done beforehand to make sure that we were up and ready to go if it were needed.
- *(wahine Māori, Iwi Health 1)*

Staff networks and intel

And so we did have a flock of our staff fronting up straight after [the event], coming to give a hand in that space. And they were bringing their local intel with them. You know, like what's going on out in rural areas, yeah. Yeah, giving us local updates and stuff. I think it was important too just around the approach. There was lots going on, we had the council going, we had the hospital and the health services that were meeting. Council were meeting and for us, it was about finding the space where we can best punch and not try and be everywhere, but find our sweet spot and roll with that.
- *(wahine Māori, Iwi Health 1)*

....we pulled on a lot of our local knowledge and, you know, local knowledge is faces and people in those spaces? ...we ran a daily board every day and checked-in. then we just allocated specific areas for people to go door knocking and make sure that everybody was safe and if they needed anything.... you know, we kind of went specifically around who was doing what and so our kaimahi were allocated pieces of work as we came in.
- *(wahine Māori, Iwi Health 1)*

...I think overall communities are closer. I think everyone's capacity to help others, or knowledge of others, and what people might require is better than it has ever been. ... The power of your networks, they're more powerful than people planning in isolation. So that's really, really key, and myself and my neighbour, in the ops centre, we proved that time and time again. So... if you happen to know something, you know bring it to the table. Add that to the planning, it was pretty important to do so, yeah.
- *(wahine Māori, Iwi Health 2)*

Collaboration with other key agencies

So water was a biggie, fire station next door, and Frank, our maintenance guy being a fire chief, absolutely essential shared infrastructure at the time. So they had satellite phone, we had a satellite phone, and they had one, so we were able to call helicopters really easy. That wasn't a problem, so the air desk kinda lowered the threshold and opened up for us. - *(wahine Māori, Iwi Health 2)*

We were based in those places (marae, schools), so as whānau came in, if they were distressed, then we would sit with them. It was kai parcels, then we'd fill in that lovely two page form and they would get the kai. When they go, do we need to do anything else? No we just need the paperwork, once we've got that then, you know that's it, just take the kai with you. How many in your whānau? Yeah and making sure the kai was going out and making sure it was fresh, so that was our role. Yeah. You know times are already tough, it's already, everyone is unsettled as it is, why do we need to add to that?
- *(wahine Māori, Māori mental health programme)*

Creative community engagement approaches and wellbeing strategies

I asked one lady, 'how are you', and she stood up and walked out and bawled her eyes out. You know, it just hit her at that time because she'd been hard and strong and doing this in the community and then when someone checked in on her like I did, it just hit.Reweti from Tūranga Health Health sent an ice cream truck out there, so we ended up having an ice cream together me and her. - *(Pacific male, first responder)*

We were running a shuttle service from Elgin so whānau could come down and do their groceries. Like, pick up, like at PAK'nSAVE 'cause they had no transport. So, we were doing that shuttle run, dropping whānau off. ...those Starlinks were really, they were really grateful for the Starlinks ...
- *(wahine Māori, Iwi Health 1)*

In terms of recovery, [we're] hosting events, bringing people together is really key. 'Cause I think people just get busy and they turn inward. So giving people opportunity to go back outward again in way that's really inclusive. And sometimes just giving them free shit is really useful in saying oh yeah we know you're there. ... Just giving them something small can be a huge boost.
– *(wahine Māori, Iwi Health 2)*

We set up a service here and it's called HIPS. And they are just some more team from Tūranga Health who come out and they just sit in a little room. And any whānau wanting to just come and have a chat about anything. Whether it's to do with the cyclone, or just personal issues and stuff like that. Just someone to talk to without it being a counsellor, or one of them. Yeah so that's one of the services that we've brought out and made accessible for whānau. - *(wahine Māori, rural clinic)*

Our approach has always been around being nimble and real time in the way the resourcing that we have, the approaches that we had in our staffing. We've proved that through COVID and we've just mirrored the same in the cyclone, the approach around local faces and spaces, fronting, that's been key for us. Leaning into relationships, existing relationships, has helped us to be nimble and agile.
- *(wahine Māori, Iwi Health 1)*

...not wait around to be directed. we didn't wait for this emergency to be declared. We kicked in the next day, got set up the next day with what we had.
- *(wahine Māori, Iwi Health 1)*

Our rollout in COVID was around local faces ... at the forefront of this approach too is like local spaces and local voices ... We did that a number of ways through the cyclone.
- *(wahine Māori, Iwi Health 1)*

Responsive leadership and Lessons from COVID-19

Big ups to Ngāti Porou Houora who, at Te Poho-o-Rāwiri Marae bought a whole lot of services together. And mum did get to see a GP. Her sisters took her to go and see a GP and they all got sleeping pills, they all got prescriptions for sleeping pills because it'd been days.
- *(wahine Māori, social recovery leader)*

I think having the ability to lean into that sort of stuff that we could do that with our eyes shut pretty much. We were comfortable in that space knowing that we could activate, even though we didn't really know what was going on. I think we were confident enough to be able to be together as a Roopu and be responsive to whatever the needs might unfold. 'Cause at that point, we didn't really know what it was looking like.
- *(wahine Māori, Iwi Health 1)*

Staff welfare and wellbeing

Staff were still coming back so they still knew to come back to base. But it was making sure that they were in the best space to come to me so there was no expectations that they have to be there. ....When the heat is on, they'll come and they will help out in any way that they can. And so we did have a flock of our staff fronting up straight after, coming to give a hand in that space.
- *(wahine Māori, Iwi Health 1)*

...we cooked kai for the, you know, for kaimahi that were working. We just made sure they all, had a feed. ...we've got a couple of nurseries that have vegetables up there. So we were able to gather from there and not have to compete at the PAK'nSAVE. - *(wahine Māori, Iwi Health 1)*

I think the other one would be, you know, the manaaki? I think is a big one. Like, not just for our iwi, but also for our own kaimahi? You know, around looking after them I think has been really important about how you manaaki our kaimahi.
- *(wahine Māori, Iwi Health 1)*

...when we ask for clinicians to come from out of town, that was gold. ... we absolutely need those networks regionally and nationally to support us. Because people have just gotta have a break, or they've gotta protect their own property, or help their own whānau. And they need that time to clear their heads and it was great. Those clinicians were supportive, we had midwives, nurses, and I think a doc, so that is really essential, that regional network. That building resilience again, as in the infrastructure, that's key.
- *(wahine Māori, Iwi Health 2)*

You've gotta have backup for the backup, for the backup, that's with a big investment, I think we've got 40 thousand going into radios. We've got our own channel, because you cannot trust, you know phones go, as we know. So we've learnt lots of things about networks. - *(wahine Māori, Iwi Health 2)*

We have new diesel storage and, for our generator, we've got a new generator, so yeah we've upgraded heaps of stuff, yeah. So I guess in some ways the cyclone's been generous like that. You know stuff needed upgrading before that and in some ways it just brought that whole thing forward.
- *(wahine Māori, Iwi Health 2)*

Proactive investment in more sustainable health systems

So we've got a couple of campervans that are left over from COVID. So now we've got Starlink in them and they're set up totally off the grid, so [40.59]. .. And we can go to several different places, and even I could drive the campervan.
- *(wahine Māori, Iwi Health 2)*

...there's so much learning. I mean if we had a cyclone right now we've got Starlinks on every clinic. We have a generator at every clinic, we have radios that we've purchased. I'm just waiting for the install on full radio comms, you know 'cause you cannot rely on a mobile network, or internet, yeah. So there's that, and we're still scoping out some solar opportunities, some, yeah, yeah.So there's a few things we're doing to keep building resilience and the lessons learnt... There are lots of learnings. I think it's constantly in the back of your mind when you're planning now.
- *(wahine Māori, Iwi Health 2)*

3.6 Rural Health / Social Needs

3.6.1 Key Findings

- → Initially, in-person (and when possible, SAT) communications with those based in Gisborne City (Boardroom meetings at the hospital; GPs; pharmacies; with the GDC) were important in understanding and responding to the needs in rural communities.
- → When possible (based on roading infrastructure), those in rural areas came into Gisborne City to visit pharmacies, GPs or to get kai and other support, but many in remote and isolated communities had to wait for help to come (or not).
- → Transporting medical staff into rural and isolated communities often required creative approaches (i.e., ATV over farmlands when roads damaged; helicopters into remote areas; hiking through bush and/or over farmland; kayaking across a river).
- → Prescriptions were a major concern and required highly coordinated efforts to get medication to those in isolated and rural communities; further challenged for those who had evacuated and without evidence of medical histories / previous prescriptions.
- → Patients with high needs / specialised care: not all received the medical attention and support they needed, particularly when in remote locations.
- → Without power, and with generators running out of fuel, some rural and remote health practices lost stores of vaccines and other medication that takes time to rebuild.
- → Some rural health hubs were without communications for many days. Some had communication infrastructure that was critical in communication with health and emergency support in Gisborne City. For example, Waikohu Clinic (Te Karaka) had RTs already installed which allowed Tūranga Health (Māori health provider) to work around the comms outage, providing a vital link between Te Karaka and the main office in Gisborne City.
- → In some rural, remote and/or isolated communities, a sole nurse was managing multiple patients with compromised health issues and prescription needs in the middle of an evacuation.
- → Helicopters were critical in getting medical supplies into remote and isolated patients, but not everyone who needed it received attention or medical deliveries leading to feelings of inequity, anger and frustration.
- → Helicopters were critical in getting high needs patients to the hospital, though some patients were hesitant/resistant to leave their families (for an unknown period of time) who were often living in challenging circumstances.
- → Some remote, rural, and isolated communities felt very vulnerable and exposed, with community members with complex health needs (i.e., tetraplegic) not being serviced or supported.
- → For remote and isolated rural and coastal communities, extreme weather events expose existing inadequacies in the rural health system.
- → Rural health practices worked closely with other agencies (police, fire station, civil defence) to continue operations, and to identity and access at-risk and high needs patients.
- → Rural first responders and health providers expressed frustration in some of the rules and regulations that do not meet the needs of their communities, and health professionals in Gisborne City that don't trust them to make the safest and most logical decisions for transporting patients based on transport risks. Calls for greater respect for local knowledge and leadership.
- → Māori health providers (see 2.4) worked closely with their community connections and networks, and other agencies, to get medical supplies and support into isolated rural communities; some setting up health hubs in these communities (i.e., at the school).
- → With limited staff, those working in rural health centres worked long hours, with some sleeping on-site, ultimately taking a toll on their own mental health and wellbeing.
- → The small, rural hospital (Te Puia) continued operating without water, power and communications for up to 10 days, with staff sleeping overnight, using torches, with one referring to it as like 'wartime without the bombs'.
- → Some frustration with decisions being made by those in Gisborne City that did not demonstrate a good understanding of the impacts on some rural communities. For example, patients in Gisborne hospital being sent home early, but unable to get transported back to remote rural communities due to roading or to communities devastated by flooding.

Recommendation

- **The long-term underinvestment in rural health in Tairāwhiti exposed remote and rural communities (predominantly Māori communities) to heightened risk and much stress and anxiety, particularly among those with complex or high health needs. Significant investment is required to build a more robust and resilient rural health system that can meet the needs of those living in areas that increasingly become disconnected.**
- **Identified needs for future preparedness: Generators, SAT phones, water supplies, 4WD and ATVs, paper documentation of high-risk patients, and individual patient's medical needs.**

3.6.2 Illustrative Quotes

Hygiene, Power, Water and WiFi: The Logistics of Rural Care in an Extreme Weather Event

... we had no water supply and obviously no power, but we had the generator going, a very old generator. But it tended to overheat, so it needed cooldown periods. So you had to time when you ran it, and you need separate generators, 'cause they're not reticulated to the main generator for the water plant. So water was a really big thing.
– *(wahine Māori, Iwi Health 2)*

And not knowing if the power was gonna go out, as well. Yes. As well as the wi-fi connectivity. Connectivity. It was like a double, triple whammy. And the water. - *(wahine Māori, Iwi Health 1)*

Watching people manage water ... we had no water in the hospital. A... So we were almost 10 days, I think, without water. And while it's a little hospital, you run any institution without water. Well, it was an experience.
- *(Pākehā woman, nurse, east coast)*

We had the old fashioned baths – the hospital baths, which no one uses, was full of water, and they put a sheet over it to stop moths and things flying in it, and every two hours you'd take a bucket and you'd go round and do a toilet run and flush all the toilets. Two hours later, you'd come back. The girls worked so hard bucketing water into the washing machine to do the washing, because it's a hospital.
- *(pākehā woman, nurse, east coast)*

...in the night shift, they would close the generator down, because the generator that they had was struggling. It's one thing to be equipped for three days. It's another thing to be equipped for 10. Who could hold stock of fuel for that long? And it was old and they were resting it, so between the hours of something like 9 o'clock at night until one or something, there was just no power. All you had was head torches or whatever they had managed to scrabble together when they realised they were underdone, and the staff would sit in the corridors with a torch and listen for a noise and if the residents were moving, they'd take a torch and lead them to the toilet.
- *(Pākehā woman, nurse, east coast)*

we need a Civil Defence place, even the school had silt around it, didn't it? We went into the, the gym and we couldn't use the marae because it had all flooded and we had to sleep on gym mats. Yes, but it was okay, I mean we improvised, you know, so we need somewhere set up...
- *(wahine Māori, medical clinic, rural)*

Transport challenges for staff, patients and medical supplies

So they got to work, I must say, you've gotta really trust who your [ATV] pilot is... the track gets worse and worse. - *(wahine Māori, Iwi Health 2)*

I had no idea how I was going [to get there]. I come from a health perspective, so going to work on a side-by-side [ATV]! They said, go home, you've got 10 minutes, pack your bag. So I raced home. It was a hot summer day, I've got a cotton dress on, I jumped in there in jandals and I should have taken Red Bands and an oilskin. I didn't know that there was no power at the hospital, or I would have taken a torch and headlamp and stuff. I didn't have time...
- *(Pākehā woman, nurse, east coast)*

Forty percent of the Hauora workers live in Toko... we were doing shifts on taking them to work...over the hills...'cause, yeah they were coming out of Toko to go to Ūawa, they were coming out of Toko to go to Ruatoria...Because most of the healthcare workers live here.
- *(wahine Māori, CD volunteers, east coast)*

... doctors who would stay in our B&B because they could be ... however they flew into Gisborne and got up through the tracks or on a chopper, and then they'd stay at our place and walk around to the clinic. ...the practice nurse probably got hammered. She didn't get much reprieve.
- *(Pākehā woman, nurse, east coast)*

Yeah we daisy chained it [medication] through ATVs, we got an ATV to meet someone at a slip, walk it over the slip. ...'Cause mine wasn't high enough priority apparently to get on a bloody helicopter. - *(wahine Māori, Iwi Health 2)*

...the first choppers out [were] two men who were on dialysis. And part of me went, oh, I see that this was going to be long, lots of weeks. So that was sad for them to have to leave their family. But, health safety, it was there... And the guy in the Four Square who broke his leg while he was trying to load in some stuff, he got choppered out and then he was back again wearing his moon boot.
- *(Pākehā woman, nurse, east coast)*

Rural patients: Knowing their needs

I'll start with medicine. Our whānau up the coast needed medicine. Prescriptions. So that eventually got there but getting access from the helicopter to the home was a challenge. So the Police leant in and helped out. We got a side-by-side from Honda (four-wheeler with a roof on it), we shot that up there and that side-by-side got to places where our four-wheel-drives could never go. We used that side-by-side to get to places and spaces to get medicine in. So that was huge. Getting the basic necessities to whānau, for their health and wellbeing was important, so we did a fair bit of that. Obviously from Civil Defence it was raised about 'what are your priorities'? Well, we need to get medication to certain whānau. 'Where are they'? They're up here. 'How are we going to get them there'? We'll use this mechanism. 'How are we going to get them to them'? I don't know. We didn't know that until we got there, so we worked a workaround and they got the medication there.
- *(Pacific male, first responder)*

...we really need to hear a bit more about Te Puia, and we really need to hear about some of those inland communities. ....there's a kid with them on meds, but I think he's okay. The dad's on meds, on diabetes meds, he's only got three days left, so it would be good to get some up there. So we couldn't get an Army truck for love nor money, or anyone to do anything, it was terrible actually. So we just organised it ourselves, 'cause they were stuck there. - *(wahine Māori, Iwi Health 2)*

...[nurse] was up at Whātatūtū so we had whānau that were quite compromised around their health, around the terms of the power, dialysing patients and unwell whānau up that way. That she'd reached out to, as well, just to keep them dialysed and having to go and rescue people. And she was also part of the crew that found the guy... that lost his life up. So she was part of that, as well. Meds was quite key to that in this area. They got their meds, those who really needed them. Yeah, that was an absolute nightmare. Mainly because people just got up, left, they'd just gone, you know, didn't take any of their meds and stuff, not one of the things you think about really, you're not expecting to be out for so long either.
- *(wahine Māori, Iwi Health 1)*

Identifying and accessing high needs patients in remote areas: ‘They’d been missed out’

Their area had no help whatsoever and they’d been missed out. And they were absolutely desperate, absolutely desperate. You had very ill elderly. You had young babies. You know, you’ve got to think about all of dysentery and the bugs and there’s no water. - *(Pākehā woman, not-for-profit org leader)*

My wife here is a support worker for a client who is a tetraplegic in another region 65 ks away, who is totally dependent on the service provider to survive. She was not able to be able get access, so that created another emergency situation in that region. ... So there was the access out and there was the communication broken down, and the client was left who was critical as a tetraplegic. ... Those in the valley, there was ... four pakeke (elderly) who rely on emergency service if something happens. ... we had that vulnerability of some of our pakeke and people who were dependent on medication in this area of the 61 in the three hapū that I'm referring to. So that was a worry, that was a worry for us, we also had one young girl who dislocated her knee at the time. And so fortunately when she dislocated, it was at the time when they were just starting to break open the road. So the contractors were able to get her out to the hospital to have her knee dealt to. But no one was able to get to us, or actually came out to us... The medical service here, you know it’s not a huge population, so they should know these people. And should know these people, on their database of what their requirements are. They should be making attempts to ensure that these people are well managed. And that doesn't happen, and that hasn’t happened over the last two years. So why is it us having to pick up the pieces and go and make sure that they're connected to the services they may require in emergencies like this?
- *(kaumātua, east coast)*

(Mis)Communications, Coordination and Infrastructure Challenges

The medication one, because this is the Ministry of Health... what was happening there? How was that being coordinated when people needed their medication, their drugs for whatever types of ...?... She missed out for a little while and the council said they'd sorted it and it hadn't been sorted... She'd been identified early. From memory, someone had landed, asked what they wanted – we need this, this is the priority, and it was a medication that didn't show up. It was like 10 days and she'd missed out on it for about five [days]. That was a bit of a cluster!
- *(Pākehā male, east coast)*

There’s so much disruption in the system during the crisis, like what I was saying around that ops and management actually don’t really know or have an appreciation or are not informed about what’s actually happening on the ground? For some of the providers or some organisations?
- *(wahine Māori, Iwi Health 1)*

...briefings were key for us 'cause it’s there that we spoke about who’s the whānau in need, actually what roads are locked or closed down that we can’t go down. So that was updated by through the council. Just so we had unlocked the right resourcing around our trucks as well, especially coming out this way. [Te Karaka] like four wheel drives. And even now at Manutuke, the road’s closed so were relying on them to come back in and say, you know, I’m going down this way or there’s whānau up there that need support. So all that comms was coming across all the teams, coming across from the council as much as we could get from them. We’d go up by two as well, so no-one would go alone – Particularly out the rural areas. So we had kaiāwhina nurses travelling in and out each morning. - *(wahine Māori, Iwi Health 1)*

once we’d gone and got the comms coming through, this [Waikohu Clinic] was pretty well much up and running. '...and what we did have was access to transistors. We had our RT. Certain people had them and we could still talk to one another. we’ve got an RT base here and that talks to our main office and some of the vehicles have got RTs in them. So we were able to do the comms that way. - *(wahine Māori, Iwi Health 1)*

There were several deficiencies, but if you're looking at the worst ones – communication, the ability to communicate with the outside world was awful...even the hospital, Te Puia Hospital didn't have ... no way of communicating. That, to me, is just ridiculous.
- *(Pākehā woman, nurse, east coast)*

There were people that hadn't heard from anyone for 10 days, and choppers have been going over, and we knew about them, and we asked the council and the council said, yeah, we got this. No, they hadn't. They hadn't even contacted them. People that needed baby formula and nappies and sanitary pads and medication, like serious stuff. Not just we need some bread and milk. They're pretty self-sufficient up there, those people, and they're pretty resilient, but at some stage they needed some help. We knew about them and we got told by the council that help was coming, and it didn't, and it took a long time. That lack of coordination from people that are getting paid in those roles, that'll cost someone their life if that happens again, potentially... I've got 40 homes inland that were quite remote. They're all GPS'd, I've got the coordinates, and the council said, ‘yeah, the helicopter has touched down to every one of them’... I drove for 12 hours and I visited every single household. The common denominator was, ‘oh, did you get a visit?’ ‘Oh, the helicopter landed on the Tuesday, ‘what do you want?’ ‘We want this and that.’ But then they never saw them again. And yet the council told me that they had repeatedly gone back and serviced these people. ... I was horrified at what I found, and you only find that out when you actually talk to people and say, what did you get? We got nothing. We saw nobody...
- *(Pākehā male, first responder, east coast)*

There was definitely that one lady who needed her medication. I don't even know what it was for, she was a sick lady. So the communication comes through Civil Defence... My understanding was that you guys had indirectly contacted her through the neighbour ... Yes, and then contact the council and said, hey, is this lady on your radar? Yeah, yeah, yeah. She needs us. Yep, yep, we've got this. And then we got a message back a few days later, hey, how far away is this stuff? Ask the council, we don't know anything about it. That was my understanding of how – she got it eventually but it was well overdue. ...If you had a medical practice here or a GP, you wouldn't have to be going through the council...it was basically the lack of communication or coordination as to how that was going to happen when the council was saying they were going to do something and it didn't happen. ... It would have made a difference if we had our way and said, hey, give us a chopper, we’re going to sort our people out. Definitely, because we know it would have happened. We knew who was where, who had babies, who was elderly, who actually you can just leave alone. Some of those fellas will live up there by themselves for a year quite happily self-sufficient. And others, they need that contact every couple of days. But there were a couple of times where I had to pick up medication that was delivered to the general store here, and they couldn't fly out. I had to pick it up and take it down to Gisborne, to the airport to get it on a helicopter. Again, it's communication, you know. Yeah, it didn't work well. - *(Pākehā male, first responder, east coast)*

High Needs, Rural and Remote: Falling through the Gaps in the Health System

Well, it’s more reinforcement of what we’ve already seen and know. That we can’t rely on those services when it’s set up into emergencies. That if we are not taking some sort of shape and in charge of ourselves, then we’re gonna be more vulnerable out here. So now that we’re connected, ...

That gives us some hope going forward, it's just about tidying it up and making sure that the services that are there and funded, keep connecting with us. ...the main one that is really at the top of my list, is young RT, who is a tetraplegic, because there's still no Plan B for him. In an event when his two workers are isolated, he has no care, he's vulnerable. 'Cause he's like a switch, he can die if one of his malfunctions occur because he's not been serviced. So there's no Plan B, ... A Plan B [should have] been put in place by the health services, or the emergency services, but there hasn't. So the health services should be looking at that, the emergency service should be looking at that. And they should be talking to each other, that hey, through the coast here are the vulnerable people in a state of emergency. And this is what we need to do, not to come on a Zoom and me to raise it as a concern. I shouldn't be raising the concern, 'cause I'm raising it 'cause there's no solution in place. Waste of time raising it 'cause everybody says oh yeah we know about RT, we know he's out there. Then what are you gonna do about it? 'Cause until you knock on the door, his worker is sitting here isolated. So that's the priority that, I suppose that's alive at the moment and needs attention. You don't need to wait for a storm. - *(kaumātua, east coast)*

They're two dialysis people. They'd come to town three times a week, but he missed out on the national travel monies. So just hardship and the fact that they live by the river. That must be really frightening because they live by the river. And they've got tank water. Everything's expensive. And Tolaga, I think it's 90-something ks return to get the national travel allowance and they just miss out. But they go three times and they're just in such financial debt.
- *(wahine Māori, social service sector leader)*

There's no doctor. There's a doctor that comes in, I think it's once a week. But that's real ... you can't set your watch to that. And I think there's just one resident doctor that's based in Te Puia Hospital. Don't quote me on this but the last I heard, it's getting worse and worse, and then the doctor doesn't come a week so you've got two weeks without a doctor. So a lot of people are having to rely on getting to town, which is a financial burden. It's hard enough to get into a doctor in town... I went to go the other day for something, and they were like, three weeks, and I was like, don't worry about it. It wasn't a major but it was just like, normally I would've just gone to the doctor for that. But yeah. Well, you can't. If you've got your own GP, that's fine. But if not, where do you go? You go to A&E and then you're lining up. We're encouraged not to go to A&E, but where else do you go?... There's a definite need for more health care providers in the area. It's the same with mental health, we've found. They're under a lot of stress and they're busy as in town. I used to sort of think, well, this is your job, but we often take them to town now, just because they've [mental health staff] got to come in twos to come up here, and then they've already got their work cut out in town, then we've often got to be with them to transport someone anyway. And it's worse the further up you go. - *(Pākehā male, first responder, east coast)*

Rural clinics and first responders

So we worked with the NDT team and the renal crew at the hospital just, I said, look, you just need to know who they are, like where are they. 'Cause they were like can you go and check these people, blah, blah, blah. And I was like, okay. So it was working, you know, we had to work collegially with each other. Yeah, our iwi was the same. They found whānau that were, you know, caught in the floods, didn't wanna say anything. But were still, you know –Hugely impacted. Physically as well as mentally, didn't wanna leave their homes, stay put. So we were working with them and they'd come into our hui, as well. And so we'd work collegially across us to kind of get a bit of an update about what was happening and working together and being responsive to whatever their needs might be. It might've been kai or sorting out the [36.12] or the water. Yeah. Meds. - *(wahine Māori, Iwi Health 1)*

Yeah, these ones from the outside want to help, but you can't beat local knowledge and we've got some great leaders here that, yeah, they need to be respected by the ones in town.
- *(Male Pākehā first responder, east coast)*

We've had a couple of real bad ones where we had a bad asthma attack one night and we weren't allowed to actually put him in a vehicle and take him to town. They dispatched an ambulance from Ruatoria, hour and a half away. Ruatoria ambulance got within about 20 minutes, got cut off by floodwaters. We were waiting for probably two hours and in the end they said, the heck, just put them in the police vehicle and take them to town. These are the type of things. It's again lack of communication. I don't know why they even did it. Why not let us take him down or send an ambo up from town? So the road was open? The road was open to Gisborne. We could have taken him down, but they dispatched an ambulance from Ruatoria, which meant taking one unit away from up the coast, bringing them down here, caught in floodwaters and we're no further ahead. There were another couple of cases there that we should be allowed to do things. These boys know what they're doing. They're not going to race down and put everybody else's lives in danger. There's no St Johns here? No. We've got the first responders through the fire service but that system's gone really, I want to say retarded now, because you've got to ring and ask for the fire service if you want them to come out. If you ask for an ambulance, which we've got advanced paramedic here with Watty, and all the gear, they won't turn them out unless you ask for fire. But who's going to ring up when someone's having a heart attack and ask for the fire? No one. Well, we learnt because we did get that call. I went to a heart attack out on Anaura Bay. Yeah, but if someone's having a heart attack, they're going to ring 111 and you're going to say ambulance. And we've got a capable first response vehicle here and advanced first responders that won't get notified. And we only just heard about that because a siren didn't go off, so I rang Andrew and said, what the hell's going on? He said, no, if you get a medical, you have to ask for fire. Well, we didn't know... the two things that stand out for me in the community is we've got an issue with housing and we need a resident doctor. - *(Pākehā male, first responder, east coast)*

Misalignment between Urban Decisions and Rural Realities

...they were looking to empty beds, empty the hospital like, yeah, yeah. So like kick people out 'cause they didn't have to be there to kind of hold them. so they were wanting to send people home to Te Karaka. And I was like, yeah, nah, that's not gonna happen. You need to find somewhere else. Yeah. They were trying to send some people home. Because you know, that hui level, and I was like they actually don't understand, they didn't have any understanding about what was actually happening on the ground out here [Te Karaka]. ... they were leaning into us to be able to connect with the whānau out in the communities?
- *(wahine Māori, Iwi Health 1)*

The further you move away from a main centre, I think the harder those supports are to get. What I'm finding in my role as a police officer is we're picking up now a lot of extra work from government agencies that don't come up and help. Oranga Tamariki, Kainga Ora, MSD. Who else? They'll come up and then they just don't want to know about it. It's just too hard, it's too far, unless it's really serious. But it's getting worse and worse. And yeah, I know they're stretched, and I know they've got their own problems in town, but people pay rates up here and should be eligible for the same services as they are, but it just doesn't seem to happen... This place is unique and it's got its own problems, and we don't need people coming in assuming what the community needs. People need to listen to what the community want and actually customise what's going on to help them. It's probably different down the road in Toko, and it's probably different out the other side in TK, but I know for Tolaga, yeah, there are support systems in place and, yeah, you can't keep everyone happy, and if you go

to the right place you can find that help. But there are a lot of people going through the cracks that are getting left behind. - *(Pākehā male, first responder, east coast)*

Staff working under extreme conditions

Whānau were turning up at the clinics up and down the coast, and whether they had run out of medication or not. They were demanding their regular medication, 'cause they were so stressed. And they didn't know where the end was, so I'm gonna run out in three days, what am I gonna do, what am I gonna do? Can I have this, can I have this, so they were asking us to dispense meds where we cannot. - *(wahine Māori, Iwi Health 2)*

Matakawa really struggled, they had a woman who was imminent to deliver a baby, not in active labour, but was absolutely refusing to fly. And so the only clinical person in town was a nurse, so she was saying you realise if you deliver here, that it's just me? You know this is what you should think about, anyway, and within three days the nurse convinced her it's actually okay, you know. And you can fly, you know it'll be okay and she'd agreed, and I think she did get flown out. - *(wahine Māori, Iwi Health 2)*

I think that fundamental health was well handled. I think people were safe and they had stuff. Mentally what happened to people, I think is another question. How do you build resilience into people? The people who probably complained most or did worst were people who had stinking thinking [bad attitudes] - *(Pākehā woman, nurse, east coast)*

We were staying at hospital in the facility up there and there was six beds, two doubles, two singles and a mattress on the floor...at times you'd go to bed at night and you'd put your alarm on for 7.30 in the morning and you'd get up and get out of bed so that the person coming off night shift could get in it. That's the kind of rotation – people said, you didn't. We did, because the important thing was that we all slept. - *(Pākehā woman, nurse, east coast)*

[The nurse] is still stressed, she is already a bit stressed about everything. Losing huge amounts of vaccine stock, which is worth thousands of dollars when you don't have generator backup. Because in the cold chain supply you can only, so then, you know just working through that, I mean how do you reorder when the systems and things are a bit broken down. So just having to delay that process, it's no longer your priority, you have to focus on other things, so having to reset. - *(wahine Māori, Iwi Health 2)*

Future preparedness

So we've brought a new ATV, yeah, yeah, yeah. I think we might have had an old quad bike, but we've got actually our own ATV. And we have used it to go pick up people in Waipiro Bay, yeah, yeah, yeah. We have a staff member who drives her own ATV to work...she lives down Waipiro Bay. It's made us look at our whole accommodation.... And actually Starlinks probably, and some alternate power needs within those spaces as well. Grab and go bags in each of those properties as well, yeah. We have a fleet management meeting this afternoon, we will never have Suzuki Swifts in our fleet ever again... ...they're just no good for the Coast. They'll just get trashed on the Coast. ...they certainly weren't any good post cyclone. - *(wahine Māori, Iwi Health 2)*

So it costs us a huge amount more to have all wheel drives, four wheel drives, SUVs, and stuff. So that's not particularly eco-friendly, but it is what it is if we wanna manage business continuity. We've rewritten all our business continuity plans with some of the learning that we have. - *(wahine Māori, Iwi Health 2)*

...the concern is about the welfare and the health needs of the people. So we need communication, we need radios, and the radios are capable of being able to communicate with those in the emergency services on the other side. So if we need a helicopter to fly someone out, or fly medicine in, we're able to communicate with the Civil Defence. 'Cause when it is under that Civil Defence emergency, they have access to those tools. - *(kaumātua, east coast)*

"So they got to work, I must say, you've gotta really trust who your [ATV] pilot is... the track gets worse and worse.

(wahine Māori, Iwi Health 2)

3.7 Gisborne Hospital

3.7.1 Key Findings

- → Hosted meetings twice a day with health professionals, Civil Defence and other key personnel in the Boardroom; important for communications and coordinating efforts, but not always as efficient and effective as some would have liked.
- → Communications with rural, remote and isolated communities took time to establish.
- → Nurses worked tirelessly to care for patients, often covering different roles, some staying overnight to cover staff shortages, or sleeping at work if they couldn't get to-from home due to roading.
- → Communities in most impacted areas did not feel well support by Tairāwhiti District Health. Their perception was that Tairāwhiti District Health was more focused on the Gisborne Hospital rather than in-community medical and health supports.
- → Patient and community perspectives were mixed, with some receiving excellent care during the SOE, and others expressing concern that patients were dismissed early and/or without consideration of the challenges of travelling home, or their living situations when finally arriving home.
- → Some observed a disconnect between hospital management and what was happening in some of the most affected communities.
- → Widespread observations that the Gisborne District Hospital is under-resourced and may be unable to meet the needs of the community before, during and after an emergency.

3.7.2 Illustrative Quotes

Hospital Boardroom meetings important for communications and coordinating efforts

They started having twice daily meetings up at the hospital, ... I went up there to the first meeting thinking we were going to get information. We actually didn't, what they were doing was information gathering, I was a bit taken aback by that. 'Cause clearly they still had no idea who was able to access what. I actually think they did quite a good job, it worked quite well. So they had a, kind of an operations room, they had everyone gathered there, representations from everywhere. And we just all spoke telling everyone what was going on. And so there were people in that room that you could access the information, so that worked particularly well with getting stuff up the coast. Because we had some of our Māori health providers, and the community workers up there. And so you could coordinate with them and find out who was doing what, and how to get stuff out. - *(woman, pharmacist)*

Immediately Civil Defence and all those groups met in the boardroom and each morning we would go down. And just listen and see, and that's when it's like oh chemo, 'cause it's like we've got patients up the Coast. We need to liaise and it's like right, who have you got? These, these, these, this is what's happening. And she was like just send your rural nurses around and try and get back. - *(pākehā woman, Specialist practitioner)*

Well that's one of the problems I think with the health system, it's always been a problem, is that there are all sorts of small health providers and participants in the health system who we don't even know exists. I think the co-ordination generally between pharmacy, and community groups, and Māori health providers, and all that, it's generally quite poor. In that situation it was really good 'cause everyone had a representative. There were probably people stuck up the coast that couldn't come, but everyone who could come, came. And you were able to swap information, and stories, and look after patients on a more individual basis. 'Cause you could find someone who knew something about that, yeah, and that worked quite well. - *(woman, pharmacist)*

When we go, then we learnt about Starlink and we were going we need Starlink. We need sat, why haven't we got a satellite, we can just go out and point it to the sky and get a signal. But no, no, we had to go to the boardroom, 'cause it was all monitored you see? And yeah everyone would be there getting their bits, that would be the stores, that would be for board admin, for Starlink. - *(pākehā woman, Specialist practitioner)*

Haphazard communications with rural communities

...so I worked in the [Hospital] ops centre, and I was asking how is the Coast, do you know? And some people couldn't answer, and I said well I can get internet here, this is on that first week on the Wednesday. And so I thought well [name] is actually my Facebook friend, so I Facebook [name]... And she answered the phone and she was in the middle of the Ruatoria Civil Defence Centre. And no one could get them on the phone, or do anything and I just Facebooked her, it was so funny – They had St John's there and everything, yeah they were on a Starlink, so we both had internet, but for whatever reason people weren't using phone networks. And I went oh hang on, oh [name], where are you? And I said oh I'm here... so everyone suddenly came round going oh we need this, we need that. How are you guys? So we got a situation report from those guys directly in that way. - *(wahine Māori, Iwi Health 2)*

Nurses going above and beyond

... then the flooding was worse. We had to go a longer way to get to the hospital. And, when we got there they said that they were about to declare a hospital state of emergency. Which meant once we went in we couldn't leave again, that it's unsafe to leave.... And, we went in and found out that mum had had a stroke and that it was not survivable. Over the next day, different nurses popped up. One had theatre on her uniform, there was a nurse from Planet Sunshine. .... It was, like, all hands on deck to keep the place running. And, they kept us quite well-informed, so they put us down in a room where we were separate from, the ward was very, very full. But, in a room where was separate. The toilet down there, the whole area was used as storage so they cleaned it out so we had our own private toilet, just a whole, like, area. Checked on us, came and did what they needed to do for us. They were stretched to the max but they made it work. - *(Pākehā woman, city)*

A couple of [the nurses] said when we found out that we were going into a state of emergency we came to work. We felt that we got the best care that we could of. And, apart from them saying, you know, we're in emergency and they were on generator power so they were just, like, only these power points will work and these lights, and whatever. Yeah. They were, you wouldn't have even really noticed I think. ...definitely couldn't fault them. ... think it's really cool that they all love their patients and they try to get the best care that they can. And, they all just, yeah, banded together to make it work. Well, one of them said she lived out at Tiniroto and she said, I don't even, I don't know if I can get home. I'm not going to try, I'm just going to stay here. - *(Pākehā woman, city)*

District Health: Hospital a priority

...they were looking to empty beds, empty the hospital, so kick people out 'cause they didn't have to be there to kind of hold them. so they were wanting to send people home to Te Karaka. ... They were trying to send some people home. Because you know... they actually don't understand, they didn't have any understanding about what was actually happening on the ground out here [Te Karaka]. At that ops kind of management level, you know, they were trying to do their job around – You know, 'cause there was no theatres, they had to cancel everything, blah, blah, blah. And then the district nurses were trying to fight 'cause we had people on oxygen at home too, palliative care, dialysing, you know? - *(wahine Māori, Iwi Health 1)*

I didn't see the Tairāwhitii District Health, I saw nothing from them pretty much. I mean they were invisible. We're closed was pretty much the response, aye. We're focused on the people that are in hospital. And rightly so, but you know.
- *(wahine Māori, school leader, city)*

Patient and community perspectives on level of care and treatment were mixed

We had a young fella, he got flown out, and he had a head injury. They more or less just kicked him out of Gisborne Hospital and he's like well where am I gonna go? You flew me in, I've got no way to get home. The only way home is that eight hour trip around the coast through Opotiki and around the coast...With a head injury. They didn't care, they just kicked him out, discharged him.
- *(wahine Māori, first responder, East Coast)*

Gisborne District Hospital: Under-resourced and Inadequate in an Emergency

The nurses are exhausted, just you hear great stories how amazing people are despite the challenges that they've got. They don't have enough nurses, they don't have enough, you know, the facilities at the hospital breaks my heart. How did we spend $50 million on a swimming pool, but not a dollar in our hospital? $9 million for a new stadium, not a dollar in the hospital. This is a high need community! It's horrible. And the majority of the doctors are overseas doctors and they come and do their rural stint and then they're gone again.
- *(Pākehā male)*

A friend of mine's a nurse at the hospital. She's exhausted. Half the nurses are leaving. And what was the stats recently, we were 28 doctors down, 41 nurses down in one little hospital. They're short again in ED. Mental health is chronic, in absolute crisis. It's appalling here. Absolute crisis in terms of resources. - *(Pākeha woman, elderly)*

I just think that the health professionals, the resources are just so stretched. COVID, then all of this, it's like they're just stretched. It's more difficult to get to places. It's harder to do outreach, it takes more time. A trip up the coast is a major. So that has to have a negative impact...Gisborne has become a less attractive place to attract people to come and work in the health sector.
- *(Pākeha woman, elderly)*

I think that's an integral part of the future. This hospital system has to be fixed up. Yeah, it's a shambles, and it's not the staff.
- *(woman, local government)*

It was atrocious. When we were walking down, there were big parts of the ceiling caved in. I had to walk mum down to her surgery because there was no wheelchair available for a knee replacement. I was like, 'what is this'?
- *(wahine Māori, local government)*

There's a lot of people on the waiting list for lens replacements for cataracts and a lot of them are probably older people but some of them are working people...the hernia patients that aren't getting in there, and they can't afford to do it privately, so you start getting that and get an incident like a storm and people who can't see properly out of their eyes, how the hell are they going to get anywhere? And if they've got hernias they can't lift anything, they can't do anything. There's people who are having to give their jobs up and then on top of that you've got hip surgeries or knees or ankles of people who could be really functional again and they're not getting that help.
- *(woman, local government)*

There's just no way that the way that hospital is at the moment, that if there was an emergency where there was a lot of injuries or fatalities, there's no way that they would cope. That's not the fault of the people! - *(woman, local government)*

Is it because we're a brown population that the government doesn't give a shit to give us the money for proper facilities? I don't know if it's got anything to do with us being a low socio economic group... more than likely. We're 55% Māori, right? So the health needs are going to be different... the hospital is not delivering. And where's the resilience for the future if we've got people who can't get healthcare? You go blind, how the hell are you going to get your way out of a cyclone when you can't see, you know? It's not right. - *(wahine Māori)*

3.8 Specialist Service

3.8.1 Key Findings

- → With communication systems down, specialist staff were often driving or finding creative ways to visit their patient.
- → Patients in isolated communities on the East Coast required coordination with nurses, lab, pharmacies, Civil Defence, helicopters.
- → Pen and paper systems were necessary; older staff remembered systems before electronic systems and went back to those processes.
- → Transport of nurses and medicine to patients was difficult, as was transport for patients to the hospital (particularly those from remote and isolated communities).
- → Transporting medicine and patients via the roads into Gisborne was very difficult, and thus helicopters were critical for transporting chemotherapy drugs and dialysis patients.
- → Communications with medical specialists in Waikato/Auckland required SAT phones; it took a while before Waikato/Auckland knew what was happening in Gisborne and to understand how systems were having to be adapted. Specialists in other regions should be alerted if an emergency occurs in another region where they have patients requiring treatment.
- → Extreme weather events impacted travel of specialist doctors from Waikato and Auckland (and elsewhere) for many months.
- → Patient and community perspectives on dialysis, chemotherapy, cancer surgery, hormone replacement therapy revealed varying perspectives and experiences, from disruption to treatment plans to urgent surgeries out of town that separated families in times of high stress and anxiety.

3.8.2 Illustrative Quotes

Door to door visits

At work, no computers, no e-mails, no telephones. ... what are we gonna do? We've got patients coming in, how are we gonna let them know? So we had big meetings and thought how are we gonna run this? And for a lot of people in the hospital, they just thought oh there's no chemotherapy, that's it. It's like no, no, it's business as usual for us, this is what we're doing. We've done this, this, and this, so even just down to spare nurses that could not sort of work from their job. Then they became part of the team here, they got their vehicles, they did home visits, there was often two of them. They went to houses and said right, this is for the week. You're on for chemo, want you to do bloods.
- *(pākehā woman, specialist nurse)*

In the initial days it was just by jumping in a car and going round to people. Once [communications] was established and things, and we got it in bits and pieces, 'cause it didn't all come on at once. Then it was like yes we've got internet, let's go for it.
- *(pākehā woman, specialist nurse)*

We had to drive around to communicate with patients. We had their stickers, so we knew their addresses. Gisborne's a small town. Some of the whānau know where they were if they weren't at home. Other than that people would just turn up, do I need chemo, what's happening, et cetera?
- *(pākehā woman, specialist nurse)*

Huge coordination effort between groups for responding to isolated and rural areas

Immediately Civil Defence and all those groups met in the boardroom and each morning we would go down. And just listen and see, and that's when it's like oh chemo, 'cause it's like we've got patients up the Coast. We need to liaise and it's like right, who have you got? These, these, these, this is what's happening. And she was like just send your rural nurses around and try and get back. So in the morning just to get the overall what was happening round the area. And just, you know say, 'cause for them it was just, they'd sort of forgotten about chemo people. It was just, and then it's like no, no, no, chemo people, we're here representing, you know a medical day unit. We've got patients up the Coast that sorta need it, oh, oh! And then yeah, and in those days we had no leadership. There was Jerry Devlin, the cardiologist, he basically had come in and said well how are you guys coping? What are you doing with chemo patients? And we're saying well what are you doing with your cardiology patients, et cetera? And just sharing stuff, and it's just like well we've already, you know we've decided it's like choice, business as usual, we can make this happen. And we can get the chemo in, and pharmacy, you know were able to do that. It was flown in. - *(pākehā woman, specialist nurse)*

Our Coast patients, one got choppered for his chemo, came in, stayed overnight in the ward. And then family, they stayed with family and then somehow they got back. One guy was this end of the bridge, so he could get back up when things were there. The other one in Te Araroa, they came the long way through the gorge, so that's four hours plus, or four to five hours. And that was for one week, oh two weeks on, one week off, two weeks on, one week off. They would do that drive, they

would do that drive. The other one caught the bus, who came through when roads were open, yeah when the gorge was open, because his wound was infected. .... just every day planning, having meetings and then at the end of the day thinking, you know how we got on, what were the problems? What did we need to address for the next day?
- *(pākehā woman, specialist nurse*)

They were trying to get communication up the Coast, that was the worst. They can cope with a lot of stuff, so it was, it was getting communications going up there and fielding the information down. What do you need up there? Because some of inlands, it's like they hadn't been visited, they couldn't, people couldn't get in there, along their roads. Because it was either bridges were taken out, or the road was no longer passable. And even our good duty nurse manager, she had to get a canoe, her kayak. Rode down the creek to get on the other side. - *(pākehā woman, specialist nurse)*

Pen and paper systems

Here's the form, we went back to the good old pen and paper, us old girls knew the system. So we went back to the pen and paper. We handed those to the patients, they still went and had their bloods. We liaised with the labs ... Went down and said look we need all of our results in order, you know to analyse, does this patient pass for chemo or not?
- *(pākehā woman, specialist nurse)*

I'm old school, it was initially before we had the computers, and everything went, you know, before computers it was pen and paper. So the lab forms were tick, tick, I need this test done and yeah, writing everything down at the end of the shift just for the co-ordinator who came round. It was like any problems you have today, so you could, they could have a list and take it back and, you know do things like that, so yeah, that worked
- *(pākehā woman, specialist nurse)*

Transport issues for medical supplies and staff: From Choppers to Carpooling

The God blessing of the choppers, I loved it, it was like Mash, it was beautiful. We could hear them and think ooh, and we'd run to the window, find out which one was coming in. ... And it was like where's the chemo, that's most important for us, they were in big chilli bins. 'Cause yes that would come from Baxters in Auckland, or Christchurch, Christchurch was helping us out as well. Usually [Baxters medicine] is couriered in, but the roads were pretty hairy and it was easier just to just get it flown in, you know? So they would land and yeah, the pilot would get out and he got to know what chemo was. 'Cause he put them in the front.
- *(pākehā woman, specialist nurse)*

...the first choppers out [were] two men who were on dialysis. And part of me went, oh, I see that this was going to be long, lots of weeks. So that was sad for them to have to leave their family. But, health safety, it was there.
- *(pākehā woman, nurse, East Coast)*

...we had our dialysis patients, who had them fly out straight away. And they had to stay in hospital for a long stay. It would have been a stress eh, on them. But, they were flown out the next day, two of them. So being a tight community eh, everybody knows who is, dependent on...power.
- *(wahine Māori, first responder, East Coast)*

To get out to dialysis patients that were overdue, but the most sickest one, he was five days overdue for dialysis. I had to go to Facebook before Civil Defence would come back and say oh yes...we're sending a helicopter now with some stuff, put them on, on the way back.
- *(wahine Māori, first responder, east coast)*

Even one of our ladies, the orderly, ...drove this lady, the stocked up the car with medicines. They liaised with pharmacy and anything else it needed. 'Cause Broadlands Pharmacy here in Gisborne is the local drop off and yeah. So they just, yeah, so they just, anything to go up the Coast, we're doing a trip? They stayed up the Coast overnight and they came back the next day, but they got that lady and her support person back up the Coast. Yeah. - *(pākehā woman, specialist nurse)*

Even Wairoa had got hold of us in some way, I can't remember how that, but it was just like how are you guys up there? How are you guys there? What's happening? 'Cause they're in the Hawkes Bay area, and then we found out that they were sending a plane once a week to Wairoa to give chemo. They would send an oncologist and a nurse. And they would give chemo in Wairoa, that way patients could get out, they could.
- *(pākehā woman, specialist nurse)*

Communications with medical specialists out of region

... we needed communication for the Waikato, to the oncologist. I went to the boardroom and used the satellite cellphone. Had to stand outside in the rain to try and get a signal. And finally get through and say right, this is the bloods, do I give, do I not, whatever, and get orders that way? Waikato had no idea what was happening in Gisborne, no idea, it was really frightening. So it was like we had to put the word out and say look put it out there, this is how we're working, this is how it's running. And until it became on the news, or they watched TV, or something to see the disaster that happened. The first call that he did to the haematologist, she had no idea what was happening in Gisborne. And I'm going I need to make this quick, I'm on satellite call, it's like, and it's like we just had a cyclone. We've got no communication, no power, no nothing, et cetera. So yeah, they hadn't realised and then til finally when things were up and running.
- *(pākehā woman, specialist nurse)*

Travel disruptions of specialist doctors

The nurses coming to work, for those who couldn't be there, they just couldn't get in. Somehow communication got in, yeah so returning to what works best. It didn't matter, you know, how basic it was, but if it worked... you know because we're isolated, our model of care for nursing is very, very different. We don't have dedicated oncologists, only a visiting one, once a month. And that has issues itself, but with our excellent nurse practitioner, who sees people, you know throughout their chemotherapy... we weren't gonna let our people down. They needed, there was a lot of real anxiousness out there, it's like my God I, you know like I get my chemo. It's like rest assured it just goes on, you know.
- *(pākehā woman, specialist nurse)*

...at times afterwards when people couldn't get down, they went to the nearest clinic. [Later on] we Zoomed from the clinics at Murupāra and Te Aroha. Yeah, because it was just, they couldn't get down – Michael's been Zooming for about three years now. It's good, but we have our nurse practitioner, Lynn, who does the first assessment and [38.02]. Once she's done that, can then feed back, 'cause you need someone to monitor lumps, bumps, and feel this.
- *(pākehā woman, specialist nurse)*

Patient and community perspectives: varying perspectives and experiences

For me being a cancer patient, everything was available. ...because I'm on a hormone treatment, they tell me it's because if I don't take it, the cancer could come back so I've gotta take this fortnightly which then affects my bones. My bones could become brittle and break if I fall so I need to have an infusion... ...it helps to strengthen my bones. But when it was due, it was there. They'd ring me up and say it's time for your injection, come on up. ... that was at the local hospital at the cancer rooms... Yeah, there was no worries there.
- *(kuia Māori, cancer patient, City)*

Were there any other medical needs that you or your whānau needed during the cyclone or post that? Being hapū and not being able to see a midwife. - *(NonBinary Takatapui)*

We have a lovely elderly gentleman who's on dialysis, who lived in a caravan for six months after his insurance got held up. You know it's just like people are in pretty dire straits, yeah.
- *(pākehā woman pharmacist)*

I started hormone replacement therapy with, there's a doctor who flies in from Auckland on a Wednesday and like his calendar fills up because there's quite a few of us who, you know, require hormone replacement therapy through him. Some, yeah, people would've missed out. And that might be like oh, you know, whatever, on the grander scheme of things. Like, I'm sure that they can miss a couple of shots. But mentally, that's huge... you miss a dose because someone isn't able to come here to administer it, then it's just a sort of, it's turmoil because your emotions are all over the place, you know? - *(NonBinary Takatapui)*

I'm on a waitlist for top surgery and, yeah, I guess originally I was like I'm fine to be, you know, Ming referred me to a surgeon. And that happened nearly a year ago now, over a year ago. And then finally I received a letter in the mail, which seems like so old school. they told me... not to really hold onto that too much because actually, it's gonna be, it's more like a nine month wait to see the surgeon. And, yeah, so I just have to keep waiting... I don't know if the waitlist has been pushed out because of Cyclone Gabrielle or because they have such a high focus around cancer patients which is totally fair. And that's the priority. - *(NonBinary Takatapui)*

On Monday the 13th of February my mum was diagnosed with breast cancer that was quite aggressive... Her surgery was booked in for when we like had no communication, 'cause it's quite an urgent process. Anyway it got rebooked and, oh man we were treated like chops at the supermarket eh? My mum, she had no support person, got flown down by herself, had her whole surgery. Like I had to practically complain to even be considered to be flown down to be with her through this like life-changing process. So for me, you know I know the health system did what they thought they could and everything like that. But honestly like it is, we didn't even do like some of the fundamental basic human kind of things, and dignifying things... There was no human connection to any of that, it was fucking horrific. Like and, you know I eventually got to Napier 'cause I paid to go myself, like I managed to go get a flight. My mum had already had surgery and then she was, yeah post-surgery, I didn't know, no one rang... I hitch hiked from Napier to Hastings, bearing in mind the road to Gisborne was open. She could have had surgery here, she could have had surgery in Hamilton, it could have been anywhere fucking else. But it had to be through the road because we had a DHB which we're not, we're Te Whatu Ora, so she should have been able to go anywhere. It would have been easier for our family if she had surgery in Auckland, or Christchurch... we could have driven to Gisborne and caught a flight. It was more expensive for someone from our family to get there. So I think, you know if there is one thing, it's treating people like humans, but this is what... the systems think they're physically doing the right thing. You've got breast cancer, like the most aggressive form of breast cancer. It needs to come out now, you're physically getting what you need to survive, not bearing in mind all of the other traumas that go with surgeries in our family... my feedback around what we could change is (1), treating people like humans. And (2), get rid of your stupid boundaries... - *(wahine Māori, city)*

There was a nurse on when we left that night, and she was the same nurse that rung us. And, she had been on quite a bit with mum. Mum had been in the hospital quite a few weeks. She was diagnosed with cancer early in January and we went through a process of finding out how bad it was, and it was real bad. And, she had radiation but it didn't do anything. And, she came back from Waikato and she was in the hospital waiting for a plan to discharge her home. But, she was deteriorating faster than any plan we could put in. [The nurses] were great. When they declared the state of emergency, I think the nurses were told they could go home or they could not or whatever. And, she stayed on. She said, I don't need to go home, she stayed on, she kept checking on us.
- *(pākehā woman, city)*

"In the initial days it was just by jumping in a car and going round to people, we got it in bits and pieces.

(pākehā woman, specialist nurse)

3.9 Emergency Responders

3.9.1 Key Findings

- → Emergency responders were working under exceptional conditions, without power, communications, flooding (of fire-station) and where whole sections of roads had been lost.
- → Emergency responders unable to contact their own families, or whose homes were affected, were initially working under considerable stress.
- → One of the first challenges was to contact staff, finding out if they are okay, and creating a roster based on those who are available to work.
- → Police worked closely with communities, trying to support whānau and to ensure citizens were safe, while also managing increased security concerns in some places. They had a strong presence in communities, spending time at community hubs and civil defence centres, to provide information and support as/where needed.
- → Iwi liaisons played an important role in connecting Police with cultural leaders, and supporting the Police in building relationships, trust and connections within communities.
- → Helicopters triggered strong memories and emotions among participants. Some communities and families witnessed helicopters flying over them, often repeatedly, despite cries for help, which was very upsetting. Helicopters were a symbol of whose lives and interests were being prioritised in an emergency, and whose were not. There continues to be strong feelings of anger and resentment in the (more or less coordinated) usage of helicopters for rescues and deliveries.
- → Some questioned why the helicopters weren't flying on the first day, even though the weather was suitable, with suggestions that there were issues with power and the fuel pumps. Community members and health providers expressed concern that the lack of helicopters working on the first day after the event was inadequate, particularly as many were requiring evacuation and support.
- → An ongoing challenge was staffing and making sure staff and volunteers were looked after and not put in dangerous work situations where they are overworked and overtired. Rotating staff became of utmost importance in the weeks and months following the SOE.

3.9.2 Illustrative Quotes

First responders: On the job but worried about family too

My children and their families are all in Hawkes Bay. Obviously, there were concerns around what was going on at that end because you've got to make sure home's alright. How do we get the best out of our people when things at home aren't right? - *(Pacific male, first responder, City*)

... we didn't even know how this weather was impacting on our staff and their families. So that was one of the priorities around, we need to make sure our people are good. We didn't have contact addresses for some of our people. I knew where some lived, but we didn't know where others lived. So that was part of the challenge for us too because we want to reach out to all of our people to ensure they were ok, because with no cellphone, no power, no internet, we felt really stranded. - *(Pacific male, first responder, Cit*y)

Chaos, communication and coordination

Our job is through Civil Defence, and through New Zealand Police and Fire, our job is to identify risk, and manage your risk. Nothing else matters. That's what our job is. But the most important thing at the top of that list is communication.
- *(Pākehā male, first responder, east coast)*

... everyone was quite chaotic and I was just like, you know [name] from, you know Gisborne Ambo, I was like have you got your sat phone? He was like what do you mean have I got a sat phone? And I was like you have a sat phone in the hallway cupboard of the ambulance station, like why have you not brought that down? And why are we not using that? And he was like oh, oh, you know, and all these people were chaotic. It was crazy, people lost their minds and it's just something that sits with me. Because I'm like we practice these things all the time, yet the people that are supposed to be so helping us, couldn't think. They just could not logically think. - *(woman, local government)*

We set up a priorities board and we said we'd go to Poho-o-Rāwiriand we set up there. That was one point that the community went to. All our Fijian men, RSC plus the forestry guys, they were just there. So we went there, got a Starlink set up, we ran services out of the wharenui. That took a couple of days'. So we got that set up and then we created a space in the whare kai for our whānau to come in and ask questions. And we listened and one thing we thought was, all this messaging is coming out of Civil Defence, it needed to go out into our community in a number of languages because we had a number of ethnic languages that we couldn't communicate with. We utilised theFijian/Tongan/Samoan leaders very well, so we would get the state of the play for today and then we'd get that interpreted then we'd shoot over to our man, Bevan, our radio announcer, and try to get that on the air.
- *(Pacific male, first responder, City)*

The importance of presence and emotional support: More than Police work

... Visibility was a big thing. It was important for us to be out in our communities visible, so we deployed all our four-wheel-drives. We got 20 four-wheel-drives shipped in on transporters as soon as a road opened. ... I got an extra 50 staff in from outside the region and the purpose of that was, I

think I worked 14 days before I had a day off so we had to quickly manage getting some staff in to do some backfilling so that our people could rest. We doubled up staffing in all of our rural villages and the purpose of that was to get an early/late shift coverage so that we had a wider coverage across the clock. And I tell you, if you go and ask these communities, that meant so much to them;having that Police Officer, that reassurance, that visibility, they were mucking in. We were mucking in all over the place and helping out.
- *(Pacific male, first responder)*

I asked for 10 Iwi Liaison staff and the purpose there was we had operational staff operating in all the villages but we needed our Liaison staff going in to connect with our community leaders. a...The stories that came back from some of these Iwi Liaison staff were just too much. But they went out there with the right heart and they did a whole lot of work and mucked in, from shifting Nanny to another place, there were a whole lot of roles way outside policing that we did. I suppose that showed our human side, that we do care.
- *(Pacific male, first responder)*

Our guys were out there already mucking in because there was a hell of a lot of work that went on out here. So we all sort of connected up. I asked one lady, 'how are you', and she stood up and walked out and bawled her eyes out. You know, it just hit her at that time because she'd been hard and strong and doing this in the community and then when someone checked in on her like I did, it just hit. So we ended up having an ice cream. ... yes, we did Police work and yes, we had to arrest some people, but I think one of the biggest things is we understand our communities and they know us, so that in times of trauma, in times of need we're on the same page. So you go in there in times of good so that in times of need the relationship's already been developed.
- *(Pacific male, first responder)*

Helicopters: Where are they?

...I said why isn't anyone flying? I said the choppers should be up checking, why isn't anyone flying? And he said I have no idea, I thought the same thing, it wasn't raining, but everything was still. The air was still, there was no wind, there was patches of blue ski every now and then, but it wasn't thick cloud or anything like that. And I said I can't figure out why no one's flying. I said the bridge washed out, I know the Coast has gotta be really bad... ...No choppers that whole day? No, not one.
- *(wahine Māori, Iwi Health 2)*

...I couldn't believe why are they not flying, it really blew me away? 'Cause I knew it had to be really ugly somewhere, uglier than where we were. So why aren't they surveying the damage, why aren't they checking the Coast? 'Cause I was like my God, you know..., we're on the direct flight path, that's why I knew no one was going there. I thought that nobody is checking on anyone up there. So when I went to hospital I said hey, I can't understand why no one's flying on the Monday. Why we didn't get reports back? And someone said oh 'cause of the weather, I said no, no, no, they fly in much worse than that. And so I didn't believe that, so I think it was a few weeks later before I got an answer. So they couldn't fuel, they couldn't operate the fuel pumps without power. They couldn't refuel and if you can't refuel, then you ain't gonna fly. And I did hear, but I've never had it confirmed, there was an issue with GPS too! - *(wahine Māori, Iwi Health 2)*

Helicopters (and Fire Trucks): Limited resources and questions of equity

...there were several helicopters a day that would come in for various reasons, so the supermarket was always reasonably well stocked with the essentials. If we hadn't had the helicopters coming in, the community would have been in bad trouble for food and so on.
- *(pākehā woman, east coast)*

We just don't want that happening again. When I'm talking like that, like how we explained two helicopters flying the media, the mayor's up there. Hey, we need the support. Land down here and start talking to the people that are affected, then you can go back home and come back with a helicopter full of stuff. Not fly over and then carry on home. We're here, we need help. We're not waving out because we want to be on TV; we need help! That's the stuff we don't want to see happen again if a disaster ever happens.
- *(tāne Māori, volunteer lead, rural)*

The only helicopter that flew over was that news one eh, and they thought they were bringing us supplies. Nobody, no, it was so strange this time, with Bola, the old Civil Defence people, they had helicopters out going to people who were stranded. But they didn't this time ...
- *(wahine Māori, clinic staff, rural)*

I actually thought the Civil Defence response was quite bad, really. I knew we were safe, but as we said, we had a five month old baby with us and the next morning the flying conditions were fine and probably about 6 o'clock, I guess, we saw the river, and to me I would have thought Gisborne Council or Civil Defence would have put a helicopter up just to fly the river, maybe up to TK or to Whātatūtū. That never happened. I know in Bola, my brother was over across the river there and there was no contact at all. My brother and his son, they were on the barn roof to get evacuated by Helicopter. The only helicopter we saw was probably about 2 o'clock in the afternoon. It flew over our house and did a U-turn and came over right at the top of the house. Once again, with the baby in mind, I was out on the back veranda there waving my arms. It was very low and it just kept on going. So yeah, a little bit disappointed in that aspect. - *(Pākehā male, horticulture, western rural)*

... like all these helicopters were going over but no one stopped for us. No one dropped us any supplies and stuff which was pretty rude. and you know, 'cause I've got three kids. it was just pretty shitty. ... Cause that [bridge] was submerged with logs and full with silt we couldn't get, to get to Tolaga for 10 days. ... that was annoying for me seeing all these helicopters going over and they could've stopped in and dropped something off. I was pissed off about that part.
- *(wahine Māori, mahi taiao, East Coast)*

Some of the communities, Ūawa, you know, they weren't happy with what did or didn't happen for them and some of it is rightly so. You've got helicopters shooting over left, right and centre and no-one calls in, or the Chief Scientist is cruising up and goes into their area and does something but he doesn't call in for a cup of tea. So, there were some things we could've done better. - *(Pacific male, first responder, City)*

Toko got split in half and people on the northern side had an expectation that there should be another fire truck and some emergency services people planted on the northern side so they can attend to anything that happened there...Of course, there's only one fire truck... there's only three people in town...that are bona fide service to be able to drive the truck and to attend to anything like that...but you're no good without your fire truck. So, there was a bit of angst about that.
- *(pākehā woman, east coast)*

Staff welfare and safety

About 180 staff and they work across several parts of the business. That's from Te Araroa in the north down to KoteMāori south of Wairoa and inland to Tuai and up to Matawai going into the gorge. So a huge geographical reach, probably one of the biggest geographical areas in the country and we had staff, we had their families in those places. So yeah, really anxious. I mean I'm okay, but how's my leadership team? How are their workgroups, how are the families attached to our staff? And then thinking about certain areas like Te Karaka; so who lives out that way? Tokomaru Bay, who lives up there? You know, our people just came in to see if they could help, and of course we couldn't deploy them all because we've got a 24/7 coverage, you know, it was similar to the earthquake in Christchurch where all the staff came in and you had to send them all home. Because we've got to get some semblance of order going, but everyone just wants to help. So, I suppose that was one thing early on in the piece that we didn't have that. - *(Pacific male, first responder, City)*

I honestly think it's just because we've got a really good senior sergeant. He's a top man. He cares about the staff, and he's put all this stuff in place. And he's got the bit of flack for it, he spent a lot of money, but he's put us in a really good position to be able to really help the community when something happens. It never used to be the case, never used to happen. Staff, welfare and fatigue and stuff's really high on the agenda for him and it really does show. I've noticed with those weather events, we've had [multiple staff in town]. That never used to happen. It'd just be the one cop and you'd be it for the 10 days or whatever it's going on. That used to be a lot to take on, you know. That is quite reassuring. And it does flow on to the community, because it puts us in a good head space and get enough sleep and rest to be able to actually help. That's a bit of a positive. - *(Pākehā male, first responder, east coast)*

I bought 20 boxes of KFC, went up the gorge and I-went around the top of East Cape and I stopped in. This was for our Police staff but also our Civil Defence groups, volunteers, and I went up there for two nights. Then one of our staff has a beach house out at Te Puia and it got washed away so we went to see her and then we came back via the back road. - *(Pacific male, first responder)*

Yeah. I felt that our public service didn't have a good plan around giving their staff rest and, you know, there's someone sitting in the WINZ office in Queenstown doing their day job, why couldn't they be here? And you could see it in our people and they were tired. Several days on they were very, very tired... Then we make a mistake because we're tired and we blame ourselves and then, oh goodness me. - *(Pacific male, first responder)*

From a police perspective, five, 10 years ago, you would have just been left to your own devices. You would have been tired and grumpy, and they would have wondered why you were so upset about everything, because you've taken the weight of the world on your shoulders. But in more recent years, we've got some really good leadership in the police, and we've been really looked after. So as soon as they know something's coming, they're putting other extra staff in strategic places, expecting the roads to get cut off. We've been getting really, really well supported through the police, and that never used to be the case with these events, but they've obviously seen the harm that's happening in the community and the stress that it's causing us. Because we've still got our own lives and our own families and stuff going on. - *(Pākehā male, first responder, east coast)*

"I bought 20 boxes of KFC, went up the gorge and I went around the top of East Cape and I stopped in. This was for our Police staff but also our Civil Defence groups, volunteers, and I went up there for two nights.

(Pacific male, first responder)

3.10 Impacts on staff

3.10.1 Key Findings

- → Health staff experienced their own challenges at home and in their families, but whenever possible, they came to work.
- → Health workers served the complex needs of their communities during the SOE and the days and weeks following, often going 'above and beyond' to support their communities.
- → With reduced staff numbers, those able to work often worked overtime for many days in a row, until reinforcement staff could offer time off.
- → Some health workers, particularly those in rural, remote communities, endured risky and stressful modes of transport to/from work (i.e., ATV across very flood-damaged terrain; driving long routes with many slips, cut-outs, damaged bridges).
- → Some health workers, particularly in rural, remote and isolated communities, experienced tension in their communities that impacted their own health and wellbeing at and beyond work.
- → Some health organisations (particularly Māori-led) were highly empathetic to their staff experiences and put strategies in place to support staff health and wellbeing after the State of Emergency was over (i.e., debriefing; time in lieu; subsidised holidays; psycho-social support; staff activities to rebuild moral; a wellbeing room).
- → Some health organisations did not acknowledge the additional time and effort of their staff, or the emotional impacts of working during this difficult time, resulting in exhausted and burned-out staff and staff shortages months after the event/s.
- → Some expressed concerns that repeated weather events and isolation (and negative media coverage of Gisborne) will impact the willingness of medical and health staff to come to Gisborne for permanent work.

3.10.2 Illustrative Quotes

"You're Buggered": Working during and after an extreme weather event

...cause at that stage, nobody really knew what was happening out here until she turned up and just took one look at me and burst into tears. Just absolutely broke down. - *(wahine Māori, Iwi Health 1)*

Actually they're all pretty stressed, we're just like everyone, we're just short of staff. Everyone's working extra hard, everyone's working sick, it's hard. - *(pākehā woman, pharmacist)*

They haven't really stopped from the cyclone... four weeks then, five weeks and it's just been a mess. And she said they haven't had a debrief, or they haven't had anything. ... about 10 weeks after the event we did a whole of staff debrief. Some of the other clinics at Matakaoa, Ūawa, they joined online and it was good, it was really good to hear how it was for them. There was a large amount of exhaustion, because the small amount of people holding the fort were doing everything.
- *(wahine Māori, Iwi Health 2)*

...the existing staff, they went to 12 hours on, 12 off, instead of general more eight hour shift. And there were no days off, I think, for nearly, it might have been almost up to nine days for a couple of staff, until we could get some reinforcements. And then we had some out of town staff come, I'm gonna say three weeks after the event who, so we were able to stand people down for a full week at a time. We'd tell them go out of town, get out, and go and get a real break away from this, get away from it all together. - *(wahine Māori, Iwi Health 2)*

I did the 35B, so I did the Waimata, Fernside, Mata, and another time the Hongia. And it took three hours [driving] and it was shaky, you know you get out, you've gotta take half an hour to recover and have a cup of tea to sort throw your nerves. And a couple of times I drove back the other way, so Jesus cripes, you're buggered.
- *(wahine Māori, Iwi Health 2)*

Every day my reception girls get hammered and I'd like the community to kind of remember hey, they're human, they went through that and we don't make all the rules, you know?...They're doing what we can and we're doing the best we can and we don't have a magic wand. And the government needs to wake up and smell the coffee really don't they?... There's a lot of yuck out there and it's not nice. And we walk out of here some days going well sometimes why the hell do we bother? You know if they're going to talk to us and treat us like that it gets exhausting. Yeah so we get a bit empathy fatigued too. - *(wahine Māori, clinical practice, city)*

Impacts on the Wellbeing of Health Staff

... they're calling it climate fatigue now and we definitely have it here. Every time it rains I have to send some staff home because we're not sure if the water is rising. 'Cause our water table is so high. So yeah it's a real balancing act.
- *(wahine Māori, clinical practice, city)*

That's a whole story in itself, what it was like working. At the time, I'd been reading letters of my mother's written home from the Second World War, and I sat there and thought, nothing much is different, except we're not under shellfire. So that that will always be an abiding memory in a good and bad way. - *(pākehā woman, nurse, east coast)*

I think colleagues in health. there's people who lost the plot and did some silly things, and management did well with them. But alcohol was certainly [involved]...then they're crying and want to go home. - *(pākehā woman, nurse, east coast)*

Staff Wellbeing: Acknowledgement, Appreciation and Systems of Support

So for the hospital, the nurses were given 40 dollars in vouchers for petrol. But at a later date they did have to pay it back in their salary.
- *(pākehā woman, specialist nurse)*

Yeah [we're all still] dragging our heels a bit. So for our staff we try and do a lot of wellbeing stuff. We've got some cool Christmas whānau activities lined up. That's important to keep this place together otherwise 'cause we'll just fracture otherwise, yeah.
- *(wahine Māori, clinical practice, city)*

... in times of crisis, we're quite strong on supporting our kaimahi. And also post coming out of it we do wellness programmes and we've been running our wellness programmes right through the whole, yeah. and it is a reflection of what we were doing in COVID as well we did definitely manaaki our crew through that space. And we've kept that, we did mirror that through the weather events...
- *(wahine Māori, Iwi Health 1)*

...we've got some pretty awesome welfare staff and they came in from Auckland, Palmerston, Manawatu and Hawkes Bay and they were just amazing, with what they could do. So they set up group sessions, they set up individual one-on-ones. And we've got a wellness room. ...welfare came in and we were very mindful of what was going on with our staff and their families. We're in this for the long game so yeah, we bought wellness in from a public service perspective.
- *(Pacific male, first responder)*

[When we reduced our extended hours, some] weren't very happy about it, but we just looked at them and said this is for our staff. We're actually putting our foot down. We're shattered.
- *(wahine Māori, medical practice, city)*

So there's lots we've done, the other thing is nominating of our staff members for subsidised holiday. So I've managed to send some staff away, so some Rotorua tourism thing said hey, we've got these holidays to give away. And I said yeah we've got people, so people that were there at ground zero, who, 'cause I think the level of exhaustion for people in that first week. You know not just the physical effort, but like the mental thing, ...we can nominate anyone who's still affected, that needs accommodation paid for just to get out of town. 'Cause getting out of town is so powerful, to get actually away from the silt, you don't have to walk in, in muddy shoes. You can go somewhere where not everyone's wearing gumboots, and that sort of stuff.
- *(wahine Māori, Iwi Health 2)*

"cause at that stage, nobody really knew what was happening out here until she turned up and just took one look at me and burst into tears. Just absolutely broke down.

(wahine Māori, Iwi Health 1)

3.11 Collaboration with other systems

3.11.1 Key Findings

- → The cyclone response surfaced some constructive synergies between different sectors, with the sharing of infrastructure, resources and information to support the community.
- → Others identified a lack of communication and coordination between systems that negatively impacted health provisions across the wider community (particularly remote and isolated communities).
- → Relationships and trust were of utmost importance in working well together during an emergency, but some noted that trust was not there prior to Cyclone Gabrielle and this was a challenging time to try to build trust. Highlighting the importance of relationship building before an event (i.e., 'stop in for a cup-of-tea').
- → If health providers anticipate working from Māori spaces to deliver healthcare during and following an extreme weather event, it is important to invest in relationships and engage in cultural training before the next event.
- → Some noted cultural misunderstandings when health providers tried to move into marae and use these spaces for their own purposes, highlighting the importance of building meaningful relationships, trust and collaboration prior to an event.
- → Some spoke of the importance of local organisations working together (with governmental agencies) to ensure longstanding inequities are addressed, as these inequities are exacerbated during and following extreme weather events.
- → Calls for greater cooperation, communication and alignment, rather than competition, between agencies and organisations.

3.11.2 Illustrative Quotes

Constructive synergies between agencies

I'll start with medicine. Our whānau up the coast needed medicine. Prescriptions. So that eventually got there but getting access from the helicopter to the home was a challenge. So the Police leant in and helped out. We got a side-by-side from Honda (four-wheeler with a roof on it), we shot that up there and that side-by-side got to places where our four-wheel-drives could never go. We've got a two-seater or a four-seater. So we used that side-by-side to get to places and spaces to get medicine in, and that would've come out in some of your research with whānau. So that was huge. Getting the basic necessities to whānau, for their health and wellbeing was important, so we did a fair bit of that. Obviously from Civil Defence it was raised about 'what are your priorities'? Well, we need to get medication to certain whānau. 'Where are they'? They're up here. 'How are we going to get them there'? We'll use this mechanism. 'How are we going to get them to them'? I don't know. We didn't know that until we got there, so we worked a workaround and they got the medication there. - *(Pacific male, first responder)*

On our rounds going around, have you got anything that needs to go to TK today? Have you got anything that needs to go up the coast today? So we were, and then at our meetings at the hospital, we would find out that someone who was driving out to TK, who then would physically pick up those prescriptions and take them out there. Do a run on behalf of everyone else. And then Civil Defence were helicoptering out the coast. So we would do a round every day and then get in touch with someone who would then take the stuff to the Civil Defence and put it on the helicopter. And that was a bit of a moving target, because the people who were available to do that seemed to change quite a lot. ... it was a little bit messy probably. And that might have been a little bit, I think because there was this operational sort of thing going on with health up in the hospital. And then there was Civil Defence happening at the council building. And those two things needed to come together to get the prescriptions and stuff up the coast. And there was just, I guess, a lot going on, communication was poor, it was hard to get hold of people, so it had got quite messy. I think there were a few close calls, but I haven't heard of any absolute disasters. - *(woman pharmacist, city)*

"There's a disconnect": Calls for greater cooperation and trust between local and national agencies

... I think actually it's about trust, and I felt that probably was one of the downfalls. I think it was clearly evident that there was a trust issue between some of our iwi and our Civil Defence emergency team. - *(Pacific male, first responder)*

They thought if they talked to themselves, they'd talk to the whole community. Well when I I've sat in some of those meetings, I didn't see anyone from, everyone from every NGO group there. I saw mostly government organisations, but I didn't see many NGOs there. I didn't see anyone from the gangs, I didn't see anyone from any of those other groups. It was just the head honchos, or the important people... but I didn't see the information going out. - *(wahine Māori, social worker)*

That also caused a wee bit of friction because NEMA said this is your responsibility and we want to know where it's going. So I went down to TROTaK and [GDC leadership team] and I had a

bit of a how's you do. And she said we're on the same team, we're on the same team. But, as she was saying that I was watching truck loads of food going out and I don't even know where it was going. So that caused me quite a bit of anxiety... And just wanting to work together, like, but you're in a state of chaos and everyone was trying to do their best, [GDC leadership team] included. But, sort of knowing that you were a wee bit liable sort of worried me.
- *(pākehā woman, social sector lead)*

...there's a disconnect, so there might've been something coming through from national level from our civil defence, but actually, when you drop down into the system stuff, they've got no idea? They're still stuck in the same expectations? And we're on the ground responding and so they're still expecting the same stuff over here from their perspective. But we're actually kind of busy doing this other stuff which is expected from us to a certain point. And providing and responding to the community need and at the same time being asked to do this other, you know, our normal BAU stuff? And so, I think that's where the disconnect and the incongruency is around the systems. when you kind of do the post [recovery] stuff like now, I don't think there's enough graciousness around expectations for the providers? You're still expected to jump, a lot of that system stuff is just dropped back into normal BAU? And there's no leniency or change in kind of approach around what that might look like? So they've learnt nothing from those experiences of COVID, of the cyclone responses. They've just dropped back into same, same. And it's frustrating, I find it really frustrating, the thing for us is that one of the learnings, we were very clear about not going back to what we were doing before. The trajectory for us is learn from what we've done and take us into that new space. So I think one of the biggest things for us is we've done too much work and too much hard yards in that space to not progress forward with some of the learnings that we've [had]. - *(wahine Māori, Iwi Health 1)*


Photo courtesy of the Gisborne District Council


Photo courtesy of the Gisborne District Council

"I think actually it's about trust, and I felt that probably was one of the downfalls. I think it was clearly evident that there was a trust issue between some of our iwi and our Civil Defence emergency team.

(Pacific male, first responder)

3.12 Non-Profit / Social Service Providers

3.12.1 Key Findings

→ Many non-profit organisations found themselves responding to huge demand in the community, highlighting significant gaps in formal social and health services.

→ They often worked in close collaboration with other community organisations and hubs, including marae, schools and churches.

→ The work of local social service providers highlights the power of community networks and relationships, and deep knowledge of the needs in their target groups and communities.

→ Many community social services had staff/volunteers reaching out to communities, knocking on doors, using the 'kūmara vine', finding and connecting with people in need (i.e., elderly, health needs, disability, mental health, addictions) who may not otherwise have sought out help or been on 'lists' for receiving follow-up care and support.

→ Some non-profit organisations carried a huge responsibility providing kai (as well as clothing, water) to those who could visit, and getting food, water and other key resources out to impacted communities and those in-need. For example, Super Grans was providing over 1000 kai packages a day.

→ Leaders of social service and non-profit organisations worked overtime, almost non-stop, for many days (weeks for some) without stop or rest. Leaders often found themselves exhausted and burnt out in the weeks following the event, but still with high levels of reporting, documentation and accounting to do to external funders and agencies.

→ The paperwork required was often unreasonable given the circumstances (i.e., no communications or technologies), and the urgent and high demands facing non-profit and social service organisations.

→ Leaders and managers of non-profit and social service providers also worked to support their staff health and wellbeing, recognising their personal and work-related stress during this challenging period.

→ After an extreme weather event, the physical and mental health and wellbeing of those working in the non-profit and social service sector should be considered and supported, as they often hear the stories and provide emotional (as well as physical) support to people experiencing great need, grief and trauma. After the adrenaline wears off following the SOE, staff and volunteers are left to face their own mental and physical exhaustion, often without adequate support or acknowledgement of their efforts.

→ Nonprofits and social service providers often responded to the urgent and immediate needs of their communities, but this came at a financial cost to their organisations that was not always recognised or reimbursed by funders/external agencies.

→ Some frustration from non-profit organisations being told to 'stay in your lane', but then still expected to be responsive and supportive of community needs (unmet by existing infrastructure) for weeks and months after the event because other agencies have exhausted their (human and/or financial) resources.

→ Some non-profit organisations called for better communication with GDC and Civil Defence, as well as Police, to ensure they are best able to support the needs of their communities, but also as they have a lot of community knowledge that could be shared to support more coordinated efforts.

→ Various non-profits providing important social services during and beyond a disaster expressed a need for great communication and collaboration from GDC, CD and other key agencies. They expressed a desire for a 'seat at the table' and for their community knowledge and contributions to be recognised and valued.

→ Despite significant levels of donations being directed to communities in need, without coordination and communication there was at times inappropriate and or excessive supply that required sorting, storage, distribution and administrative processing. Some community members described receiving dirty or old items as upsetting and not respectful. This raises the importance of good communication and coordination of donations and messaging about what to provide.

→ Some differentiated between paid and volunteer efforts, raising important questions of how to build the capability and capacity of volunteer networks within each community so the workload is shared, and residents are mobilised to be actors instead of passive recipients of aid from government, iwi or NGO agencies.

Recommendation

- **For future preparedness, Te Tairāwhiti cannot rely on the goodwill of nonprofits and volunteers. Responding to high levels of community demand for extended periods of time, or on a repeated basis, will exhaust human resources.**
- **Mapping the work of social services and nonprofits is an important step in identifying those that require further investment, support, training and funding to be equipped to adequately respond to future events.**
- **Sustainability of the non-profit and voluntary sector is important for future preparedness.**

3.12.2 Illustrative Quotes

Responding to Huge Community Need: The Invisible Labour of Love from the Non-Profit Sector

The demand that was happening at (not-for-profit food bank) was huge. Like we had lines going down the street around the block. And there was a lot of scared, desperate people. Mental wellbeing as well. So we were working 15 to 18 hour days and unable to stop because the demand was so huge.
- *(Pākehā woman, social service leader)*

We also had the army turning up and demanding a lot of bulk food as well. And of course we fulfilled in whatever way we could. We had Ngāti Porou asking for food. We had dear old [name redacted] asking for food. So we were trying to do the best that we could with what we had.
- *(Pākehā woman, social service leader)*

We came to the office knowing that there was nothing we could do, but we pulled our chairs and table out the front in case anybody that needed help would come and we may be able to help them somehow. We had the coordinator here... for Covid and for that cyclone. She would give out vouchers, MTA for petrol, food, everything.
- *(kuia Māori, social service connector)*

One of the things we also did is we reached out to services that were in our area, just to see how they were. So we touched base with [local social service provider] just to make sure are you okay? Do you need anything? You know we've got our office space if you wanna come, that sort of thing. Because, even did that through the [local community group] just to make sure are you okay? Do you need anything? You know we've got our office space if you wanna come, that sort of thing. Because, even did that through the Tairāwhiti Community Voice, we were also touching base where we could with members just to make sure that they were okay and if they needed anything.
- *(wahine Māori, social service leader)*

So our reach went out to Te Karaka, we had some that went to Wairoa, some that went to Ūawa. Because there was a lot that wasn't happening there, those places, and places had been missed. So there was a lot of that going on, loading up vehicles and putting kai in. So it was reaching out beyond our borders, yeah, and that was really noticeable, even to different areas where kai was being sent. But other parts of the rural areas were missed because of gang rivalry, for an example. You know gangs were taking control of certain spaces, so it was that lifestyle, that way of being was still happening. - *(wahine Māori, social service leader)*

The (church based not-for-profit) brought truckloads of stuff. We got two truckloads of food to Tikitiki for instance. They rung. We said you can't get through this way but you can go round that way. So they straight away loaded up the trucks and took kai around there. From Hamilton. A lot of dry foods, you know. Your basics. Food parcels, yeah.
- *(tāne Māori, church-based non-profit)*

So we opened up. We started doing meals, so we started cooking meals. we stripped out our foodbank, probably about $20,000 worth of food. We just boxed it up and as people came we just gave it to them. So we cleaned out our foodbank and then community started donating, people were emptying out their freezers. They were saying look, my freezer's off, no power. So we started cooking all the food in here, making up meals which we were able to give away. We had the homeless coming, we set up breakfast for them. We cooked for the first month. Over 6,000 meals I think. Froze meals or took meals. There was a tangihanga out at Whātatūtū, they had no water. We cooked all the meals, put them in containers. Took them out. we gave in lots of different ways.
- *(wahine Māori, not-for-profit org leader)*

Everything we did was through connection. We had no official anything, so we just gave through connections. So, when we did get our first lot of 400 food parcels all packed up on pallets, you know, someone would have a connection with someone who missed out on the pool of whatever from this little place that's just beside this little place. You know, and they'd come in with a trailer, and this is for weeks after. And we'd go so how many, you know, someone would be saying to them how many whānau up your road do you think, you know, da da da. And they'd go oh, about 10, so we'd give them 10 boxes of kai and what is it, the packs, hygiene packs. And then any babies, we'd throw on some Treasures or whatever and they'd take it. And we've got a, there was a lot of trust in that, that they would do what they said they were gonna do. But whānau for whānau.
- *(wahine Māori, not-for-profit org leader)*

I was prepared because I'd bought a couple of pallets of water the week before, so that was really handy to have as backup. Thank goodness for the support of New Zealand Food Network we were actually really quite well stocked. So for that first day more or less I responded to the welfare emergency centres through Civil Defence. There was still no organised direct line of any sort of any runners or anything. So there was just a lot of toeing and froeing and going backwards and forwards which wasted a lot of time. And did that, restocked in my head and restocked of what we had, and also what we also had offsite, which was brilliant. Making sure everything was secure. Went home, and the staff that I could, I went to theBevan for breakfast and asked him to ask all staff to turn up first thing in the morning... No one heard it though. But, some really local, lovely locals who know our organisation actually turned up to help me that afternoon. So that was blimmin' brilliant 'cause I couldn't have done it without them. So that day we really just responded to the welfare centres. And we had a lot of people turning up from Civil Defence, that were Civil Defence wardens from out in the rural areas wanting meals from us. There was no procedure. There was no anything. Luckily I just documented everything. We've got clipboards galore so we just documented everything that was going out our doors.
- *(Pākehā woman, social service leader)*

The community were absolutely exceptional because I had the likes of Cedenco, Liqourland, RiverSun, all offering me their refrigeration as well as Taste One, so service foods. So everyone was really fantastic. That was great. So we did have enough chiller and freezer space. But, also knowing where it all was without any communication... We were not that big, but yeah we did 4,600 parcels I think, in that time. Which is more than what we normally do in a year.
- *(Pākehā woman, social service leader)*

There was three or four different lots of that where we would just load up utes and trucks and whatever we could get. And make sure that we got that out to those rural areas that were totally missed out. Again the logistics of it was a mind swarm if that's the right word? I've never ever been through anything like it and we had to be like army work... make sure that we were getting the food out to where we needed. And there was a lot of urgency as well and miscommunication from Civil Defence, especially for the flight, for the helicopters. So we'd be told to turn up with 60 to a hundred boxes of prepacked food, including chilled food. And you need to be at the airport at this time, you know? So we'd get an army in, we'd do that and load it up and it would be sitting out there for six hours.
- *(Pākehā woman, social service leader)*

...we weren't directly involved with whānau... we released cash to those who were doing it. We'd built up reserves kind of accidentally, ...I had a conversation with R, and C said, why don't we just give it to iwi? Let's just give them $1 million. And so we did. ...Here's the money. It would be nice if you told us what you did with it but it's not a contractual requirement or anything like that. We trust that you know what you're doing.
- *(Pākehā woman, social service sector)*

The [church-based charity], the food that was given has definitely been thought about over many, many years and we know what to give. We know what supplies to give and how much to give. So we had that already packed down. So our boxes came all pretty prepacked from Auckland and they were ready to go. So because we know what needs to go in those packs.
- *(tāne Māori, church-based non-profit)*

And kai's the initial stuff 'cause kai settles a lot of people. If your supermarkets are closed like what we saw here, people get very agitated very quickly. They might have money but they can't get it out of the bank so they need cash to go and get kai 'cause there's nothing working. Petrol stations were the same. So yeah, the way to calm everyone, and Māori know this very well, is kai. You just give kai, you don't ask questions. Oh yeah, here's a box, you know, 'cause you're calming everyone down. 'Cause they think how am I gonna get my food, what am I gonna do?
- *(wahine Māori, not-for-profit org leader)*

So, opening the village up for them to bring their children to us. And a couple of my staff would stay back and spend time and look after the children while their parents were able to go out and do stuff. So, [we were] thinking about those sorts of things, rather than just assuming that the kids are okay, their whānau's okay.
- *(wahine Māori, social service leader)*

Door Knocking: Community Outreach and Connection

During that cyclone, door knocking, I met a lot of elderly people. They couldn't get out to get their groceries. That was a problem. So I... started looking at Sunshine Bus, Miss Daisy, Ecocabs. You know, different services that can help these people, go to their house, get what they want, get the money, they go to the grocery shop and get it for them. - *(kuia Māori, social service connector)*

I have to think on my feet, what are the social housing areas that are pretty isolated, so I went around to Lytton West and when I knocked on those doors, there were people that had no food, no money. So I thought, okay, what I've got to do is go to Supergrans. Lucky my coordination with MSD is a good one. Yeah, it's a good one. And so I went to Supergrans and ordered all this food, food parcels and just brought them back and fed them. And they were like fresh food, like macaroni cheese so they've got nice soups. So we delivered that to the Elgin / the Lytton social housing area. It's huge. It's really big. A lot of them had food, but a lot of them didn't. A lot of them had just cleaned out their deep freezers actually, and had nothing, no money so lucky we could get them food. - *(wahine Māori, social service director)*

The first two weeks after comms came back up we spent a lot of time going out to the community, particularly the Elgin community, door knocking. And touching base with those whānau, just seeing how they are, whether they worked with us or not, we didn't care. Just out door knocking, and back and forth taking kai.
- *(wahine Māori, social service leader)*

Navigating Rules, Regulations and Respect: Time for a Space at the Table?

...we've got a mandate, a national mandate with Civil Defence, the government, to say this is what we do. But we were told a week before that is that oh no, that's gonna be happening there.So yeah, it gets a little bit like that. So we took a backseat really and just let it all unfold. But the point is that today we're still managing the stuff. Everyone else has closed up but we're still doing it 'cause that's our role. That's a national mandated role. ...we're actually geared up to do this. In every other region I've worked in is that the (church based not-for-profit) we know our role, we move in, we do that. No one has to worry about that, we do what we need to do, that's it.
- *(tāne Māori, church-based non-profit)*

A barrier is the impact, the decision-making process, the decision-making over who gets what. So one of the really frustrating things was door knocking on houses. And then for, you know families, whānau, needing support, needing food or anything. Having to fill out a two page document, then what would happen, if you followed the process. We'd take it back to where it needs to get collected, it would get collected from there at the end of the day. Then it would be entered into a database, and then it would be assessed as to whether that person, or family needs some support. Some might need assessment, and they need kai, and if they do need kai, well then someone organises to deliver it the next day, or the day after. And this is, so you're standing there talking to a lady who's stressed out, the family are stressed out. They've barely got any food and you're, you know you feel like you have to, you know you're supposed to say just fill out this information. You know all this information has to be provided and that will be assessed so, you know you have to say they'll assess you. And we will take it back and then once a decision's been made, we'll take you kai.
- *(wahine Māori, social service leader)*

We were pretty isolated because one thing that I felt in the formative weeks is we weren't invited into the council civil defence. They'd have meetings, but we weren't included.
- *(wahine Māori, social service director)*

...would be nice if you were taken seriously, right, as a key agency by those responders, and included in the [meetings and comms] ... I suppose the recognition would be the best, biggest thing. What we're about... Because people, as soon as they get somebody who's 65 or older, straight away oh, Age Concern.
- *(kuia Māori, social service connector)*

But, as I said, because we weren't in the mix from the start in civil defence, I would have suggested a lot of things. I would have suggested our Meals on Wheels might be okay as recipients. But I had to make sure of that. There were a lot of things that we had to get right, but we weren't given that respect, really.
- *(wahine Māori, social service director)*

well kind of half-assed fill in the forms, we'd go and get the kai and the food. And we'll come back maybe within an hour, and honestly seeing the faces of our pakeke, seeing and hearing our tamariki, and their whānau. I'm like yeah, no, I'll wear whatever growling you want to give me. But hearing a kid yell out mum, mum, we're gonna have some kai, we've got some hot dinner, you know? I'm like stuff you, yeah that was the bureaucracy. It's like oh no I like to follow rules, but that was one of the times, and I did say to my CEO, heads up... who are we to assess whether a person needs kai? I'm like sorry, we've all just gone through this major catastrophe and you want us to sit there and say 'you've gotta fill out this two page form'? Then someone will sit there and assess and then we'll get back to you. And assess whether you do need this food or not. The person doing the assessment, do they ever meet the people who they were assessing? Na. Na. It's all dependent, it was all dependent on the information they provided in that form. And in order to get kai you had to fill out that form... you're standing there, a hot day, you know this is like maybe the 20th house we've been to. And you're expected to fill out a two-page form and you can see quite clearly this family needs food. There's 18 people, 10 people in a house, two-bedroom house, come off it!
- *(wahine Māori, social service leader)*

Management, Administration and Leadership: Challenges, Strategies and Learnings

The biggest issue for me that day was navigating the hordes of volunteers. So we had a couple of really bad eggs turn up that scoped the place. It's not something you can actually manage that well when you are in crisis. There, they're very unsavoury people that were just showing up, so I'm sure we've all learnt lessons from that. Especially around next time of volunteers centre kicking into action straight away and making sure that people are screened.
- *(Pākehā woman, social service leader)*

the thing that took up most of my time was meetings. And it was meeting after meeting after meeting after meeting. And I was needed back at the base. But, we had to have those meetings because there was no communication.
- *(Pākehā woman, social service leader)*

As the regional manager it felt, that first week, especially when we had no comms outside, felt very isolating. ... And then having to maintain a calm veneer for my team so they don't go stressing out.
- *(wahine Māori, social service leader)*

I learnt the power of collaboration. I also learnt the downfall of ego and people's unwillingness to learn the strengths of others. I went through resentment for a very long time, about systems and boundaries, and red tape.
- *(pākehā woman, mental health)*

I'm learning a lot about how to lead better. And also how to say no and how to reserve energy as a leader.
- *(Samoan-Māori, wahine, Pacific non-profit)*

All up I think we got around 220,000 dollars worth of donations. But, making sure it went to where it is meant to go and for the reason it was given. And doing that actually, and finding the right people is actually quite hard. We, I had real mental challenges with the bigger organisations like Red Cross that came and took off us, during the cyclone. We never got even an acknowledgment, not that we expect one. But, a thank you. And even though we had our donations which we did, which was great, they never offered to help us as an organisation in any way, so I was a bit fuming about that. - *(Pākehā woman, social service leader)*

It really egged me as well a lot of the likes of CDEM, the Army and National Emergency management dependent on small organisations like ours to deliver. And what made it worse, and mental agony for me, was they would not, because of legislation and regulations they would not pay us any money for what we did to recoup or restock our pātaka. So if I did my maths it was around 440,000 dollars worth of food that went out, that's including our time and everything. And I think we ended up with maybe 23,000 dollars back from them. And there was a lot of shoving and barging and meetings to try and get more support for our organisation from that sadly. The ripple effect of the cyclone, is that we have lost staff. Yep, because we just didn't, you know, everything went out and we can't use the donations that we have to prop up staff. But, if we had of got the money back from NEMA from what was outputted it would have made our situation a lot better than it is. - *(Pākehā woman, social service leader)*

The thing that really annoyed me the most out of that day particularly was demands from other organisations for support when we didn't really have it ourselves. Then us delivering that support and seeing they actually had more than what we had. - *(Pākehā woman, social service leader)*

I was about giving everyone the space to help others. Because I was like everyone in this community that's struggling needs to see that as many people as possible have got their backs. It's gonna be huge mahi [for] months ahead. But there was a lot of emphasis on like oh, well we're doing that, this is our part, you stay out of it. Or, I was like how is this going to achieve anything? You're all gonna burn out in six weeks' time. You know we're all gonna get tired, so alignment is a biggie. If we could get all organisations, and it's impossible to align to your strength. And with the government's awareness, oh my gosh, I feel like we'll bullet proof ourselves for a natural disaster. But it doesn't work like that.
- *(pākehā woman, mental health)*

Donations: The Need for Coordination, Communication and Compassion

And the biggest job was sorting through the donations, always. And some of the things you get, eh? It's like if you don't wanna receive that, don't give it to somebody else.
- *(wahine Maori, marae leader)*

there were container loads of donations, you know that we were like where is that all gonna go? In the end it was like stop, can you take it to town, but everyone wanted to bring it. 'Cause they're like this stuff needs to come to Te Karaka, so it was like trying to stop truckloads of people just bringing cargo ships literally full of support, which was amazing. But then the, it started putting pressure on the storage and then, so yeah.
- *(wahine Maori, school leader, rural)*

One more thing that I didn't like is I want to tell this, the community and the people can improve, I hate people giving [old and dirty clothes]. Like they think they are helping and giving more clothes. ...but I found in one of the bags, a torn bed sheet and I cried for an hour. It hurts me, I just wanna throw it in a bin, but I don't want that, it's tough with all of this, yeah.
- *(Indian woman, recent immigrant)*

Staff and Volunteer Wellbeing: The Human Toll of Caring for Your Community

Policies and stuff, all good, you could have the greatest policy. But what I noticed is stuff like manaaki kicked in, so when we brought everyone back to the village for my team, we made sure. Okay we explained to them business as usual is out the door, we're not gonna have kids come in for, at least for the next two weeks. But this is what we're gonna do, and just providing a space for them, like for example we had, we provided breakfast and lunch, and afternoon tea, and morning tea. when the communications came back on, we set up a little dining area, lounge area. 'Cause Matatini, you know, so while we were going out to support whānau, we still had those spaces we could come back into. And just downtime, and the key thing I wanted to achieve during that period was allow my team to be part of the community. And do some work there, but also allow them the space to deal with whatever they're dealing with. So that when they do go home, they don't have that lingering.
- *(wahine Māori, social service leader)*

That's the key thing about our mahi is we have to look after us to look after our community.
- *(wahine Māori, social service leader)*

I also damaged my arm during it, ripped tendons which I just kept on going, which is dumb.
- *(Pākehā woman, social service leader)*

I demanded that they [staff] stop [working]. They didn't want to. They told me that they were, I could tell by the way they were talking they were really tired. They weren't thinking straight. There was tears coming. They were exhausted. They were absolutely exhausted. So once I demanded that they do it, they did do it. The biggest mistake I made is that I didn't do it... I did have a backup person, but she actually resigned after it. It was too much and she wasn't coping. And another way of telling that she wasn't coping was she was walking around with sunglasses on inside and not wanting to make eye contact with anyone. Poor darling, you know there was a lot of anxiety with the horrendous demand that was on you, yep!
- *(Pākehā woman, social service leader)*

One lovely thing out of it was the response to the community and just how wonderful everyone was turning up and offering to help. My main concern as I think I said earlier was our safety... Demand was still high. I think I worked 220 hours in two and a bit weeks. It was too much, it was too much. Yeah, it really broke me. It didn't break, the adrenalin was working during that time so I thought I was fine. I've got this, I've got this as you do. I put my staff first before I put myself, which you do as a leader anyway.
- *(Pākehā woman, social service leader)*

Still not knowing how long this was going to go for. So more or less it was two and a half weeks of just fullon-ness. The staff didn't want to stop. They didn't think about themselves at all, but I made them have time off. The Board were good but it was very, very hard when you were under that much demand for my brain to turn off. And I

didn't realise it at the time. Yeah it was just full on. It was unprecedented... You know, sometimes nine o'clock at night, with only, with two really really tired workers trying to get the food out there. We ended up in some really dangerous situations trying to find other chillers at night, going out the old RDA road and slipping backwards with a whole load on. Yeah, so there was a lot of panic. A lot of scared, scared, worn out staff.
- *(Pākehā woman, social service leader)*

But we were hugely blessed during the cyclone. We had the right amount of food. We never needed for anything. We never needed nothing. We had someone on day one who'd just the week before came to karakia on the Sunday turn up, cook. Cooked for two weeks flat. And then we had a chef turn up and say can I help, and so he cooked for two weeks. So we stood her down, in other words said look, 'have a rest'.
- *(wahine Māori, not-for-profit org leader)*

They were getting tired and so I wanted to literally have to force them to stop. I think the other thing was just sitting back and using some of the skills and knowledge that I have through my kaitiakitanga training, through my practice. Just observing staff who, you know were going on, and on, and on, and on. So just pulling them back and just even having the conversation to stop them from, you know having a break down. And then, so after that, so for that two weeks, fed them, you know made sure they were okay and all that stuff. At the end of it, before we went back to business as usual, we took them out for dinner. And we had a dinner together as staff.
- *(wahine Māori, social service leader)*

...sometimes I have sleepless night because I wonder if, you know, am I making the right decision, you know? Am I, am I leading enough for my team to be able to feel confident in what they're doing, especially responding to stuff like this? I definitely think that at the time of the cyclone, we had no sleep.
- *(Samoan-Māori, wahine, Pacific rangatahi)*

I had moments where I was like, holy fuck, what are we doing? It's definitely stressful. There were moments where I just really wanted to swear at people, especially in the government. But it was really draining, really draining, draining and then it makes you question whether or not you're the right person to kind of lead something like [this]. But I feel like across the board in Tairāwhiti at that time, there was a lot of that that came out and that's why I'm really proud of kind of how people held themselves, including us. But I feel like I could've just kind of, I could've just closed up [non profit] and said this is not our problem, you know? But, of course... It's not how I'm built. So I kind of feel like there's some trauma, I feel like I've got post traumatic stress disorder, cyclone trauma.
- *(Samoan-Māori, wahine, Pacific rangatahi)*

What I noticed is stuff like manaaki kicked in... But this is what we're gonna do, and just providing a space for them, like for example we had, we provided breakfast and lunch, and afternoon tea, and morning tea. So we all went out for breakfast, and just getting there and spending time with your work colleagues, provided some normality. And just downtime, and the key thing I wanted to achieve during that period was allow my team to be part of the community. And do some work there, but also allow them the space to deal with whatever they're dealing with. So that when they do go home, they don't have that lingering. Yeah so we were well taken care of mahi-wise... who's a professional chef, if he's not an artist, he's a chef, so yeah he kept us well nourished, and yeah, and good to go. And that's the key thing about our mahi is we have to look after us to look after our community. - *(wahine Māori, social service leader)*

Ongoing Challenges of Non-Profit Organizations: The Long Tail of Community Care Post-Disaster

So we've actually written a report to our national office to say this is what, but we haven't been contacted since. We've still got people coming in. We've still got roads closed up the coast. We've still got whānau that are still ... coming in to say we need this, in drips and drabs. ...so we just stick to our mandate and don't get involved in the politics, and let the politicians sort that out. We'll sort out the people, that's our mandate. So we haven't had an official conversations with anybody in the community. - *(wahine Māori, not-for-profit org leader)*

The (church based not-for-profit) are still there dealing with the fallout from that. We still do, we do meals once a week. So we are still caring for the community. Okay, it might not be cyclone related but that's come from that. The cooking has come from that. - *(wahine Māori, not-for-profit org leader)*

Future Preparedness: Managing Limited Resources Through Better Coordination and Communication

So it was really interesting 'cause when they [Civil Defence] told us the crowd from Ūawa were coming, over 100, we set up. We had nothing so we didn't even have mattresses, so we're saying where's the mattresses gonna come from? So, you know, we did what we needed to do, set it up. So I had to split the team because once again, you know, health and safety, OSH. And a little team.'Cause we're only a little team, so I had to split the team so that one team went home and rested, one team stayed overnight, then we swapped. See no one turned up. [Ūawa] Didn't turn up and no one told us that. So once again I'm sitting there going, you know, I've just sent half my team home to rest, you know, so they don't get in trouble, you know. And we cooked kai and did what we could. Waited all night. But once again that basic communication to say hey, you're not needed now. Then I could've sent the team home, they would've been rested and we would've all been back on deck the next day. So I lose a day and a half really and I'm running with a short team the next day and we're flat out. So that sort of thing. Jump. So we jump because we don't wanna be a squeaky wheel in it 'cause they've got enough. But, you know, come on, give us a little bit back. Talk to us, you know. No, communication right.I just felt it was quite, everything was quite pompous. People walking around in their Civil Defence jackets, you know, their blue ones, on their phones, walking around. And I'm going oh – Yeah, the power of that phone. Every other place I've been involved in there's been none of that. It's been, everything's streamed, you know. Yeah, and they've got a team set up there and there's someone shooting information there, you know.
- *(wahine Māori, not-for-profit org leader)*

So if we were to have another event such as that, we now have the biggest generator there is on a trailer. That will do the whole block. We, I've got a contact list and addresses of people with chilling capabilities and freezing, and the agreement for me to call at their homes. We've got a Star Link and we have got other agencies willing to come in and support us as a entire agency, coming in to take over and give us respite, yeah. So we've set ourselves up really well for the future should we need to go through that again. Yeah so it is really positive. - *(Pākehā woman, social service leader)*

One of the key things we tried is building in flexibility and building in measures of effectiveness from a whānau perspective. ... understand[ing] the unmet needs of things that is not coming through the door yet but will be in two weeks, 10 days, five years. Then they understand the levels of unmet need, they can understand the amount of investment they need to put into simplifying their own systems, improving

the capacity and capability of their staff with workforce development, understanding which parts of their system need urgently working on to better meet the actual needs of whānau living here in Tairāwhiti. And you could have place-based settings all around the country where the sense-making happens, where the groups of local leaders and frontline workers are getting together and looking at those and saying, ‘oh well that’s because of the cyclone’, or ‘that was like that before’, or ‘that’s because there’s been no investment in housing. And to be able to do that region by region, where there is variation but to take an evidence-informed approach.
- *(wahine Māori, social service connector)*

We should have had another meeting. We should have had a get-together, but we haven't. That's a bit weird. They sort of engage only the government departments, leaving out vital stuff. See, when we went up to the marae, those girls, we say, what about the elderly? Who's looking after them? I said to them they had already engaged the churches. We weren't invited. Probably because they're saying we're too small.
- *(wahine Māori, social service director)*

Photo Credit. Josie McClutchie

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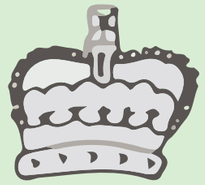
4

Non-Health Systems



4.1 Local Government, Civil Defence and wellbeing

4.1.1 Key Findings

→ Varied opinions of, and experiences with, the social, health and welfare support offered by the Gisborne District Council.

→ Some strong perceptions that GDC demonstrated bias to some areas (Gisborne City) over other rural and remote coastal communities.

→ GDC staff worked long hours to respond to complex community needs under very challenging conditions (i.e., power, communications), but faced various forms of critique and abuse from the public, which further impacted staff wellbeing.

→ GDC and other statutory agency staff experienced considerable frustration trying to respond to community needs when waiting for support/approval/processes from Wellington.

→ Varied community perceptions of the effectiveness of the GDC and Civil Defence response. Some in rural and remote communities were particularly upset by oversights from CD, and lack of connection, rapport or emotional support, with different views on the role of CD in communities.

→ Civil Defence workers in communities are almost entirely made-up of volunteers (who often have various other responsibilities, i.e., family, work), but they carry a huge responsibility for the health and safety of their communities, and often come under attack. Some calls for more professionalisation of CD in communities, particularly as they play such a key role in responding to extreme weather events (which are predicted to become more frequent).

→ Civil Defence volunteers received very little psychosocial support following extreme weather events.

→ For future resilience, leadership of community-level Civil Defence needs funding and further support. If extreme weather events are to become more frequent, it is insufficient to continue to rely on volunteers to continue carrying the increasing workload and weight of community responsibility without financial support and investment.

→ Leaders of local government and social organisations faced strong and public critique. Some experienced burnout and exhaustion, but with very little time or resources for their own recovery processes.

4.1.2 Illustrative Quotes

Community perceptions of GDC support: Mixed reviews

I felt like they were trying to cope as best they could and it was overwhelming because you had crowds of Gisborne people turning up to the Council trying to be heard all at once. And yeah, there was a lot of, I think Council just trying to figure it out as they went, yeah. Trying to get themselves back online too. - *(wahine Māori, artist, city)*

...I spoke to somebody at the District Council that I needed food for this woman, and actually they gave me a little bag with some goodies in it for her.
- *(kuia Māori, social services connector)*

I would have liked them to come out so they could actually view the property and know where we're at, but they seem to think that they're too busy to do that. Murry Cave, the Council Scientist, he's been out a couple of times. He's been really good. He's been very supportive. He's come out and listened and advised us. - *(male horticulture)*

...the Council I thought were just unfortunately not up to par.... But I think they forgot about our other communities. They focused only on Gisborne city.
- *(wahine Māori, school leader)*

...to be blunt the Council have hated Makorori and want us all to go away forever.
- *(pākehā woman resident)*

You wonder under what urgency of work conditions they're working in that they're having these holes fall through in their work. It's either a huge amount of distressing, urgent work that's making them perform poorly, or their systems aren't right.
- *(pākehā woman resident)*

...the recovery team here are great. Lovely, lovely ladies and they've sort of been, they're a really good buffer between, you know, the people coming in that are, that are displaced from their houses and are sad about this. And, this is going on, and we've got these personal issues and council's not helping. And, they are really good at going to each individual team to find out what needs to be done and then giving a response. And, also putting them in touch with other agencies that can help, because a lot of people don't know where to get other help as well.
- *(pākehā woman, local government)*

Long hours and Stressful Conditions: Impacts on staff health & wellbeing

...our Civil Defence function [did] really well. And came together as a team to support the community. Mucked in, yeah, just I say they're just ordinary people doing extraordinary things.
- *(wahine Māori, local government)*

... it's compounding, it's continually compounding. So you just come to work and you're like right, like, you know and you're getting the calls from people with the impacts and stuff. So in terms of my work, that's, that is the real impact of continuous ongoing events, is our funding system is absolutely not geared up to support recovery. And they just, they being government and, you know Crown kinda central government agencies. They have no idea, they have no idea what it's actually doing to offices on the ground and people that have to deliver these work programmes.
- *(wahine Māori, management local government)*

I think when you work at Council as well, there's an expectation that you're going to pull your weight when these things happen. So yeah, trying to navigate all of that as well, like rallying up staff and sending people off to Civil Defence. Some of my staff did massive, massive hours at Civil Defence. Massive hours. - *(wahine Māori, local government)*

I was on the building services team so they were the team that was going and doing the Rapid assessments, so the red and yellow stickers. ... everyone was really flying blind. And, the only sort of guidelines that they had were mostly to do with earthquakes, 'cause they were developed after the Christchurch earthquake. So, yeah, everyone was just, it was really hard to get accurate reportings of what, you know, what addresses we'd been to. And, we were looking on maps and what sticker's been issued where and trying to keep a record of it. Not realising that that record is now the bread and butter for the categorisation process. So, as time went on and, like, the flood recovery stuff just, it just kept going and going and going. Everyone was just under so much pressure and just, I mean, we were a really good team and we got on really well. And, we were able to offload to each other on what was going on. But at the same time, there was just no real direction which is very, it's quite scary. And, you're just trying to do the best that you can, and now we have people asking us questions about on this day, when you issued this yellow sticker, you know, what did you see, and we don't know, you know. It was just a blur of house after house, and having to talk to people. And so, we had a building inspector and an admin staff would go together. And, the admin staff ended up, if there were people in the property, you know, just talking through with people about their experience and how it was. And, it was just so eye opening we're the face of the council. And the only people that they've seen, so they want to know what's happening and we don't know. It's very awkward.
- *(pākehā woman, local government)*

I have concerns for the wellbeing of some members of that [building] team. The work for them in the recovery space has eased off but it continues to be ongoing. And, just like their general workload is quite overwhelming ... So, I am quite worried about them ...The building team was operating independently of Civil Defence but in conjunction with, but there wasn't a lot of communication.

And, they do feel like they are very separate to everyone else, and the BAU just continues so, yeah, they're very, very stressed. And, like, ongoing stuff... like all the land movements that happened in June, and we had to go through another round.
- *(pākehā woman, local government)*

...it was surreal when you think back to how people responded. ... we don't have the benefit of other regions [like the Hawkes Bay] that have five councils. - *(wahine Māori, local government)*

We're doing this because it needs to be done. [It] feels like there's no light at the end of the tunnel, but I wouldn't have it any other way, like there is absolutely no way I would say 'buggar this', I've had enough, I'm not doing it anymore... you know you're passionate about the fact that we're responsible for public health. I take it very seriously and so you do it, but yeah, and there's not necessarily much that the council can do about it. It's just the reality of the situation at the moment, but yeah, but it is, it does add stress... stress is not always blatant and in-your-face, you know? It's often just in the background and it's building up and you're not even necessarily conscious of it eh, a lot of the time?
- *(wahine Māori, management local government)*

Working the long hours, I think definitely took a toll. Doing like 12 hour shifts, but yeah as I was saying I was like so hyped up on adrenalin. You're working eight, til eight and then you'd go home and you'd try to rest. But you couldn't really fall asleep and it was still kinda raining and I had just moved to live on my own, which was the worst timing. So it was, yeah, just completely cut off and just by myself... So yeah doing those 12 hour shifts and then yeah going back to council at eight am after. Yeah just doing that for five days and just completely burnt out by the end of it. But I think yeah, I think I've given feedback to council the Civil Defence with the way they structured that. And not knowing if you had a sub, like if you were gonna get tapped out, or like get to have a break. So you were just kind of doing it day to day to day. And just hoping that you'd get a rest.
- *(pākehā male, local government)*

...my husband, it affected him 'cause he travels out of the region for work. ... like once a fortnight, so I'm doing three people's job at the moment, so you're always busy and you don't work in any Council unless you hope like buggery you can make a little bit of a difference.
- *(woman, local government)*

We were doing the need assessment forms. And it's all very like physical things, like where are you living, have you lost, or can you go back home, like food? But I think the mental health impact and that not being considered. ...it was just like yeah kind of this helplessness where you see these people that need help. And you didn't know if they were getting the help... You were just kind of like all right, well we've recorded it and then I think yeah, just absorbing a lot of that information, I think, took a bit of a toll on the welfare crew. 'Cause we were just, you know feeling a bit helpless, but then knowing that maybe there's help out there, people that were offering help. But it wasn't always easy to get that for the areas where it was needed.
- *(wahine Māori, management local government)*

It does affect family and for me work, it's been like, ... all these repeated rainfall events... it's just this build-up of just, it just seemed to be never ending. You know the whole year... So when we got called in [when the Cyclone hit], and then for three weeks after that we were just working. Because we had no comms, so we had no alarm, so we had to sleep at the plants. So we had only two operators at each plant, so we were doing 24 hours on and two days off. So you were working for 24 hours, you were sort of catching a nap in an armchair when you could sort of thing.
- *(pākehā male, manager, local government)*

"We're often the bad guy": GDC and Community Upset and Abuse

I think the people that work in the Council as well, while we've got our own issues ... We're often the bad guy. - *(wahine Māori, local government*)

...we even did the bullying campaign...towards the staff and yeah, 'cause that's what was going on. ...it's been a crazy, crazy year. So I'll talk to HR when there's flags, concerns that I've got in my conversations. And the trauma they must be taking on from the community in terms of their engagements that are happening there...we're upping our interventions, or our support for staff... it's just not enough.
- *(wahine Māori, local government)*

A steep rise in abuse of staff. I was having one of my staff members crying at least once a week because of the way that customers were interacting with them. - *(woman, local government)*

...we get staff members who get torn to shreds on public platforms..torn to shreds constantly in the papers and on Facebook and stuff like that. You know, that man's just doing his best...he's really weathered over the year; lost weight. In terms of the building consent section..They're having to go on people's sites where people are angry.
- *(wahine Māori, local government)*

Part of my decline in mental health working as a contractor and as the transport manager in a community I lived in. It was really hard to go to the supermarket and buy your groceries on a Sunday, not be abused, ...they just see you as a faceless bureaucrat and you are the problem. You are the red tape, you are not doing your job..., I don't go to community meetings because I agree with people. What they're saying is not unreasonable... I can't say like this is a fucked system... We, yeah we too feel frustrated by this, but the way the systems, the processes, and funding, and all of those things combine together... having the same people with their same unresolved complaint, be brick walled by council, is really not helpful... - *(GDC - Māori Woman)*

...trying to give the best to different communities that have different needs. And, it gets really, really hard. And, I think we just, we cop it, we cop it a lot.
- *(pākehā woman, local government)*

A lot of fear and stuff came out... So, we wear that as well but, yeah, just a lot of people, just a lot of upset people. And, the only place you can vent it is at what you see. So, you see council and you see a logo, and you vent it there. A lot of the decisions are made in Wellington. They're not made by us, we just have to enforce them. But people can't see that so they just see us. And, we welcome you in, we answer the phone really nicely and you can just have a go. - *(pākehā woman, local government)*

I got attacked online by an iwi leader, and I had one of my good friends mum ring me. And say I just want you to be careful, make sure you're not walking outside by yourself. You know make sure that you go home and, you know, and in daylight. Or, you know that someone's there with you in this period of time, because of the trauma. And how people were feeling might personalise an attack on me. - *(wahine Māori, local government)*

Civil Defence: All the responsibility, with inadequate resourcing

Four weeks all crazy and then, I think week five that was like the breaking point eh. Where everyone was just falling to pieces because there was four whole weeks of just looking after humans. We sort of got used to it...297 homes in Toko alone, that's without even going out the back.
- *(wahine Māori, CD volunteers, east coast)*

You know, Te Karaka didn't get the help that it needed. I don't think it was on purpose, but it was real. I think never let a good crisis go to waste and there was an opportunity there to get some radical progress on iwi rights, like their own Civil Defence Act. - *(Pākehā woman, social service connector lead)*

We've had no leadership from Gisborne District Council. ... I had district council staff ring up throughout the day, [name], we're here for you. Ring us up any time throughout the night. You rang them at 5.30, the phones went on the damn voicemail. Communication was a major, major let down. - *(pākehā male, first responders, east coast)*

Vivid chaos. Not getting enough sleep. I think the first three weeks myself, and our GDC staff, did 20 hour days, 'cause there was no one to tag us out. Vivid, the community coming together and the community splitting apart. So there were a lot of power plays going on, but as Civil Defence we had all the say. So that pissed off a lot of people .
- *(wahine Māori, first responder, east coast*)

In the firing line: Community Perceptions of Civil Defence

...these are Civil Defence people that [were] actually "oh, you all right," "yeah", "bye". What have you got a truck for? Haere mai ki te ki te. Kanohi ki te kanohi. They just "oh yeah, you're right" and gone 'cause you've gotta go check everyone else. Stop. They need that two, three minutes. Not hi and bye, you're alive, see ya.
- *(wahine Māori, east coast)*

...I mean have you got the right people in place in the first place? You can have psychologists, you can have social workers, you can have health rescue and health safety people. You can have a baker and mechanics. It's like taking a baker to a mechanics. Some of them I don't think have the skills to be able to emotionally connect... in saying that I understand because they might not have the skills 'cause they're volunteers too...
- *(wahine Māori, east coast)*

There was a course for people to do for Civil Defence, for them to be able to deal with people... Can we just get someone professional in now? [We need] funding for specialist roles. You know, I'd like to hear from those people too as advocates. Like

what would yous, how would you prefer to work? Do you like working with your own whānau or do you actually like working with others? Yeah, that whānau thing. - *(wahine Māori, east coast)*

We also had one of the local kind of more experienced Civil Defence people in there helping them. But the job of Civil Defence is for civilians to defend themselves, that's what I've learnt, civilians defending themselves. So, I think there was quite a pohehe that Civil Defence was gonna save everyone too. - *(wahine Māori, school leader, rural)*

And really what Civil Defence should do, should be to activate people to do for themselves.
- *(wahine Māori, school leader, rural)*

Professionalisation and Support of Civil Defence for Future resilience

I definitely think if they're not paid roles [in Civil Defence], they definitely need to be better looked after and better supported, these guys that are volunteering. I've got to say, you guys get treated like shit by the council... There's some good people in there,...The communication is terrible. ... It is getting a little bit better, like there's always kai down at the school for you guys.
- *(pākehā male, first responders, east coast)*

...they need to be trusting you guys more with making those decisions. They shouldn't be questioning why. Yeah, question what do you need. Yeah, why do you need that? Well, we've got 10 people working down here 12 hour shifts. We need food. That should be the end of it. It shouldn't be we need 12 eggs, we need 10 hash browns ... I don't think you guys are looked after well enough in that aspect. You guys are volunteers. You guys have got your own lives, and you are taking a lot of the weight of the community on your shoulders when these events go down. I think Civil Defence are probably at the bottom of the heap. You guys have got a big role and responsibility there, ..., these guys are paid to do a job in the council, so I reckon they need to be doing better. They're taking for granted the volunteer nature of such critical roles.
- *(pākehā male, first responders, east coast)*

I do think someone has to be paid, or employed in each of these districts. Because it is a full-time job, you know, you've got to, we've got 27 wardens now in our community alone.
- *(pākehā male, first responder, western rural)*

...with everyone being volunteers, I am finding it difficult to find someone willing to take my place. You know [husband and wife], for instance, they're in the middle of lambing season. So they said, you know if we have an event we're stuffed, we can't, you know. The same as [husband and wife], you know if they have an event, [husband] works for Leaderbrand and he's pretty high up there. So he's tied up in there, so a lot of these people who are here, they have other responsibilities, and it must play on their mental health, the responsibility of Civil Defence work on top of everthing else.
- *(pākehā male, first responder, western rural)*

Yeah I probably wouldn't put my hand up again. It is quite, ugly. It made me look at the community different.
- *(wahine Māori, first responder, east coast)*

It's lucky that I'm retired, but it needs basically a full-time person... I'm getting on and it needs someone younger.
- *(pākehā male, first responder, western rural)*

In a place where it could so easily get cut off, we should be so much better resourced. I mean not a generator at one of the two Civil Defence centres.
- *(tāne Māori, church-based non-profit)*

'We just soldier on': Different individual and organisational responses to wellbeing

... Stress wise, if you expect me to break down a cry, you'll never see that, because I won't do that. And I don't expect anybody in my team to do it. There's a place and a time to do that, and that's somewhere else. And I'm strict on that, because that's the environment we want. ... Do you have a support system for them, if they need it,? Counselling... Is there any thing like that? No.
- *(pākehā male, first responders, east coast)*

...we were taking [welfare information] by paper, and then sending it off to the organisation that would see it through. While Civil Defence, and all the structures... seem very logistical, and very physical, but there's no consideration of mental health and... just having a bit more focus on mental health in those situations... Council did say, 'hey, if you need support there's EAP services'. I went and talked to someone there, but it wasn't good. It wasn't really the support for me, it didn't really work for me.
- *(wahine Māori, management local government)*

...in Civil Defence and our emergency responders, and the contracts, even though the boys and girls were doing some amazing stuff. They still kind of carry on, like they're at the pump 24/7, you know for the first couple of weeks and then everyone can kind of have a break. But not us, I had to then move into recovery, so we don't get that break, we just soldier on. - *(wahine Māori, local government)*

I had a lot of staff that are not from Gisborne. No friends, no family, I had several new staff that didn't know anyone at that point...I just felt this overwhelming responsibility to have to check in on Them. - *(woman, local government)*

There is constantly the message that if you need anything, ask. But I don't know how much that's been tested. I don't know what it's like if you did ask. I suspect it really depends on individual managers...I feel like support shouldn't be about, 'oh if you need me, come and ask me', because it's just words. The support should be rules about safety...Rules that are absolutely in place to protect your staff. Don't come and tell me if you've got a problem; I will make you safe and you will never have to tell me. - *(woman, local government)*

I think we are, for the most part, a very resilient bunch, like, shit happens and we just keep putting one foot in front of the other. We have seen a few people drop off. A couple of people on stress leave now. There's been an event and there's been everything else. And, maybe they've hit that wall now. ...in health and safety we have actually been wracking our brains of how can we, what can we do for the organisation that is going to benefit everyone. But, different people have different things that will spin their wheels. And, some people, you know, you can plan a day of activities or whatever, but some people such as the building team and probably resource consents and compliance would say we can't take a day out. Yeah. And, customer services, you know, they can't take a day out so, yeah, I don't know what the solution is but we're trying to do some fun stuff. We had some activities for mental health awareness week and did some, like, staff barbecue was well received. Because, there was some alcohol, like, Suisse ball soccer out in the garden, there's nothing better than kicking a Suisse ball at someone. But, yeah, again like, only it's only good for the people that actually attend, and that can attend. I think there are a lot of people just really battling away here that maybe don't have the coping mechanisms.
- *(pākehā woman, local government)*

A few people [at work] have started, we do, call it brain breaks. And, it's, like, morning and afternoon tea time, walk around the bridges. It literally takes 15 minutes, so it takes your break and we also, so I meet up with someone. Or, if I need to have a meeting with someone that's, just informal and

we just need to have a yarn about something, like, we will do that walk if it's a nice day. So, we've tried to incorporate that. Some people don't do it but I have noticed a few people doing it. You go one way and you always run into people coming the other way. And, it's just, like, it's a cool little break, and yeah, a lot of people have picked it up that I wouldn't have thought that I would see out for a walk, so that's pretty cool.
- *(pākehā woman, local government)*

...on reflection on that, I think that the, maybe just a series of sequences of events that led up to this last one. It was almost like the, you know the last straw really and I don't know if I would have dealt with that differently. Or like, you know the stress of that differently had I not had all these other multiple events that happened over the year.
- *(wahine Māori, local government)*

How, after a massive event can an organisation heal, really heal? When you've got all these externalities that are coming at you, you know? You almost need that, I mean it's like anybody, when you're sick, when you've had something impact on you. And you need to heal yourself, you need just time and the teams haven't had that time.
- *(wahine Māori, local government)*

...I enjoyed is being able to work with different people in council... ...we all volunteered, ...so it's been really nice having those connections. 'Cause you go through that crazy time with them and then you get to see them around the halls. And you're like oh hey, like you've gone through that together and so it kind of strengthened the bond.
- *(immigrant, woman, local government)*

...you'll hunker down and, you know you'll expect there'll be flooding and all that. But it's the after when you're thinking, just the grind and grit... that's the hard part. - *(wahine Māori, local government)*

...they've got no idea what it's like to be so close and connected with your community...Like when we were going through everything, we would have meetings with. At one point we had six ministers on the Zoom with us and I was saying to them we cannot do everything. Like we cannot continue to have this put on us. We will break, we've been through so much. Oh...all the sympathy in the world, but nothing changes.
- *(wahine Māori, local government)*

I think there is a lot of anxiety within the organisation and in the community every time it rains as well. - *(pākehā woman, local government)*

I don't wanna die in my job because of underlying stress conditions that I'm not even noticing. 'Cause I wasn't sleeping, I know I'd been gritting my teeth and so I was just thinking. And I know someone that's overworked herself to death and I don't wanna be like that!
- *(wahine Māori, local government)*

In all fairness, since Cyclone Gabrielle I've had five days off...you know like I feel, I'm really mindful of the leaders of Tairāwhiti, they're just, all of them have just been through the ringer in some capacity. When you have a day off, people assume that you have a day off, but you never actually ever have a day off. - *(pākehā woman, mental health)*

Greater coordination between local and national government and agencies

I'm starting to get to the point where it feels like recovery's not starting because we're held hostage from a Crown organisation about what we can and cannot spend. And when we can and cannot spend it, so for instance right now we are 15 million dollars overspent and we do not have a dollar from Waka Kotahi to do anymore roading work. Like we are gonna go cold Turkey. With 700 to 800 million dollars of recovery work and you are just bashing your head against a Crown organisation daily to try and get funding to recover from these events. It starts getting really tense, like it gets really intense and you're like we have hundreds of millions of dollars to remediate. And you want this piece of paper now, why didn't you tell me that a month ago? And oh we've gotta wait for this board meeting for a bunch of bureaucrats to sit around a Waka Kotahi table to give me 49 million dollars to continue our recovery. It is bullshit, it is fundamentally wrong and so it rains, or we have like another event and all I think is okay, who's cut off now?
- *(wahine Māori, management, local government)*

All they talk about now is if this ever happens again, are we ready for it? Is Civil Defence going to be a lot more onto it this time around? Are we going to get help from the council this time around and jump onboard straight away without saying, oh, no, we can't do this because we haven't got the money to come in there. It's like it wasn't about the money, guys, it's about the help. If you can send one truck and help the community, well, that's something, that's showing something. But there was nothing like that. It was very slow coming and then when it did turn up, everybody else already had done the bigger work. - *(tane Māori, western rural)*

... one thing I think we would help us play nicely together was if the council got us in the room and said hey look, you know, this is what I need to have done or whatever, you know. A strong, sound person who knows what they're talking about, who doesn't have an agenda of you're my aunty so I'm gonna give you this funding and that. 'Cause it feels like there's a bit of that going on here. Just had that and we all felt safe in that space and not being taken advantage of or you only want me in here so you can pick my brain or whatever. 'Cause I feel that a bit of that happens too. Then I think there could be a better way going forward. But it comes from the top, aye, good leadership.
- *(wahine Māori, not-for-profit org leader)*

"I think the people that work in the Council as well, while we've got our own issues... We're often the bad guy.

(wahine Māori, local government)

4.2 Recovery systems / Clean-up support

4.2.1 Key Findings

- → Lots of community goodwill and support for the recovery and clean-up processes.
- → Huge volunteer efforts led by various businesses, local and national groups and organisations.
- → Coordinated efforts with good leadership were most effective, and necessary to respect the privacy, dignity and wishes of those whose homes were damaged or destroyed, and not to cause further harm or distress to residents whose homes and properties were damaged and were in various stages of shock.
- → Some communities received more support than others, particularly those with some iwi-led clean-up initiatives.
- → Some living in rural and isolated places called for greater awareness and support, or 'advocates', to try to get some clean-up support to those more remote households.
- → Some property owners did most of the clean-up work alone, often for many weeks or months after the event, and this was a physically and emotionally exhausting and traumatic experience (particularly repeatedly seeing the damage and destruction of personal items and places full of memories and emotions).
- → Some involved in the cleanup efforts suffered sores and infections on hands and legs, possibly from polluted silt and contaminants (also see 'Water and Sewage').

4.2.2 Illustrative Quotes

Community 'mucking in' and goodwill

From the live video we were inundated after that, with people who had just heard. We had trucks come from Whangarei, there was a man coming with an empty truck. He just said anyone wanna donate anything to Te Karaka, or to Gisborne? And he brought a whole cargo container, a container full of water, of period products, of men's undies and all the things that people needed out there.
- *(wahine Māori, school leader rural)*

I've just seen the greatest form of humanity from fishermen and forestry workers for the rural community.
- *(Pākehā woman, mental health role)*

...there were people who were devastated and there were some who had no, like a little bit of water around their homes. So we all had different experiences and then we were able to give more if we didn't have our own homes to look after, that hadn't been flooded. ...it depended on the degree in which people had been impacted individually. The extent of awhi they were able to give, or vice versa. - *(wahine Māori, school leader rural)*

...we had a clean up crew who were just out there, so two days after the event, maybe three days after the event, the whānau thought F it. No one's coming, 'cause nobody came, so out there they went with their shovels and started to clear out each other's homes.
- *(wahine Māori, school leader rural)*

So we went down, about a dozen of us, and we mucked in. So we bought some wheel barrows and shovels and we had guys bring their trailers in and grabbed some kai and we went down. We went to two of our staff's homes and one of our staff's gym and mucked in for a couple of days.
- *(Pacific male, first responder, leadership role)*

Lately we've been doing a lot of silt removal. Like heaps, like months on months of silt removal and there's still just more to come. My favourite thing about them is that we're growing the capacity of our whānau to be able to gain the skills, to access a truck, to access a bulldozer, to access a chainsaw and a hammer and these fences. All these things that we need to recover from cyclone.
- *(tane Māori, mahi taiao, east coast)*

Support not evenly distributed: Where is our help?

What I would've liked to have seen is an advocate come out to those really affected homes. Not just in the township but out where we live rurally where you don't have access, you've got silt all round your home .It'd be really awesome if we had an advocate that will come to us. Come to our home. Come to our doorstep and show us that you care.
- *(wahine Māori, mahi taiao, east coast)*

Like I remember after Bola, we got so much support from town and the rural community. But after Gabrielle, we didn't get that sort of help from town – maybe they were helping a bit up the coast? I'm not saying they weren't there, but in our situation, we didn't really have anybody knocking on our doors like we had after Bola. But once again, Bola was probably quite a bit different to what Gabrielle was. Everybody that was together in the community got a lot of support, got all the resources, got all the money, and the people like us, and Branson Road, you know, places that are just isolated, didn't get any support, or very little support. - *(Pākehā male horticulture, Western rural)*

Good leadership for coordinated clean-ups

It worked good because everybody went in and came out the same day. We had really minimal hazards going around. With the amount of people that were around in all these areas, it was really cool how they worked as a team, and nobody got hurt and that was the great thing about it. And the families that were working in their homes were communicating with these guys, especially because [partner's] team and Man Up were out this way and there was another group floating in between and they were sort of in between Whātatūtū and Pūhā, and the communication amongst themselves, knew where they should be and where they've got to, how many people should be in that area, spread them out and work quietly as a team. - *(tāne Māori, volunteer lead, rural)*

There were lots of people in the city all wanting to turn up with brooms and buckets and clean out houses, but what I knew was that takes a lot of organising. And talking to people who'd gone through Bola, it was like it's great all these volunteers turn up, but somebody's gotta feed them, you need wheelbarrows, you need, actually you don't need all that street with people turning up unless they're organised. So my first thoughts were let's act as a coordination point and find out what their needs are and let's see if we can get fans, get wheelbarrows, get shovels, get supervisors and get 10 teams going out to try to help people. That was the initial idea. So the first day, we had probably 200 odd people turn up. It was interesting, some of the farm people didn't turn up 'cause they weren't ready to, they were still in shock. But we had bankers, we had a lot of, you know, people from the banks, from the stock and station agents, all sorts of organisations and a lot of farmers and horticulturists turned up because they were like.
- *(Pākehā male, horticulture, City)*

Do no harm: Navigating trauma, ethical and respectful clean-ups

I had to ask them, would you guys be okay if I bring volunteers in and start cleaning your houses up and help you get all your rubbish out? Some of them said, nah, nah, nah, we'll do it ourselves, no, we don't need any help, we're just too stressed out to have people around us, and stuff like that. I had to assure them that this is what we're up to. I think a lot of them were just whakamā too. They're shy just around people coming into their homes. And being a poor town, a very poor town, and this is what needs to be said, a poor town where basically they're fending for themselves, and just whakamā, very shy to get the help that was needed, and they just cried. - *(tāne Māori, volunteer lead, rural)*

One young girl whose house flooded out, her mum wasn't home, she was very, very whakamā, shy. Very, very shy so when the team actually went in to help her, she didn't know how to take them, so basically, they were only there for an hour, she was in tears, she wanted them to leave. This is where I'm talking about how it mentally affected her and her wellness, and not having her own family there. She was on her own, mother was stuck in town, so it was like that and then to have everybody come in just blew her away, but she couldn't handle it and she just wanted them to go. Did they go back there after? Yes, they did. This is when she was actually more stable up here and they just came in and cleared up what they had to do.
- *(tāne Māori, volunteer lead, rural)*

Giving all these beautiful volunteers the rules on how we need to go in there. Not forcing them [owners/residents of damaged homes and properties]. We didn't. Just going in there with the right approach but making sure that we were safe.
- *(tane Māori, volunteer lead, rural)*

They [media] were all sort of jumping on me going, oh, can we come there, can we do this? I said, look guys, we're very limited on how much you fellas can flash around at the moment. We don't want you guys to go up to people and start talking to them and start – you know, a camera on them while they're crying and they're talking about their most in-depth feelings around things. We don't want that. We don't want the world to see that. This is a tight community, we want to keep it tight, so you're very limited in where you can go and what you can see, and we want to be able to control that without you guys going in and out of people's homes and stuff. They had to listen to what I had to say so they all sort of sat with me for a bit.
- *(tane Māori, volunteer lead, rural)*

When we went in to get her, when we went in to get her things, to try and rescue as much of what was valuable to her, photos, keepsakes, it was very difficult to do that. It was very difficult to clean. We were hearing lots of messaging from the Council about cleaning up silt. Well, you can't clean that stuff when there's no water and there's no power. She still doesn't have water or power. It's very difficult to work with the people that the Council had contracted to clean up the silt because there's some very lovely men trying to be helpful, but they didn't know where the toby for the tank was, drove over and smashed it. So they were unintentionally doing more damage than good and mum was very angry and frustrated and sad and grieving and affected by the trauma of losing her home and we were very sensitive to that. But it was also very frustrating for us, and there's no escape from it. You know, it's your reality. You live in it 24/7. You can't have any reprieve from the reality of the situation and it puts pressure on your relationships.
- *(wahine Māori, social recovery lead)*

Once the Help Has Gone: The Emotional Processes of Cleaning-Up

But imagine, you're 76, you've got two walking sticks, how are you meant to fire up a generator and a water blaster and clean your property? The onus falls on them. And I also felt a sense of expectation that I would be going out there and cleaning her house as well and I'd be shovelling silt into buckets in my gumboots, but I'm like, if I don't go to work and manage the business and I don't maintain the household and cook the meals, it's just an impossible level of expectation around what you can and can't do.
- *(wahine Māori, social recovery lead)*

We [husband and wife] emptied the house ourselves. And we tried to salvage stuff that we could. We had a few friends turn up. It was pretty disgusting. Eighty percent of the stuff is gone. A bit of the quality furniture, like the rimu furniture we've kept and restored, but most of the other stuff is stuffed. It happened so quick because we had the manpower there to do it, and both Jenny and I, I guess we were a little bit in shock. We didn't oversee what was thrown out and what was kept, so there is stuff there – I'm thinking back that, we had quite a lot of antique stuff, and we had a piano there, and a lot of stuff got thrown out in the rush of the job. We knew we were not going to get those people back again. They were very good to come in and help, and carpets were ripped out, it was all done pretty quickly really. They were friends of ours that had obviously heard. We didn't ring anybody up and ask them, they just turned up. We had help from our contractors too.
- *(Pākehā male, horticulture, western rural)*

...seeing other people in the township [Tolaga] who aren't so affected like us. I mean it cost us money, time and effort to move all our stuff, to do all our things. Makes you miss out on work and other things like that, that we do need to supplement. We do need that help. We do need that extra level of support. - *(wahine Māori, mahi taiao, east coast)*

Physical and Mental Health Impacts of the Clean-up Process

We ended up with quite a lot of sores and things on our hands, didn't we? And our legs and knees, just from cleaning up. Like blisters and things, or sores from the contaminants in the dirty silt, I suppose.
- *(womanhorticulture, Western rural)*

And then you had all the sewers coming up. All the sewers were sitting under the houses, so you had sewage all over the place. We were very limited on where we could go but we could do a bigger part around the houses but when we came to work under the houses, no. I pulled all my volunteers and said, no, nobody goes under a house until it's cleared of any hazards or risk...
- *(Māori tane, volunteer lead, Western rural)*

My team, I had 12 of my crew there from mixed ages, ages from 18, 19 to 50. Yeah, they were very taken by – there was a lot of awhi in amongst the crew, my crew especially. I think, come the second week, they were starting to feel the crunches of the community, they were feeling the affects from the health, the wellbeing, the mental states. The exhaustion, the smell, everything. I did in my project offer counselling and we had organised counselling through the Mahaki to be able to come onboard if needed. I gave my team a few days off work for them to be able to get themselves together. When we had wānanga, and after all that all happened, and we had our wānangas together and we talked about the devastation and the effects, a lot of them did talk about how it had impacted in their wellbeing, how it impacted them mentally, physically, emotionally, financially.
- *(Māori tane, volunteer lead, Western rural)*

We were getting a lot of infections, but... they had blocked the road into town. So as soon as that opened up I was running and picking our meds up and just delivering them to the school [Te Karaka] and to our Whātatūtū whānau as well.
- *(wahine Māori, Iwi Health)*

"We ended up with quite a lot of sores and things on our hands, didn't we? And our legs and knees, just from cleaning up. Like blisters and things, or sores from the contaminants in the dirty silt, I suppose.

(woman horticulture, Western rural)

4.3 Livelihoods: Farming, Horticulture and Forestry

4.3.1 Key Findings

- → Widespread work-related health and wellbeing concerns based on job losses and livelihood uncertainties as a result of Cyclone Gabrielle and repeated extreme weather events.
- → The farming, forestry and horticultural sectors were heavily impacted by Cyclone Gabrielle, and repeated extreme weather events. Many lost their homes as well as large parts of their productive land, having ripple effects on the financial and emotional health of owners and workers, and job losses for those working for farms, forestry and horticultural businesses.
- → Relationships and collaborations across the farming, forestry and horticultural sectors were important in the first few weeks, supporting colleagues and friends those most impacted. However, as the weeks continued, some of those whose farms, fields and homes were most impacted felt isolated and alone in the long process of recovery.
- → Farming and horticultural family succession planning a cause of stress and uncertainty (with value of properties impacted and the challenges facing the industry less appealing to younger generations).
- → Cyclone-related challenges of continuing operations (i.e., without water) had significant economic impacts on some of the largest employers in the region – many forests and farms were inaccessible for many months, contractors were often left to keep paying staff with no support from the forest owners or horticulturalists that otherwise rely on these workers.
- → Concerns raised about the sustainability of horticultural business in the region with weather and seasons becoming increasingly unpredictable, and roading infrastructure unreliable.
- → Forestry is another industry under considerable pressure with land instability and roading impacting workers (i.e., unemployment) in addition to questions of suitability of pine plantations on erosion-prone slope.
- → Community tensions and anger about the environmental and human-impacts of forestry, such that forestry workers experienced abuse when out in the community.
- → Concerns about the mental health and wellbeing of forestry workers.
- → Other primary sector adjacent and service industries were (and continue to be) impacted by repeated extreme weather events.
- → Concerns about the economic sustainability and workforce of Te Tairāwhiti if large employers continue to close due to weather-related difficulties.
- → Variable employer support for staff health and wellbeing post-Cyclone Gabrielle.

4.3.2 Illustrative Quotes

Farming and Horticulture: Loss of Land, Crops and Livelihood

That the potential suicide in the farming community, much of which comes from not just the fact that wool prices are down. But their problem is trying to replace fences, and what have you, how they can. - *(kaumātua, Kaiti)*

Money's getting a bit short and food's getting really expensive and there's these sheep that are running out of grass. And I had this meltdown one evening that there's too many mouths to feed, we need to get rid of some stock, because I'm stressed about feeding you... - *(Pākehā woman, local government)*

These people put their heart and their souls into planting those vineyards, building those farms. It's their life and just to see them in shock... to see them like it was in a car accident, they didn't know what to do. They couldn't really do anything, they were just completely overwhelmed.
- *(Pākehā male horticulture, city)*

It's a family farm so, hindsight's a great thing, but five years ago, possibly should have sold. But now we will have no houses on the farm and its floodable, the value is going to go down, but it's still income earning. If it's not flooded, obviously it's still quite a good income earner. And the family, we've only got three children, they were adamant that they don't want to sell and they don't want to have any proceeds from it at this stage. We did try a succession planner four or five years ago and went round and round and round in circles, so that didn't eventuate. None of them want to work on the farm. - *(Pākehā male horticulture, Western rural)*

For people like [horticulture husband and wife]... the water's gone, they've dealt with the silt, now you look at it, you wouldn't know, you know? And he said to me at the time, he said, we're lucky, you know, just further up the road, [name of farmer] lost his house... he's lost his car, he's lost a brand new tractor, two metres of water through his vineyards. [But he said] we're lucky, we've got water, it's gonna cost us a couple of million dollars, but we're okay. They're a big farming family and he's probably lost a couple of million dollars of crop, but another neighbour further up the road had drowned, so that puts it all into perspective.
- *(Pākehā male horticulture, city)*

...even the people that weren't directly impacted by the flood have been impacted by the constant rain. Like people have lost crops and plants, and income. So, we were lucky that we didn't lose too much in the way of income. We could have lost the whole lot. We were so, so lucky. We got to pick our kiwifruit and it was on the boat the next day after. We had an orchard audit. Zespri came in and we had quite a bit of criteria to do, and they looked at it and they said we've passed the criteria to pick. It was a Godsend to have some income coming in, for sure. It didn't go up to the canopy. It was below the canopy. But some of the wings, on the edges of the kiwifruit, we had to chop off, and we did a lot of ground preparation. [name] went up and planted some oats to try and get rid of a bit of the excess silt and stuff, and then we had to get bin covers and cover each bin as it was packed, moving it up into the packing area. There was a lot of a lot of rigmarole to go through, and I think the first day, they found six bins which had silt on or some fruit within those six bins had silt on, so it was obviously just the first day, because I think it had rained the day before and it was just a bit sloppy, and we're like, oh no, no. But after that they didn't find any. I think they were worried about E.coli or something like that. They said that E.coli can only survive like three days or something. I don't think it would have

been that big of a problem. But anyway, regardless, we were very, very, very lucky to get that picked.
- *(Pākehā male, horticulture, Western rural)*

From a farming point of view... we had 30 hectares, gone in one slip. And by January this year, two years down the track, we will hopefully then have diggers and dozers on the property that will get our property and culverts back to a farmable type of situation. So two years down the track, we are still struggling, and as a farmer, we are still really, really suffering and it has all made life very, very difficult.
- *(Pākehā male, farming, east coast)*

Farming and Horticulture Community: Coming Together, Supporting Each Other

There were grapes hanging on vines, water had been through the vineyard. So, we all went out to [grower name] and see if we can just pull trash out of the canopy. So half a dozen of us turned up there and a whole lot of food... But as I drove home from there I thought that I could be more effective than just pulling trash out of the canopy.... So [a group of us] had the idea of getting the horticulture community, all the land-based people together. And just (a) so that they feel that they could talk, b) they could be heard and (c) what did they need. 'Cause there were lots of people in the city all wanting to turn up with brooms and buckets and clean out houses, but what I knew was that takes a lot of organising. And talking to people who'd gone through Bola, it was like it's great all these volunteers turn up, but somebody's gotta feed them, you need wheelbarrows, you need, actually you don't need all that street with people turning up unless they're organised.
- *(Pākehā male horticulture, city)*

I've been on this river over 60 years and it did take us, me anyway, by surprise, just how quickly it did come up. Usually you've got time to sort of think about things. I had time to put some cars up on our raised driveway, but all these tractors here, seven tractors and everything we got here was all underwater, two cars written off. About two hectares of grapes been flattened and seven hectares of grapes not being harvested. Thankfully, GisVin (wine company), I take my hat off to them, they did exceptionally well... they managed to pick the top area of grapes,with tomatoes and all sorts of stuff mixed in with them. So we're very, very grateful to the mahi that they did.
- *(Pākehā male horticulture, western rural)*

We don't really have a lot to do with many people, do we? We stick to a small group of people. We're not sociable people really. Not that community minded, because we're not really within a community, I guess.
- *(Pākehā woman horticulture, western rural)*

Cyclone-related challenges of continuing operations: Costs, Disease and Uncertainty

Everyone was volunteering at the beginning... And then once we realised how big it was, it needed coordination. So during that week, yeah, we had meetings with Kiri Allen, we had one at [company]. She turned up at the [company] meeting and we had a meeting at [another company]. But then it was kind of every man for himself. Like, the big companies were trying to get water supply up and running. It was harvest. And one is their water. [Company redacted] needed water, the town supply was down, these companies had no water. But it was, yeah, it was huge.
- *(Pākehā male horticulture, city)*

We had a couple of hectares that was flattened down with the silt and the current of the river, and they went in and tried to fix it because this was sort of two weeks prior to harvest so we thought we might be able to get away and harvest it. They went down there and pruned a lot of it to take the weight of the silt off the structure. [Name] came in and temporarily sort of put it all up with forklifts. Obviously paid, but there's been a hang of a lot of good work done with our contractors throughout that process. But once again, it hasn't been voluntary, but you've still got to take your hat off to them working under those conditions.
- *(Pākehā male horticulture, western rural)*

You've obviously got a lot of disease factors come into it, with grapes, powdery mildew and botrytis. Also, the PSA factor in the kiwifruit with weather like this, and you can't get on to spray it, especially with the ground conditions. I think I've only been able to put one spray on the kiwifruit this season so far because it's just been so wet. ...we've been growing kiwifruit since 1981, and last season was the first year I've never had to use irrigation because it's been so wet. ... fine silt deposits has always made it a bit sticky as well. But once the grass grows, it'll come right. It's very fertile stuff so it's not detrimental, I don't think, unless it's suffocation for the roots etcetera.
- *(Pākehā male horticulture, western rural)*

The forestry industry impacting workers' livelihoods and wellbeing

The days after Cyclone Gabrielle, just looking out here, and there would be like a trail, oh man a huge queue of forestry logging trucks. I mean the Utes, Utes, and broken men, and I knew that they were here to see me. Yeah and so, because I'd made such a racket in that industry that I'm here, I'm here. And so they came because they copped a lot of abuse, they copped a lot of abuse.
- *(Pākehā woman, mental health, city)*

We had a whole lot of whānau that were out of work or not able to go back to work, and that was a big stressor. We've got people in forestry, a lot of our whānau were affected with their jobs as well, which was another stress on top of the fact that they also had houses that were damaged. Yes, there was a lot of anxiety around a lot of things.
- *(wahine Māori, school leader, Western rural)*

This region has done very well out of forestry. You look at community, households and communities in Tairāwhiti and up the coast, forestry's given them lifestyles that they could only ever have dreamt of. You know, and so they are sitting in this really difficult position right now because they see what's happening to the whenua, to their land, to their, you know, but that's their industry that they are in. That's actually, they've prospered from that, they've done very well within their whānau and communities from that. So actually, there's a real thing going on for those guys in forestry I think. It's a lot of conflicted feelings. And they've got a hard time, they have been getting a really hard time.
- *(Maori-Pākehā woman, city)*

They were taking their logos off their utes and the sad thing is, and a lot of our whānau has said, you know, without forestry we wouldn't have jobs. So, my ex is employed in transport and we started in forestry. But, the bread and butter of his work is transporting for harvesting things. My partner works in log harvesting. I worked for a company for a little while, without forestry we wouldn't have jobs. But, it has, like, really made a mess, and maybe we have a role to play in that.
- *(Pākehā woman, city)*

...we saw an emerging group [of concern that] was the forestry workers. So okay they couldn't do much work straightaway, a lot of them got redeployed and somehow that funding dried up. And suddenly, you know that social licence almost completely ran out in forestry. But this stage, whole trucks had been off the road for three months and they were either laying off people, or they had to relocate to another region. ... But basically we had a new set of people economically impacted, even if they weren't physically impacted at the time.
- *(wahine Māori, Iwi Health 2)*

The days after Cyclone Gabrielle, just looking out here, and there would be like a trail, a huge queue of forestry logging trucks. I mean the Utes, Utes, and broken men, and I knew that they were here to see me. ...they came because they copped a lot of abuse, they copped a lot of abuse...they got really, really bullied, isolated, ...a lot of them were too

scared to even come to our kia kaha event of 500. They were scared, yeah, a lot of them cried, more about the abuse that they copped than what they had actually endured in terms of losing their business, or house.
- *(Pākehā woman, mental health role, city)*

Concerns about the mental health and wellbeing of industries impacted by repeated extreme weather events

I think it was a lot of adrenalin. I think we were on adrenalin that first week, but we were okay, so we were able to be there for others. But, you know, it's like anything you take it on. It's on top of everything else, we had a shit growing season... There'd been Cyclone Hale. Again even though and people ask us at [company] how did we get on, you know, we're okay, but it's so much work and so much stress of the unknown. And digging trenches and pumping water away and the boys trying to get sprays onto wet ground, trying to get the tractors, everything was just hard. On top of COVID disruption of 2020, labour disruption 21 and 22, supply chain disruption, it's just cumulative. It was three years of massive disruption.
- *(Pākehā male horticulture, city)*

The economic impact in that industry, and plus then the roading contracts seemed to go to every other roading contractor, particularly those from out of town. So we had to provide some pastoral care and we're just mindful, and watching [for mental health impacts]. And we had logging truck drivers apply for Kaiawhina roles, so we've never seen that before. So they were coming into other work, everyone was looking for job, ... it was looking pretty dire for a little bit there. Yeah so I've gotta give credit to some of those contractors that really went out of the box to look at how they could keep people going.
- *(wahine Māori, Iwi Health 2)*

...these forestry guys can't get to work because of the roads washed out, they're copping a lot of flack for the slash, which isn't really their fault. I've got an opinion that the council have got a big part to play in what's gone on there as far as compliance goes. But those forestry boys, all they're trying to do is put food on the table and they work really hard. They work big hours. It's not lost on me. They cop a lot of flack from people, the community that don't know. ...So there's all those things. I suppose financially, which obviously comes down to – that's mental health stuff, you know. It all adds up to that bigger melting pot of what's going on, I think.
- *(Pākehā male, first responder, east coast)*

I'm looking at now the four big forestry places have closed down so there's unemployment. Why? Because of the slash. Where did the slash come from? That's your fault, so they're under pressure there. Now you've got a mill talking about 80 jobs, shutting down the mill out here and there's 80 jobs gone. There's a roll-on effect from this ...I mean it's obvious to see that once they did the investigation on all the slash, when they saw that guess who's gonna get it. It's the forestry and like oh, it's your fault, you know. So there's a whole raft of fall out, roll out things from that. Now we're gonna have people unemployed again, we're gonna have people with no work so there's the mental illness from that. You know, so there's a roll-on effect for everything, aye.
- *(wahine Māori, church-based non-profit)*

Economic sustainability and workforce of Te Tairāwhiti: Concerns for Futures of Climate Change

It's Spring, this time of year... normally the paddocks are all worked up and they're sown and the maize is popping up, the seed maize is popping up, the tomato plants are being planted. The squash is growing. But instead I'm seeing a lot of paddocks cultivated, but nothing planted. You know, Cedenco is basically pretty much wound-up. There's been a lot of companies retracting. Now Juken Nissho. And I think a lot of people are running out of hope. They're also seeing forestry's in trouble too. - *(Pākehā male horticulture, city)*

You've got a whole lot of industries on their knees and that's the next big thing. And people, you know, are looking at Australia. Good money, sunshine, stability, good education, good health system. It looks like that, you know, whether that's actually the reality is up to debate.
- *(Pākehā male horticulture, city)*

...the March rains of 2022, three weeks of rain. Then Hale in January, and Gabrielle, it's just like, man, this has been going for three years. I think lots of people are asking that question, is it just too hard? A lot of people are thinking about leaving Gisborne because it's just really hard. It actually is, can we still do this, can we actually still do what we do, how we've made a living for how many years? Actually, is that still possible, you know? Cedenco said it was too hard. These are companies which have been around for generations. I'm hearing companies going 'nah, nah, it's just too hard', and that's going to have a massive impact on our community. - *(Pākehā male horticulture, city)*

And livelihoods have been impacted, a number of industries are struggling. People are moving away. They're losing jobs, they're moving away, like Christchurch. A lot of people moved away from Christchurch. And I look at the ongoing impacts, and this isn't health.. But roading needs a huge investment because we've been cut off, Leaderbrand and farms, Cedenco and all these industries. I think Leaderbrand provide 40% of the country's lettuces. That's a huge need for a country our size. And they're anxious that closing that road, that food can't get through. So we've got some real big issues that have been real big issues for a long, long time.
- *(Pacific male, first responder, leadership role)*

Photo credit: Phil Yeo, Courtesy of the Gisborne District Council

4.4 Communications

4.4.1 Key Findings

- → Various concerns about emergency and evacuation communications not going out in a timely manner.
- → Calls for communication channels that work in an emergency, alerting at-risk communities to evacuate in time.
- → The absolute loss of telecommunication across the community caused significant distress as people were unable to contact whānau, and thus worried about their safety for days. Some remote rural communities were without telecommunications for close to a month.
- → Communication outages also significantly impacted the coordination of the emergency and evacuation response, as well as health delivery across the region.
- → Tairāwhiti residents away at the time of the weather event also experienced considerable stress and anxiety, unable to contact family and friends, with some demonstrating feelings of guilt and remorse for not being there during the cyclone.
- → Some felt the media representations of the event exacerbated the worry for family and friends outside of Tairāwhiti.
- → Not being able to call 111 for an emergency also caused worry for some, particularly those with disability or high health needs.
- → Communities were creative in finding ways to communicate with each other (i.e., walking or riding a horse–often through rough terrain–to check in on neighbours or family; 'bush telegraph'; communication chains up/down valleys sharing information amongst neighbours; door knocking to check-in on each other; use of radio to share important community messages; sitting in car to listen to radio; newspaper delivery to town, but not some rural areas; community briefings in rural areas).
- → Questions asked over who gets a SAT phone (i.e., schools, marae), and who funds these into the future.
- → Cyclone Gabrielle highlighted the importance of revisiting communication channels, particularly within and across key agencies (i.e., Police, First, Civil Defence, GDC, Hospital). Some organisations and community groups have invested in (or been gifted) SAT phones; many community members have purchased radios.
- → Communication was a major source of stress and anxiety during the emergency. Once people could connect with whānau, to know of their safety and whereabouts, they were able to relax considerably.

4.4.2 Illustrative Quotes

"Not good enough": Emergency alert systems and CD communications

We didn't get a warning, we just got, woke up to Jess telling me we've gotta get out. We're not allowed to be here anymore...It was like the cyclone had happened, but then they had the flash rain and a lot of built up water...the alarm went off and we all had to go to the fire brigade...it just freaked everyone out.
- *(wahine Māori, first responder, east coast)*

The Civil Defence, they'd all shut up shop about 10 o'clock and said it wasn't an issue because they sort of thought the river was going to peak, I don't know, a bit like Hale, at 7.5 metres. Twelve metres later ... Once again, there's no phone contact or any texts or anything like that. In Bola from memory, actually the fire brigade came down physically telling everybody to evacuate, but we never got any notification [this time]. I actually thought the Civil Defence response was quite bad, really.
- *(Pākehā male first responder, western rural)*

...if the communication is down, contact is impossible. I'm just sort of thinking about how it was in the past, the river network, people were checking and then they used to report back. But now they've all gone digital and things like that, and so I think the communication is not quite as good as it used to be by people that have been there and living on the river and giving reports. But we do get a notification from council, heavy rain alerts, etcetera. But once again, you've got to go online to get the river levels at but if there's no power or phone you're stuck... I'm no techno expert but in this day and age, you would surely think that they'd be able to get a receiver or repeater or something to say, well, hey, river is now 7.5m, without having to look on the computer to see what the level is doing. It should be an automated thing that comes into your phone. In this day and age, for the communication to break down, it's not good. Not good enough. In this modern age now, you should be able to get some sort of communication that is not going to fail. We need to back up. Everybody's in the loop. - *(Pākehā male first responder, western rural)*

I think with the Civil Defence and all that, I think the messages didn't get out there fast enough, especially when it hit the 8.5 mark. The level of water was way up there. Seven, you'd be knocking on doors and telling everybody to get out. They were doing that around eight, 8.5, so it was like, well, you guys needed to wake up on this one real fast. - *(Pākehā male, horticulture, western rural)*

They had no communications. Nor did GDC, nor did Civil Defence. So that was almost apocalyptic, aye. Like oh my god, we are completely cut off. And we didn't know which roads were open or not.
- *(wahine Māori, city)*

It would have been better if... we could have got a heads up, you know there could have been some sort of text everyone got, it's all coming. Come over here, or run to the hill or whatever, so we had time, because then we could have prepared for it. But we weren't prepared, so it really impacted.
- *(tane Māori, east coast)*

As you know, Te Karaka's in the basin, the lowlands, as well as our whānau at Whātatūtū are also in the lowlands. We were worried because there was no communication, there was just no way of making contact with anybody. Prior to that, I think it was that night, Civil Defence had kind of put stuff out on Facebook but not everybody gets Facebook.
- *(Pākehā woman, horticulture, western rural)*

Media communications, Newspaper and Radio

I mean the one good thing they did with communication is with The Herald. They put The Herald newspaper out with all the information on it and then they dropped. That was the one thing that I thought they did well. They got people to deliver those Heralds to everyone in the community.
- *(wahine Māori, school leader)*

But that Herald never went out to Te Karaka, or Patutahi or Manutuke. It just got delivered in town. We forgot about our people in our wider community.
- *(wahine Māori, school leader, western rural*)

Cause I was listening to Tūranga FM and telling everybody to go home. Yeah, so I listened to Matai on the radio and jumped back straight into the car and went back home. - *(Male Māori-Samoan, city)*

More FM. And he [Bevan] didn't have to, that wasn't his role in a state of emergency. But he did it because he knew that he could, he had access to it and people needed it. - *(NonBinary Takatāpui)*

I think it was around 2 am, and that's when the comms went down... I'd had National radio on the whole time. That was hugely valuable. I can't say enough about how good they were. When the comms went down and the power went down, I do have a wind up radio, and so the next day I'd be sitting there winding to get National radio...
- *(Pākehā woman, social service connector)*

Contacting loved ones

... you know got two elderly parents that live alone in town, and couldn't contact them, couldn't drive in to see if they were all right. And no way of contacting them, and people that were in that emergency response situation, people don't realise. I think they forget that they're actually family members, and you're trying to focus on the job you've got to do. But the other side of you is actually you've got all this family that you've not been able to make contact with.
- *(Pākehā male, local government)*

Not having power was okay at first, but then not having power or communication, especially for that long week. And that was the hardest, the isolation and the worry I had for whānau outside of the area who I knew would be stressing out... So the comms were down, there was no, the infrastructure was very limited. And for the mahi that I have, we already have whānau in distress, so that was gonna be heightened. - *(wahine Māori, social service leader)*

...the direct problem for people was not being able to communicate with loved ones. I think that's a really important thing for the future...it was enormously stressful. For over a week, nearly a fortnight I think you couldn't get anything.
- *(local government)*

I think for our wider whānau everyone lives away from home, eh, so they were anxious not knowing how we were. Although we did keep up with communication, but the fact that they couldn't come to help was a real challenge for a lot of them.
- *(wahine Māori, first responder, east coast)*

...that would be about five or so days after... It was, very stressful, because I've got two daughters here and families. And they couldn't contact me, I couldn't contact them. And the only reason that I got, found out what was happening was my daughter managed to go down to the airport and get out through a Starlink. So she asked me to bring back, if I could, a couple of Starlinks, milk and bread, which I did. But they were in tears –... didn't know what's going on. My daughters couldn't contact me and they were in tears.
- *(pākehā male, first responder, western rural)*

I couldn't contact my family. I had to couch surf in Wellington for a week before I could drive home, gathering money from friends to distribute to friends here who'd been affected. I came home with hundreds of dollars and a car full of groceries. And the utter relief at finally being able to find out that my family were okay.
- *(Pākehā woman, east coast)*

I think the worst part was that when we did make contact, 'cause that was like four days after... most of our family that weren't in here, they all thought that we were dead. 'Cause everything that they saw on the news was bad things and they couldn't contact us and then when we did contact them, they were so happy and they were telling us like we were getting so worried, we thought you guys were dead. 'Cause they were just like, yeah, the news was just showing everything like bad – And it didn't show that people were still like alright, really
- *(Pacific woman, rangatahi)*

... It's like three, four days later when finally I did manage to make contact with people out of my immediate community. It was like they were just breaking down and in tears, like you guys are devastated, we know you live on the river. Like rah, rah, rah, we were just like the media never said, they never said there were no fatalities. So people created this story in their head, and like in my mind it seemed really cold when I rang people. And was like hey, just ringing to see how you are, you know I'm okay. And they were just breaking down on the phone and I'm like what's going on? And it really wasn't until like months later that I understood when I was able to reflect with people... That story was never told at the time. So it created this environment worldwide of like hysteria... it was bad, but they'd made it look extreme to what it actually was. And I've mistrusted, there's so much I see on the news since then... I don't see, the general media is a reliable source for accuracy for a lot of that stuff, at these extreme events.
- *(wahine Māori, local government)*

111: Emergency responders offline

You know where everyone was pulled out and they all had their jobs, you know, 'cause even the fire brigade were living here, 'cause their station was flooded. Yeah they were on premises, yeah for anything else that needed them. Because during that time they had no comms, so no one could ring 111 if someone had a heart attack.
- *(Pākehā woman, specialist health role)*

I found the hardest thing for me living alone was no access to 111. No access to emergency services. So I sort of felt like if anything happened say in the middle of the night or if someone was trying to break in or something like that, you had no access to ready assistance. - *(wahine Māori, disability, Kaiti)*

Backup systems

Once we'd gone and got the comms coming through, this [Waikohu Clinic] was pretty well much up and running. '...and what we did have was access to transistors. We had our RT. Certain people had them and we could still talk to one another. we've got an RT base here and that talks to our main office and some of the vehicles have got RTs in them. So we were able to do the comms that way. - *(wahine Māori, Iwi Health 1)*

For power, that was severed. The telephone line was severed, severed meant at the river, where the river damages the road. The cables have to cross that same river and it was severed there. So the isolation for telecommunication was probably about a month. Hence that's why we, that's why we required some assistance in looking at the Starlink to try and prepare us for the next event that may occur. So yeah we were severed by communication, there was no, no outside contact with us. - *(pakeke, east coast)*

I was alerted to the fact that you needed, we needed communication. And I heard about Star Link and they were, the police were going to Noel Leeming to seconder all of them, but I got there first. So I got a Star Link which was great.
- *(Pākeha woman, social service lead, city)*

Telecommunications and infrastructure

What do we do? And no ATM's. That caused a lot of stress. The queuing. It felt like COVID level four, worse though.... without no telecommunications at all! - *(wahine Māori, medical clinic, city)*

So when you wake up the next morning and there's nothing on it's like – No power, phone, nothing. ... I'm somebody who holds back tears. But it does make my nose get a little bit kind of twitchy and wanna cry because I think the comms thing was huge.
- *(wahine Samoan-Māori, social service leadership, city)*

We had no contact, let's not forget that, this was unprecedented times. We had no internet, no cellphone coverage, no power, no means to communicate nationwide and even within, as Tairāwhiti, and that was a worry in itself. We had power initially, then we lost it So yep, my wife ended up contacting the kids in Hawke's Bay and then we lost contact but we were happy that, actually, they were okay. They weren't in the Napier area. - *(Pacific male, first responder, leadership, city)*

Probably the biggest thing was around communication, not being able to kind of talk to people...not being able to use the phone. You had to go and find people and just check that they were okay... - *(Pākehā woman, school leader)*

There was a lot of mixed communication and a lot of double ups as well. So there were things Aunty Char was doing and Ngāti Porou were doing and I was doing because the communication lines were not clear and worked out. So there was a lot of why are you doing that? Why are you doing that?
- *(Pākeha woman, social service lead)*

Where's the warning signal for people that are trapped? And elderly people and those with disabilities should be on a priority list. Everything should happen to make sure they get out and get safe. It's probably something as simple as a sign on the letterbox or something. You know, 'in emergency do you require assistance, yes or no', and colour coded for people that have different levels of need or something.
- *(wahine Māori, social recovery lead)*

Creative communication within communities: Horseback, knocking on doors and briefings

I was really worried about my daughter and my son-in-law. And my two mokopuna who live at Kaiaua and the road was closed, we couldn't communicate. And I went to my son-in-law's parents, we drove to their place and asked if they had had contact and they hadn't. And my daughter's father-in-law eventually rode in on his horse because the road was closed. So he went across the farmland on a horse to check on them, and they left a note in our letterbox saying that the kids had been sighted, they were high and dry and all was well. But that was a very tense five days trying to imagine my daughter with a three year old and a nine month old baby and what they would have and wouldn't have. And with the power out, there was only so much food that would last in the freezer. - *(wahine Māori, social recovery lead)*

I think what sort of threw me right from the beginning was the no communication. And it was right back to the good old days of hop on a horse and go and get the info.
- *(Pākehā woman, social service lead)*

People were driving around town but they were trying to get news...It was just chaos. People were trying to drive to each other just to get, 'are you okay'. - *(Pākehā woman, east coast)*

The road closed both ends and you can't go either way, but on that day we were closed even from both neighbours... So everybody just went to the neighbours they could reach and they passed news, like it was bush telegraph, so everybody knew what was going on. - *(Pākehā woman, local government)*

Word of mouth aye. 'Cause there was no coms so there was no message on the Facebook 'cause there's no internet. So you had to walk everywhere to find that stuff out, yeah.
- *(wahine Māori, school leader, western rural)*

And we didn't know which staff were going to turn up. We couldn't get hold of anyone... 'cause no comms obviously. That's what caught us out. And I was talking to staff and just saying whoever can turn up just pass it on, pass it on. And we managed to get it out to a few people.
- *(wahine Māori, medical practice, city)*

Like in event of an emergency, yeah, the radio was there. Oh, Bevan (MORE FM) was amazing. He was going hard. He was reading messages out. People were dropping messages to the door. That's how the principals managed to organise a meeting.
- *(wahine Māori, school leader, western rural)*

I think one of the better things that worked really well was the daily civil defence briefings that we had at the rugby club. That was well attended. You'd have 100, 150 people at that, and they went through everything. It was well organised. There was good information disseminated at that, and they were also good at cutting off what I call stinky thinking that would come through...What was good about them was that it was a thing to do every day. It was seeing other people. Therefore if you were a bit isolated, you bumped into others. (east coast) I heard there were maps in the Gisborne District Council, but if you can't get there, how do you see that information? They should start right from the beginning. What we should always have – the best piece of equipment that we had was a battery radio and that was given out by Tūranga Health in their boxes, their health boxes. And I think if communication, if that sort of updated – yeah, you have to have a central means of communication. Back in the day, we used to have a really neat health and safety person that used to go around our community with a loudspeaker. It was the best, we miss him. Communication is so vital. And with the elderly, they always listen to the radio. So lucky we have a radio station ... Bevan, he was on the airwaves. We needed that. That's critical.
- *(wahine Māori, social service provider director)*

Investment into robust communications systems: Whose responsibility to fund?

Lack of communication is the biggest one, But the way we communicate as New Zealanders, needs reassessment mammothly.
- *(Pākehā woman, mental health, city)*

...they've given me a Starlink for here... Yeah the Civil Defence, but it's no good here because it's gonna, I was hoping to use it with the school. So the school could use it and we'd, you know, but it's $180 a month. And we would have to pay for it, but we've got no money. The school can't afford that, we could get it out here and the Civil Defence would pay for it on events for a month. But they couldn't guarantee that... So I've got to go and see him and say well no it's no good to us... The communications is the thing that is effecting people's health. Not knowing what your loved ones are doing.
- *(Pākehā male, first responder, western rural)*

COVID prepared us for working remotely and doing what we could do while the weather impacted us, but the comms was key. Not being able to communicate I think you'll find that becomes a recurring theme at a very high level. Even coordinating responses, that was a massive failure of our region to have a resilient communications system. I was really worried about my daughter and my son-in-law. - *(wahine Māori, social recovery lead)*

Photo courtesy of the Gisborne District Council

"I think what sort of threw me right from the beginning was the no communication. And it was right back to the good old days of hop on a horse and go and get the info.

(Pākehā woman, social service lead)


Photo courtesy of the Gisborne District Council

4.5 Roading

4.5.1 Key Findings

- → Damage, destruction and ongoing/delayed repairs to roading continues to cause much stress in residents' everyday lives (i.e., uncertainty of if/when roads are open; unpredictable and extended travel times), particularly those in remote communities.
- → Roading continues to impact decisions around the logistics of getting to/from work, schooling, visiting family and places of cultural significance, and leisure activities; all impacting people's feelings of connection, belonging, identity and thus wellbeing.
- → For those in rural or remote areas, roading is critical to their wellbeing. When roads remain unrepaired or with repairs delayed or prolonged, this can make people feel unseen, unvalued, and less important, impacting their health and wellbeing.
- → Anger and frustration over roading priorities and focusing on economic values (economic productive roading). Roading needs to be reconceptualised as a humanitarian issue, a key lifeline for people to be able to live health and well lives.
- → Roading is a health issue as it i) indirectly impacts quality of life, and community health and wellbeing, and ii) access to/from health and emergency services.
- → The longer roading repairs take, the worse the health impacts on people's mental health, stress, impacting their ability to live a productive and connected life.

4.5.2 Illustrative Quotes

Roading is a key lifeline for community

...she's from up the coast. And she said they just don't go very often now because there's, the roads are so terrible or there's the fear of getting stuck, that you won't get back because of the traffic, you know, the weather. She said, she was talking about stresses in people's lives and she's going, you know, knowing that the road north through the Waioeka Gorge is closed and if you miss those windows, you're gonna be parked up for four hours. She said just the stresses of all those, yeah, she just sees those examples of stress. And for her, and trying to get home... And whānau not being able to connect as much because of those issues.
- *(Māori-Pākehā woman, city)*

...we're completely reliant on a landline which went down for a month during the cyclone, and then the road, one particular corner is still bad, it completely collapsed and was falling into the river. There was just a tiny strip to get around and you never knew if you were going to get trapped in or out. Every day you go to work and you don't know if you're coming home. - *(Pākehā woman, local government)*

With my health, if we got stuck up the Coast, I wouldn't be okay, 'cause there's not really health, you know spaces there who'll be able to look after me. And so yeah I have just not been able to go home, it's also part of the reason I wanted a four wheeler, so I could get home.
- *(Māori wahine 2, Gisborne City)*

Remote and isolated communities

So sitting on this side of it in council and ...trying to deliver what is going to be suitable for people of the coast versus rural people in the city ... we've been all over the place, and we haven't even touched on every single part of our roading network, and it's all fucked. ...making sure that we're getting the roads that need to be repaired to get the community back, like, in touch with each other. We still have people that are cut off to a point, and that's just not okay, but when you have such a large network of roads. I just, I don't even know how you prioritise it. That is the big money stuff.
- *(Pākehā woman, local government)*

...even the man that brings the gas bottles up to us, he can't even come. So he doesn't come up, so we've gotta go truck it in your car, those big gas bottles, you know. You're not supposed to, aye, put it in your car, go to town and fill it up. But what do you do, aye, when your bridges are closed?
- *(wahine Māori, mahi taiao, east coast)*

So for the period that the road was down, and waiting for the contractors to come out our way. 'Cause the priority is always the State Highway first. And then these side country roads come later ... we could be waiting a while if our State Highway requires all of the resources to go there. It took a week and half for them to come and start fixing the road. Well most of us were trapped this whole time, some of us were able to manoeuvre through paddocks and get four wheel drives out.
- *(pakeke, east coast)*

Roading is a humanitarian issue

Oh we've gotta wait for this board meeting for a bunch of bureaucrats to sit around a Waka Kotahi table to give me 49 million dollars to continue our recovery. It is bullshit, it is fundamentally wrong and so it rains, or we have like another event and all I think is okay, who's cut off now? We, I, you know contact... it's this size, it's this scale, I think I'm going to need two to two and a half million dollars to get crude access for people. Like that's motorbike, that's horse, that's whatever that crude access is. Can I proceed? So everything we do is unfunded, and I just, people don't understand that this is all held hostage by Crown agency. So in terms of my work, I don't, like for me I'm like oh, the rain, whatever, the rain, it's what is the community impact? How am I going to respond to this so that there isn't loss of life through chronic like long-term impacts of lack of access and all that kind of thing. And then the grind starts when the paperwork comes through and then you don't. So, you know we know there's six billion dollars for roading recovery. I can tell you here and now, every single local government agency up and down through Hawkes Bay, none of us have money, no one has money. - *(wahine Māori, local government)*

... roading is a humanitarian issue, people don't see it like that. They see it as more of a, like a nice to have, it's not like a fundamental lifeline for people to live their lives. It's like you should be grateful you have a road... Waka Kotahi, you know it's like oh well they won't get that back because there's no economic productivity of that. You know fill out the SP2 form, okay that didn't give us an economic benefit. And we're like of course it's not, it's multiple owned unproductive Māori land because of an institutionalised world. That like now we're gonna cut off their roading access, what is this land ever gonna do? And so you're like, you've got people that can't function because (1) their productive land has been, like access to their productive land is cut off. But then to double down on it, this world view that's come out through government policy is so bent on economics. That we're alienating people from their land, but I have such a different view, ...this is the stuff that when we have compounding events, hits me. Where are our people moving to? Where can we build a new road because they can't access that road anymore? Can we build a new road for papakainga development? Can we support this? Na, because there's no system for that to happen, there's no system for it to happen.... Let's shut that road... Yeah let's shut that road and all we get told every other day from the government is that road isn't economically productive anymore. And I'm like okay well if that one's not, can we build, can we get money to talk to these people, either (a) try and keep that one open. If you're saying they're gonna be in the sea and all the rest of it, where can we go? Like let's talk to them, where can we relocate them to, where can we build new infrastructure? But that is not anywhere in the process of the world and it's just. I call it institutionalised because that's just generations of specific thinking that's made its way through to our transport system and that's what it means. - *(wahine Māori , local government)*

Roading and Cultural Identity

I still haven't been home. When you say "hoki ki o maunga" we can't "hoki ki o maunga" we can't go back to our mountains, we can't go back to our rivers. And if we're going to, if there's a hui on it's like hmm, am I gonna get stuck up there, you know? It's huge, the impact that the weather has on the coast especially, yeah.
- *(Māori wahine 1, Gisborne City)*

Because of the roading, I think it's quite hard for me, 'cause like I haven't really been able to go many places because, health-wise. But now with the way the Coast has been impacted, I haven't even been home in so long. I'm someone who tries to get home at least like two or three times a year. We go to our marae, we do a working bee, we clean our whare, we, you know look after our urupā. We go and care for our whenua and we care about it so deeply, it is part of us. ... 'Cause that's our whenua, our whenua, we are part of the whenua, so not being able to go home, not being able to put my feet in my ocean. And just wash, you know like horoi and just whakatau myself, has been really hard. ... And I think that impact is not felt just by me though, that's the other thing. Like I'm one of many who can't get home, and it just hurts, like it actually just breaks your heart. It's so painful, it's like grieving a place that you can't go to. And I think that's been like the biggest impact I have seen with my little community, it's just not being able to go home and put your feet on the land and get, you know ngā hou a Tawhirimatea (Return to your mountain to be cleansed by the winds of Tāwhirimātea / Māori god who controls the winds) and all those things. Those things that refresh us, we will do it at least once a year, 'cause we're like I'm sick of the rat race, I need to go home. I need a refresh, I need to be okay again, but just haven't been able to do it. And we don't wanna put anymore stress on the infrastructure up the Coast.
- *(Māori wahine 2, Gisborne City)*

I think [roading up the East Coast] is an issue for me... I actually have not been anywhere past Makorori. And it's kinda like a trauma now for me, I'm confined. If there's any kaupapa that are happening [up the Coast], I will dodge it and that's really pouri. Now that it's coming out, as we're talking about it, yeah I've realised that I've put like a mental block of "I'm not travelling up the coast". 'Cause I probably might get stuck up there, and so yeah that's terrible. - *(Māori wahine 1, Gisborne City)*

It's a hard thing to come to terms with, when you're like "wow, I haven't been home in so long". And I haven't been to a tangi up the Coast because of that [roading] too. And we've had marae hui and all sorts, and I haven't been able to go. I think that's been a massive impact on most Māori people and I mean we're literally called Wiwi Naati. There's not many of us who actually live at home. That makes a huge difference too. - *(Māori wahine 1, Gisborne City)*

Quality of life impacted

It's that isolation and I think the realisation that this area could one day be fully cut off. There is not the money or the infrastructure to re-fix those roads, there just isn't. And it will take years, decades, so it's almost. We won't see it in our lifetime. It's almost too late, which is a bit sad really. And also, okay what I have heard, people are thinking of leaving 'cause they're over it... Being cut off and not knowing if it rains oh god is the gorge open? Are the roads to Napier open? We know the coast is totally [wrecked]...Everything takes 10 hours to get to, so. - *(wahine Māori, medical clinic, City)*

It's been six to eight weeks. If you didn't have a four wheel drive then actually nine weeks before the Bailey Bridge was opened. But the last two weeks we managed to stand up convoys and so we'd drive people around the back roads into Gisborne. That would only give them two hours [in town] because a round trip would take us between five and a half, and six hours.
- *(wahine Māori, first responder, east coast)*

They're trying to fix it at this stage but the bridge is still closed because Downers has got that contract. You ring the Council and they can't give you a definite answer. It seems like having a visit up there with some scientists and listening to discussions that, and management, there's not enough korero to each other on who's doing what and what contract to make sure that these jobs are efficiently done for access for our whānau, yeah.
- *(wahine Māori, mahi taiao, east coast)*

4.6 Water and Sewage

4.5.1 Key Findings

- → Prolonged water outages had widespread health and hygiene effects.
- → Clean-up and recovery work was further complicated without access to water.
- → Communities and organisations (incl. health) found creative ways to store, use and share water.
- → Local businesses were heavily impacted by Council water restrictions.
- → Sewage leakage and contaminants caused health issues for those in affected communities (i.e., infections, sores) (see 'Recovery systems / clean-up support').

4.5.2 Illustrative Quotes

Without water: Health, hygiene and recovery

We had this problem of our sanitary system, our toilets were not working well and our water was contaminated as well This we had sickness within the family. Some of us were affected and we were just not prepared. - *(Fijian, city)*

...they were cooking with the water and they got sick. They weren't drinking it, they were boiling it, but they were cooking with it and so they got sore pukus. So that's where the kai came in handy. So we were giving out all the frozen meals, you know. Don't cook, don't cook, here. 'Cause we had someone giving us water from their rain tank, so we were cooking and washing with rain tank water.

So a lot of our meals in the month after were for people who, just the water issues. Yeah, and old folk. - *(wahine Māori, church-based non profit)*

Health and safety became an issue because, you know the town doctors started coming out and telling us we were gonna have a breakout... we're gonna have the runs... everyone's gonna get the shits. You're all gonna start spewing soon... Well that never happened, we didn't get an outbreak [because] we had real strong hygiene practices; wash stations for people's hands if they were coming in. If you'd been in the silt you had to have a washdown... most people coming in for kai had been in the houses, you know cleaning them out. So there was a high risk of infection, but we never got it. - *(wahine Māori, school leader, western rural)*

Photo courtesy of the Gisborne District Council

... the water wasn't just a simple reconnection, her tanks would need to be emptied and cleaned. They're full of silt and contaminated water. That was a task that was too big, too hard so she didn't get access to some of the support that appeared to be available for people in her situation. So yeah, the water and power thing. You can't clean when there's no water and no power.
- *(wahine Māori, social recovery lead)*

I just made up some siphoning tubes out of our tank and the neighbours one with a tap on the end so they could fill up with water and use it, but then issues like showers and so on become a problem because you can't shower without pressure.
- *(Pākeha male, east coast)*

It was a challenge. And we were constantly thinking about it and constantly trying to do our part too, to make sure we weren't adding pressure to the network. So, you know, not flushing every single time, not washing clothes. You know, capturing water in buckets to pour down the toilet, all of that. Buying water, that was a biggie. Felt like forever 'cause then it came back but it was still filthy. It was like running brown. I couldn't believe that. You know, okay power, yes, internet, yes, that was hard. But water, not having water was a whole other level.
- *(wahine Māori, city)*

...you had to have a water plan for the council. They asked you to have a water plan, but we were, they had a graph and you had to be, they put a structure in, if you had a, yeah, if you had a bakery, then you were like medium users. High users weren't allowed to use water, so they had to close all the way down. ...if they showed up, you had to justify how you were using your water. They just wanted to make sure you weren't wasting it.
- *(wahine Māori, business owner, city)*

Sewage, contaminants and hygiene

So my husband got in there with the diesel and the sewage, because there's underwater sewerage, so when the water came up that water is contaminated with agricultural chemicals and all of that stuff. So it's really nasty and toxic, you don't want to get it on your skin.
- *(wahine Māori, social service leader, city)*

Because of the sewer came up and all that, a lot of the elderly were affected by that sewer, the smell, the fumes coming up under the house. Just gave them breathing problems, kids getting sick because they're running around touching stuff. It's the smell. They'll touch, eh? You couldn't tell them – you had to tell them a hundred times, don't go there, don't touch it, but kids are kids.
- *(tane Māori, volunteer lead, western rural)*

4.7 Housing

4.5.1 Key Findings

- → For those whose homes (1800+), properties and businesses were directly impacted by various extreme weather events (i.e., Hale, Gabrielle, June 2023) and land instability (i.e., slips) has caused, and continues to cause, shock, stress, anxiety, grief and sadness.
- → As well as damage to property, loss of sentimental and personal items due to silt, sewerage and health risks was also very upsetting.
- → The delays and confusion with Council assessments, and Insurance, have been exhausting and difficult for those affected. The slowness of response exacerbates the health and well-being impacts and mental health. The longer it takes for decisions and payments, the worse the health impacts on people's mental health, stress.
- → Some residents impacted by damage and destruction to their property and enduring a delayed and frustrating process with the Council, felt that more psychosocial support should be available to those waiting for decisions, or whose homes have been labelled red or orange stickered. While some support was available, few knew about this and thus felt they had to manage the chronic stress themselves.
- → Renters also experiencing difficulties of houses needing repairs, but owners waiting for insurance, but still expecting tenants to keep paying rent to live in a damaged property.
- → Council/government processes and decisions not always respectful of Indigenous ways of knowing land and home (see 2.4 'Māori').
- → Some have been hurt by unempathetic comments that place blame on those whose houses were impacted (i.e., 'your fault for living in a floodplain'; 'your fault for building by a hill') even when councils had previously approved the land.
- → Many concerns for the future of homes and properties (i.e., land instability, future floods, the value of properties and thus financial wellbeing, productivity, security).
- → Many people and families continue to live in temporary housing (i.e., hotels, rentals properties) away from their own communities, impacting their social connectedness, as well as logistical considerations of work and schooling.
- → With a housing crisis, finding more permanent accommodation is difficult and causing stress.
- → Displaced persons living with whānau can add additional pressure to those homes (i.e., crowded homes; living in garages), with increased financial and psychosocial impacts on families.
- → The urgent need for building consents and housing planning to align with the latest information, and to be more responsive and resilient to the changing environment (including increased risk of extreme weather events and associated risks of flooding, slips, road damage).

4.7.2 Illustrative Quotes

Stress and anxiety for thousands with effected homes and properties

So large swaths of the community, so 1800 houses, are still dealing with Hale, Gabrielle... 1800 are in category two; 1000 have been just taken out, leaving about 750, and then there's 50 or 60 who are category three. There are people in category three who want to be in category two, so there's a huge amount of stress out there for a minimum of 1800 households, which is thousands of people.
- *(Pākehā woman, social recovery lead)*

From my house, we have had so many huge swells, and all the big logs below my house at high tide, they just smash into each other and smash into the bank. To the extent that it shakes my house, and that's pretty disturbing.
- *(elderly Pākehā woman, coastal)*

...two metres of silt which cracked, but then it was dead flat – everything died, all the Kawakawa and the ferns all died, smothered by the silt... Then the trees started falling over, and then the land has done this amazing thing where instead of being dead flat to the river, ...it's waving, because it's falling from the bit that holds our house up, so the bottom of the cliff has fallen away, and then it's sliding to the river. And so we think we're about more than a metre, maybe two metres into the river that we didn't used to be. Like I say, if you put a camera on it and sped it up by a thousand times, you would see a lava flow, as the land is flowing into the river and it's taking away the foundations of our house. - *(Pākehā woman, social recovery lead)*

I know certainly for myself there's certainly been levels of manicness, and I reference the drain [of stress and emotional exhaustion]. And that lying awake at night with your head just spinning.
- *(elderly Pākehā woman, coastal)*

That's what I've got to get my head around, is that not living in the family house... Yes, my father built that in 1952, 53, and that's about the year I was born. I guess that's been the hardest thing, letting go of the house. Well, been there a long time... But just sitting out on the deck having a coffee and seeing the view, it was a nice place to be. It's the way of life too. You know, I could get up early and go and do some stuff on the farm, and come back if I get wet and cold, have a shower... have a cup of coffee or breakfast with [wife], and I can't do that now. That's going to be a real issue for me anyway. So I've got to get my head around that a little bit, and, as a mate of mine says, turn the page.
- *(Pākehā male horticulture, western rural)*

You know we can get over it, but, you know it's just what it's done to the people eh? It's affected them, the loss eh, it's just like, you know some of them can't go back to their house. And it's apparent, you can see it...we've just gotta find a way to move on. It's just coming up with innovative ways to sort of help deal with the situation just for the people.
- *(tane Māori, east coast)*

It was a mess, the water had gone in, right up over the windowsills, over my bench. It was, I lost everything, I lost everything. Yeah the sink, the bathroom, everything, all my belongings. They're just covered in silt and there was sewerage, so you couldn't keep anything, okay, 'cause of the health risk. - *(Pākehā woman, western rural)*

There's actual shock that can give you physical symptoms and you're trying to make your logical brain work with something. But even when you're saying 'I'm fine, I can do this', but you're actually in shock. - *(elderly Pākehā woman, coastal)*

We're yellow stickered, but I'm just camping inside my house. I don't even know if I'm supposed to be there, yeah. We've got a toilet, a shower, I've got a makeshift kitchen and we've got a bed.
- *(Pākehā woman, western rural)*

"An ongoing frustration", waiting and uncertainty: The Stress of Council and Insurance Assessments

We had staff whose homes were damaged and they were all feeling the same mamae, anxiety, depression. And, you know going through the angst of the insurance bloody companies, who have, you know some of our staff have only just got their first kind of lump sum payment [9 months later] just recently. So it's been a long time, you know trying to itemise everything, 'cause you have to itemise everything. And it was just stressful really. - *(wahine Māori, school leader, western rural)*

She's got a beautiful pole house...But she's on the side of a hill and the house has been red stickered because there's a great crack in the hill behind her. She's had to move everything out of her house, you know there are so many people I know who are absolutely traumatised by it. There are people who spend every waking night wondering what insurance is going to say to them when they finally, what sort of payment they're gonna get.
- *(kaumātua, Kaiti)*

For the people that are still displaced from their homes, and that are waiting for offers for the buyback and everything. Yeah, it's just a really, really unsettling time for everyone and I'm very fortunate to not be one of those people. I just, I can't imagine, and for people that have paid insurance all their lives and their insurance company's are just, they've really just gone silent on them. Hoping that the government and the council come to the party and they can get out of it, 'cause that's what insurance does. They're looking to get out of any sort of liability. That's their business and that sucks for people, it really sucks, and people for a long time, council hasn't been able to give answers either. 'Cause, it's all been sorted out at central government level, and it's really hard on the staff and it's even shitter for the people in the community that just, they just want to know what they need to do. - *(Pākehā woman, local government)*

...they have to wait for the insurance to pay them out and then Earthquake Commission pays them out and then the council will top the rest up to market value of what the house is worth. But, so it's just a waiting game to see how quickly the insurance moves...
- *(wahine Māori, business owner, city)*

It's hard too, because we haven't been paid out for this house. We've got some insurance money but in the meantime we've got a loan. We did need somewhere to live. It's not what we really wanted, but it's a house. It has been forced upon us, I guess. Yeah, which doesn't feel crash hot. We'll make it our own place. I guess if you have a farm or a house in a floodable area, then you have to expect these things. But I guess our biggest frustration has probably been the insurance and having to battle with them. It's not so much the time. It's constant communication backwards and forwards.
- *(Pākehā male horticulture, western rural)*

She's been backwards and forwards, backwards and forwards with different people giving different advice. She's had a scope of works completed three times, it's still not finished because she still keeps telling them of things that aren't included, that need to be included, before she'll accept any offer. Then the worst part is that the insurers have told her, 'we've insured your property, our agreement is that we'll rebuild your house to what it was before the event'. She doesn't want to go back there because of the trauma of what happened, the likelihood of it happening again, a lack of confidence that the Council will do what's required to clean up and put effective stopbanks in place so that it doesn't happen again. The things that she lived for and worked for on her property were her gardens. They're all dead. Her trees are dead, her roses are dead. All of her planting and her life's work is gone so there's nothing tying her to the home that she's built for herself...
- *(wahine Māori, social recovery lead)*

...every day I'm thinking about what's happening, you know, next phase. Like I've engaged the insurers and that's a longwinded, complicated process where you've got geotech, you've got valuers, you've got structural, you've got this, you've got that. And then they've all got to write a report, and then it gets peer reviewed...And the lady said to me, well in a normal situation it could be resolved within six months, but yours is not normal. So I'm assuming this is going to go on for about a year. - *(elderly Pākehā woman, coastal)*

So for the last four months, I think we've had six engineers... as well as our insurance, and then because we have been categorised three, DPMC have got independent engineers who are checking on the work of council for the categorisation for the buyout anyway. So, we've had six engineers crawling all over the place...
- *(Pākehā woman, social recovery lead)*

...it's the ongoing frustration. I guess that's it too, knowing that we've all probably got a fight ahead. I don't want to fight. I fight every day in my job, I don't need to fight...I just want to drink gin.
- *(elderly Pākehā woman, coastal)*

All the communication about where everybody's properties have ended up after the event, it's been pretty loose shall we say and inconsistent.
- *(elderly Pākehā woman, coastal)*

...it's also that uncertainty around I have no idea what I'm being offered. Is it going to be enough going forward? Where am I going to live? What will I be able to afford? When will this happen?
- *(elderly Pākehā woman, coastal)*

At this stage, we're sort of in limbo because we don't know the answers to the questions. If we knew the answers then we'd be able to make some plans.
- *(Pākehā male horticulture, western rural)*

...after seven months later, we've finally been finalized, only within the last three weeks. I guess we're lucky that we've had the time to be able to deal with that stuff because, if you had three kids in the house and you were trying to get them to school or sport. Or if you had a full time job. That would have been a nightmare. It's probably been a full time job.
- *(Pākehā woman, horticulture, western rural)*

... there's two gaps. So your insurance covers your house, and it depends on whether you kept your insurance up to the level that the house is currently valued at, and pretty much everybody's been caught out by the way in which property prices have rapidly risen. But the second gap is that, of course, doesn't cover your land, and EQC covers your land, but EQC only covers your land, to within eight metres of the house. And so if you've got a big section like us, there's a whole square meterage which is not covered by EQC, that's part of the value of your property, which is not paid for. So the buyout will top that stuff up. So, we're grateful for that. - *(Pākehā woman, social recovery lead)*

Blame, shame, fear and the need for psychosocial support

We weren't mentally [ready], couldn't be bothered chasing up insurances straight away and things like that. - *(wahine Māori, mahi taiao, east coast)*

We all wander the beach. I often reference it as the Makorori meeting when we'd all stand on the street and work out what's going on next...Nobody could predict a future. There was no certainty about anything. - *(elderly Pākehā woman, coastal)*

I haven't even seen on the Council website anything suggesting that the Council might fund, for example, some counselling if someone wanted it. Or somewhere confidential you can go to just to talk. I mean that's the kind of thing that an employer would do, or should do.
- *(elderly Pākehā woman, coastal)*

One of the families here who are red stickered and are losing their home who have gone elsewhere, and they have heard nothing from the Council since they had to leave Gisborne 'cause they had nowhere to live. Nothing.
- *(elderly Pākehā woman, coastal)*

This is what happens currently; there's lots of blame for people. 'Well you built your house on a flood prone area"
- *(wahine Māori, social recovery lead)*

I think we're a unique community in that we do operate like a village and it's a very rare thing. Like a lot of beachside communities are holiday places where people come and go. But a lot of us have brought up our kids here and had this long, long term association with the place. And I think for a Pākehā community, to have this kind of association and depth with each other is a unique situation. But there's kind of an attitude out there of 'oh well, you're all rich out there anyway' and, you know, 'well what were you thinking building on a hill out there'. And 'you've all got more money than sense'. And just this kind of dismissal of the fact that it is our community and it is our home and we're going to lose a tenth of it or an eighth of it or whatever. And I know it's a bit of a first world problem to feel hurt by that but I just find, it's like there's an empathetic deafness out there.
- *(elderly Pākehā woman, coastal)*

Eight months on and you feel like you're just left on the backburner. I don't know if farmers or whoever, landowners can afford to replace or redo these things, or if they've got cyclone funding or not. We rent the place, so it's part of the package, my partner being on the farm. We do feel forgotten about. - *(wahine Māori, mahi taiao, east coast)*

Unstable land and moving rivers: Concerns for the future

There's quite a bit of land around, property and land, and it's just been devastated, which has affected, you know the quality of our land, the productiveness. It's just affected us in so many ways, you know even taking our properties, ruining our houses, the roads, the grounds. You know it's stopped everything... - *(male, east coast)*

..there are people this week who are going into category three who didn't know they were in category three, who were dealing with landslides. And that's why you're right to talk about the weather rather than Gabrielle, because, as I say, ours began in the June rain. So the cracks were there in March, April. In June, we had another emergency, and so in that three, four days of heavy rain is when the bank fell away and it fell away under our house. So for us, the crisis began in June. For other people, the crisis is beginning now, you know, this last rain. I hate rain now, because really good [strong] rain and we'll be forced out of the house and I'll be in a motel.
- *(Pākehā woman, social recovery lead)*

During the cyclone, their house was fine... but it just got worse and worse and worse with each rainfall. Then the council went up and said that they were worried about the hill behind them because there's no trees. It's grazing land for cows and stuff, it's part of a farm. There's no trees holding the land together. Yeah, so they just got red stickered last month which means – Move out, you can't live there anymore and they just moved out of their house last weekend.
- *(wahine Māori, business owner)*

But always just wondering, is there gonna be something new, are we gonna find out something today? They keep saying we're gonna find out stuff. We never find out stuff. No one tells you stuff. No one will give you any information. And it's just that constant thing of well I just wonder, I just wonder.
- *(elderly Pākehā woman, coastal)*

All we knew we were under a yellow watch and watch for any movement or whatever. But you couldn't help kind of leaping forward to the future thinking what does this mean going forward when I need to leave the beach?...what's the value of your property gonna be, you know? And nobody came back to us so we're just kinda carrying on, living your life but having no idea what a yellow sticker means. - *(elderly Pākehā woman, coastal)*

Housing crisis

We've been bought out and the stress, if you like, is who knows when, who knows for how much and probably, more importantly, where are we going.
- *(Pākehā woman, social recovery lead)*

The plan is to buy a replacement house in Gisborne, but there's very little on the market. There is 55 plus category three houses. There's another few coming this week, so we'll end up with 60 plus people being bought out, which will all mean they'll probably push the prices up actually, because they'll be all cash buyers. Ultimately, if we can't find something, well, that includes the rental market because I know the rental market here too and there's bloody nothing to rent either, and so literally we might not have anywhere to live.
- *(Pākehā woman, social recovery lead)*

Council allowed the residents of Te Karaka to put temporary cabins up. And, we did that under, like, a building exemption process. The exemption is only for six months and those six months are up in November. And, they, sort of, know that in November they're going to have to start having conversations with these people saying, you either need to get a building consent to make this permanent or you need to remove it. But, these people are not going to be ready to move on... Some of them they don't have houses to go to, their houses aren't repaired or they're not lifted or whatever. And, it's just, like, they're stuck between the community and the legislation. The legislation that says it's got to go, and the community that doesn't have anywhere to live. ... I think management will work something out. We'll have to do something, we can't just kick people out of their temporary homes.
- *(Pākehā woman, local government)*

If it came up and everything's already allocated then we have nothing, and then where do we go now? So the fear of being displacement and the anxiety that we live on from day to day is real, Where do we go tomorrow?
- *(wahine Māori, mahi taiao, east coast)*

This is our fourth move. We've had four places since February. Yeah, it's not ideal. The owners live here and we're like here (demonstrate proximity of houses) so we haven't really got our own privacy.... Temporary accommodation through MSD. I just contacted them and said, look, we've got nowhere to stay, and they put our name on the list and nothing was coming up. There's just no accommodation available.
- *(Pākehā woman, horticulture, western rural)*

Pressure on whānau

Straightaway after the cyclone, we stayed with them in town, and I think that was really good because we had the grandkids to take our minds off it a bit. Thankfully, they had enough space for us to stay there without impacting too much on us. But yeah, we had to get out soon, give them their space back.
- *(Pākehā woman, horticulture, western rural)*

I'm carrying the emotional and financial cost and it's my mother, I love her, I'm not complaining about [her staying with us for many months since her house was flooded], but it means that I work full-time and I manage a business. I'm a mother and a grandmother and I can't have my grandchildren come and stay because we don't have the space. You know, the interruption to our lives; and I'm sure that's frustrating for her.
- *(wahine Māori, social recovery lead)*

Paying for all the expenses of my mother who has got some money from her insurer for emergency accommodation, but which she's hanging onto because she's fearful she might not be able to afford to buy a house to live in. And I don't resent her for that, that's what she needs to do. So there's a lot of impacts that wouldn't be apparent to people who are responding, and one of the things I wanted to say is, how long whānau can maintain the support before it's too much?
- *(wahine Māori, social recovery lead)*

House planning and consents process out of date

...climate change is real. Our house is 45 years old and I've thought, were we really dumb buying on a cliff face? But I actually I talked to the council soil engineers before we bought it to say, is there any erosion likely on this, and they knew the area well and they said no, just make sure if you're chopping a tree down, plant another tree and you'll be fine. And the two things that ... a cyclone is not a normal thing. It's not a wet winter. So none of us were dumb to have bought where we bought in all those houses that are slipping, because it's the top of Russell Street, it's Ferguson Drive, it's Makorori. These are all places that are long lived on. The second part of that is that you cannot count that there's another 30 years before another cyclone. You know, Bola, Gabrielle, 30 years on, it's now five and 18 months. El Nino is supposed to have happened. Well, we're bloody raining all the time, actually, still. The thing for our house is, yeah, maybe we'd survive in normal weather patterns, but we only need another wet winter and the house collapses. So climate change is real, and our level of resilience and adaptation needs to escalate.
- *(Pākehā woman, social recovery lead)*

When these things happen, the district plans need to be updated immediately but there's such a ridiculous process you have to go through to do a plan change. So currently at the moment we're still applying old flood hazard rules. So if I get a boating consent that comes through for a new house in a current flood overlay, we'll just have to sign it off that it meets the floor level in the current district plan but those rules have been in there since 1997.
- *(Pākehā woman, local govt)*

I don't want to throw any particular person under the bus here but...some of those temporary houses...the person that purchased a whole lot of them bought them with screw poles at 600mls. They need to be 1.5 metres above ground level. So now you've got all these people still in flood hazard overlays at a lot lower than they should be. And I just think, 'why do you want to retraumatise people if there's another event'? That desperation to get a roof over their head, but not a long-term decisions.
- *(Pākehā woman, local govt)*

"This is what happens currently; there's lots of blame for people. 'Well you built your house on a flood prone area.

(wahine Māori, social recovery lead)

4.8 Money, telecommunications and safety

4.8.1 Key Findings

- → Without power or telecommunications, residents could only use cash to pay for food, petrol and other items. The Gisborne District Council limited petrol purchases ($40).
- → Some noted that the inability to buy alcohol or recreational drugs caused tension in the community and in homes, and also posed safety concerns for some.
- → Concerns for safety (rising threat of civil disobedience) were growing as the crisis period continued, with some observing a spike in crime (including burglaries of flood-affected properties; fighting over or stealing food boxes).
- → Access to cash and petrol, and threats to safety, were sources of stress, impacting some residents' mental health and wellbeing.
- → Lessons learned by community members: Keep some cash at home in case of emergencies.

4.8.2 Illustrative Quotes

Access to cash and basic supplies

...I think another thing that was a bit worrying for everyone was there was no eftpos... I think that was a little bit of anxiety for everyone in the community,... is when your little $50 runs out and there's no eftpos, what's gonna happen...
...Not many people have cash anymore.
- *(wahine Māori, city)*

It was the cash. So when I went and did those drop-offs with the food, cash was the one. And yeah, I just had no answer 'cause I had no cash either. So, you know, we were all pretty, that was probably the hardest thing with our kids and our families was the cash. But I just said hey, this is food that we've got, that's the best we could do.
- *(Māori-Samoan male)*

...people don't live with cash anymore, and that caused a frenzy. You're like, 'I can't feed people tonight'. - *(woman, local govt)*

...for so long we were a cashless society. ...even professionals, even they struggled with it, so no one was untouched, none of us. There was no immunity to any of it, we were all on an even par, for a change, which was pretty different.
- *(wahine Māori, social service leader)*

...our pakeke...they shop big every pension day. And not being able to get into town, they were getting, what, a third of what they'd normally get in town. We saw our food prices hike 30 percent during Gabrielle and they haven't gone down since.
- *(wahine Māori, first responder, east coast)*

...oh, my God, I wish I had got some cash out... I try and keep cash on me now, just in case.
- *(kuia Māori, social service)*

Safety concerns

At nighttime, there's people going and looting homes. Or they came in and having showers. I caught up with the police and said to them, look guys, you guys need to start monitoring the roads, especially Lavenham Road and Branson Road, because my mate that lives down Branson Road caught four fellas looting in the homes. They were from town. They just came in and started taking stuff, and he called them out and got them and held them down, and then there was a couple of other locals held them down, rung the cops up and the cops turned up and took them away. Then they put a barrier at the front of Branson Road with a gate and closed it at nighttime. That was cool but Lavenham Road, you couldn't close that up because it was a busy road. And farms too. Meat walking around in the paddock. I don't think these townies were desperate. I think they were just silly and greedy and just didn't have any respect for other people. - *(Māori male, western rural)*

So sometimes I was there [working at non-profit] until 10 o'clock. And again, safety was an issue. There were people banging on the doors wanting food. So yeah that was alarming for us.... we had people jumping in front of our work cars saying stop, give me food, help me, I need food. You know, standing in front of people. And I was really concerned for the organisation's staff and wellbeing and of being raided.
- *(Pākehā woman, social service lead)*

[There was] a girl waiting in line at one of the dairies 'cause they heard bread was coming. And this car pulled up, you know, zoomed up, somebody jumped out, ran in, stole bread while everybody was standing there watching it...they were obviously more desperate than the ones queuing with cash. A lot of break ins and things where obviously people were trying to get hold of cash. Or even food.
- *(elderly Pākehā woman, coastal)*

Finances and impacts on mental health: Digging for silvers and golds

And that impact coming from the employees as well, well most of our men were working during the cyclone, but it stressed out the financial part of the family too. 'Cause they were waiting for their pay.
- *(Fijian, city)*

I don't think any of my family had cash on them. ... for like four days until we could buy food for us. But, yeah, it was pretty hard, a little bit of food.
- *(Pacific woman, rangatahi)*

...my payroll was due on Wednesday and that week we had to, ... BDO had a Star Link and we had to send staff there with a laptop to try and send the pay. Even though people couldn't get stuff out, but bloody mortgages and that bounced. You know, it's ridiculous, that sort of thing. And I had to grab any petty cash or money we had spare and hand it out to staff who, 'cause you know, you couldn't buy anything from the shops. So it's very lucky staff who had cash on them shared it out and yeah so.
- *(wahine Māori, medical practice, city)*

'Can you help me get a food grant because I pay stupid amounts of money for gas to run my generator, I'm paying too much to run the generator'. - *(wahine Māori, social recovery lead)*

A lot of them talked about putting little piggybanks aside and having money, because that was all of our shortages and everybody was short of coin because we couldn't get to town to get any money, so that was it and nobody had any power to use your cards or anything, eftpos or anything. It was just crazy. The guys were pulling up all the little silvers and golds and hitting on kids' money banks.
- *(Māori male)*

"I don't think any of my family had cash on them. ... for like four days until we could buy food for us. But, yeah, it was pretty hard, a little bit of food.

(Pacific woman, rangatahi)

4.9 Kai / Food

4.9.1 Key Findings

- → Food storage and distribution during an emergency (without communications, power or money) was critical to community health and wellbeing.
- → With high rates of deprivation, many in Te Tairāwhiti are unable to fill their cupboards in preparation for an extreme weather event.
- → There was a high reliance on marae and volunteer-based non-profits for food. Although some such organisations are well-prepared to feed hundreds, if not thousands, during an emergency, it is risky to rely on volunteer food production and distribution channels. Such organisations should be funded appropriately for the critical role they play in supporting communities during an emergency.
- → Inequities in access to food caused stress and ill feeling within communities.
- → Concerns raised about some of the first food deliveries going to supermarkets (for profit) and not non-profits providing food for some of the most disadvantaged and vulnerable in the community.
- → Community supermarkets could be prioritised for emergency electricity supply to ensure food stays cold/frozen as long as it needs to.
- → Deep sadness at the effects of the silt and debris on the awa, moana and kaimoana. Some commented that very little (if any) information had been disseminated from the Council or MPI about the health risks of eating kai that may have been contaminated. Even months later, community questions remain about the health risks of food gathered from rivers and the ocean and whether the toxin found in shellfish from southern Hawkes Bay to East Cape is related to the extreme weather events in early 2023.
- → Future resilience planning should include more local and sustainable food and water options for all, but particularly those unable to prepare themselves.
- → Extreme weather events impact the growing of fresh food locally. Roading is also a key issue impacting delivery and access to healthy, nutritious and affordable food.
- → Local, community gardens (māra kai) are important for future preparedness, particularly with a highly vulnerable roading system.

4.9.2 Illustrative Quotes

Food storage and distribution during an emergency

We were pulling out fridges. Still got kai in the freezers, our guys are having to pull out. Rotten as. There was stuff like that that had been sitting so long. There was a lot of that. That's another trauma, losing kai. - *(tāne Māori, volunteer lead, rural)*

All supermarkets only had one day supply if it was going to be panic buying. So they needed police marshalling and all of that. They didn't have any cash. They didn't have any way of doing Eftpos. So for those first three or four days the demand on (not-for-profit food bank), because it was being given out, was huge because the supermarkets weren't open. Once they did open it did take quite a bit of pressure off us which was good. But, then the isolated people, that sort of started rearing its head, and the need among isolated people... was huge. - *(Pākehā woman, social service lead)*

They were telling me it could be weeks and weeks and weeks before we get roads, power or communication. So that sent me into a bit of a spin because we had a lot of food that could spoil at (not-for-profit food bank). So [we were] trying to look after the quality of the food once it arrived. - *(Pākehā woman, social service lead)*

So the food from NEMA finally did turn up, the chilled stuff. And that was great, but it did need chilling and it was all fresh, nothing was frozen. So we were able to get that out to Aunty Char, Ngāti Porou, TROTaK and ourselves, as well as more store chiller containers all around the place. And it was just knowing what was where? How we were going to get it? When were able to get it? And making sure it was going to where it was needed. Again the army kept on coming in and requesting more supports, but that was fine. Then the issue that we had was the, all the donations and trying to manage that. Because we're talking about truckloads and truckloads of donations. And again having the area and the facilities to actually manage that... we'd be told to turn up with 60 to a hundred boxes of prepacked food, including chilled food. And you need to be at the airport at this time, you know? So we'd get an army in, we'd do that and load it up and it would be sitting out there for six hours. Without any chilling. So we'd bring it back and try and chill it all back down and get it back out. So that happened about six or eight, six or seven times from memory. - *(Pākehā woman, social service lead)*

Your systems are so complicated... this is what happened out at Te Karaka when you fellas stopped our trucks from getting through to take food. They rung me on our walkie talkies and they said, aunty, we can't get the kai in. I said, who said? They said, the council workers. They're saying we have to turn around and go to town, it wasn't approved. I said, well, you've got two choices. You're either gonna have a fight with that person or you can have a fight with me when you get back with all that kai, what's it gonna be? They said, it's alright, aunty. They came back and they said, aunty, they had barricaded the road and you weren't allowed to take stores unless it was approved by the council. I said, fucking arseholes. So I got in my car and I went back out there... 'cause you've got people out there like my sister kicked into mode, but she's not like me. She doesn't get feisty, she's always calm, she just cooks, she just cooks and cooks and cooks. And so I went out there and I said to [name], what's happening out here? You fellas need to pull your bloomers up and start making the call. - *(wahine Māori, marae leader)*

...I know of a person who was trapped, isolated, that got food dropped including some nice fresh carrots. But you've got no way to cook them, so what do you do with carrots? Feed them to the horse. So there was a bit of good intention but

perhaps not necessarily the right food that was being distributed. So more work needs to be done in that area. - *(wahine Māori, social recovery lead)*

Supporting Communities in Need: Feeding Hungry and Scared People

We had kai packs set up 'cause we were also doing COVID response when that hit... so we had kai. We could give whānau a pantry pack, meat pack, hygiene packs, ask this house if they could cook a barbecue. We took them everything they needed for their neighbourhood...
- (*wahine Māori, marae leader)*

We had got a cook in, him and his wife and the sisters and the cousins, they all came and drove our kitchen and they were just... cooking kai endlessly. And so anyone could come for breakfast, lunch or tea, every day and we just had a roving kitchen and roving cup of tea. And people just found comfort in it. - *(wahine Māori, marae leader)*

... a guy got beaten up across the road at (not-for-profit food bank). In the queue for kai, now that's the stress levels.
- (*wahine Māori, medical practice, city*)

Priorities and inequities in access to food

Then the food was being flown in and we were told by government that we had food coming for us. But, we never got it. It all went to the supermarkets. So supermarkets had top priority, so we were getting really really low, really low [in stocks].
- *(Pākehā woman, social service lead)*

...in the distribution of food parcels, there was a bit of an inequality. I did think that, and I thought, because these people can't, because it's too far away into town for them to catch the bus, or there was no bus at that particular time. But I found, I thought to myself, if I hadn't come to feed them, get all this food, and we got about 120 meals to last them a couple of days, they would have suffered hardship, and I thought that should not happen.
- *(wahine Māori, social service provider director)*

I'd go somewhere and I'd say, how come you weren't given any food? It wasn't distributed properly. And everybody was in need. It wasn't about rich or poor or whatever. Everyone had nothing so there had to be some equitable way of distribution.
- *(wahine Māori, social service provider director)*

The distribution of food needs to be more equitable... in some of these organisations, you have to register, so your address. And like one lady she said, am I getting one of those? No, because you're not on our database. No, if you're going to give it to one, give it to the whole lot of them, I just think, that's ridiculous.
- *(wahine Māori, social service provider director)*

Hunting and Gathering

The ability for people to forage also impacted, the ocean, kai moana affected. Yeah, there's lots of long-term health impacts.
- *(wahine Māori, social recovery lead)*

The flood waters killed a lot of them too. You would have seen a lot of animal bodies floating down the river, got caught up in the crossings, trying to cross over to the next driest land. The water was too strong. Cattle, horses, sheep, the whole thing. The impact to our moana was even worse, and not just here but the coast. The coast got really bad up there. Now their moana is floating up and coming to the shore, because the silt was so dense and so heavy in there, they've got nothing to breathe in and this is why the moana, the kaimoana is coming out of the water, because they're dying. They're dying because of the silt that's coming out of the back lands and stuff like that. We felt the impact here in Gisborne, especially in some of the diving areas around Manutūkē and Muriwai. All those areas got affected by what was coming around and what was coming out. Again, that's affecting communities to be able to survive and use the moana for [gathering kai]. The Council didn't give any info on that around how could people still harvest while this was still happening. They didn't put any stops to it and say, hey, you guys might be getting affected by poison, or you can't eat that food until we actually do some testing and stuff. There's nothing like that.
- *(tane Māori western rural)*

...they did organise a few people that were going to go out hunting and bring in free venison, which I think happened. I would say it was more the mental thing of even though you can be fully stocked with food and everything else, if you're isolated, because it's being forced on you, it does funny things to your mind. Just because they are isolated, people can go a bit stir crazy.
- *(Pākeha male, east coast)*

Future resilience planning should include more sustainable food and water options

I think about our region which has typically been abundant with fresh produce which is no longer there. The stone fruit, the apples, all those things where our supermarket's would've been able to buy seconds or fruit that was still good and nutritious for people to eat. I'm worried about that and the long-term health impacts on children as their nutritional needs aren't as well met as they would've been in the past.
- *(wahine Māori, social recovery lead)*

they've employed a guy up our way and he is trying to encourage people to have self sufficient food supplies. I went to a workshop on pruning your fruit trees so people could make their trees more productive...they've done a several workshops on raising hens...Then they've had workshops on milking a cow and whether people could share cows...there's plenty of hunters...and they're looking at getting some system to freeze down venison in a big chiller that would be available to people and stuff...I think teaching people once again how to be self sustaining is really necessary and it's a skill we've lost. - *(Pākeha male, east coast)*

And the best world would be for the Ministry of Health to give every whānau a maara kai (community garden)... And also supporting smaller organisations like ours to teach people how to be more resilient and know how to, not depend on McDonald's, or fast foods, or a packet or whatever... there needs to be more data and research done on the lack of that awareness throughout all of Aotearoa. Yeah and making people way more resilient. - *(Pākehā woman, social service lead)*

Photo Credit: Geoff Thorpe

4.10 Funerals / cemeteries

4.10.1 Key Findings

- Due to the high-water table, the cemetery was closed, which caused stress for families wanting to bury loved ones who died during or after Cyclone Gabrielle and subsequent heavy rainfall (June 2023) (also see discussion of urupā in 2.4 ‘Māori’).
- Roading and disrupted transport systems impacted family events (i.e., tangi, funerals) for many weeks/months after Cyclone Gabrielle, further impacting family wellbeing.

4.10.2 Illustrative Quotes

Closed cemeteries causing stress for families

They had a reasonable amount of people that die just of natural causes in Gisborne, and as you go, so they were getting a bit backed up at Evans in terms of bodies. So, it was quite a while and I think we’ve been through, just recently another time where we couldn’t, the water table was too high and we couldn’t bury people. So, yeah, that probably, I felt like it prolonged it a little bit for us but at the same time it was good to grieve with our family.
- *(Pākehā woman whose mother passed away during the SOE)*

I mean a number of tupapaku that had to be stored because of the water level at Taruheru. Some of our urupā that have been eroded away and the impact that’s had on certain whānau.I mean that’s something that impacts hugely on people.
- *(Pacific male, first responder, city)*

Roading and disrupted transport systems impacted family events

People who died, it was tricky, because whānau couldn't get in, and that's awful. But there was ability to handle the body and that, if you know what I'm trying to say... The thing that was hardest about it was knowing that there would be an end of our isolation, but when. And that was quite hard to keep groping with this cotton wool of when. Not that you necessarily had to have anything, but because you didn't know, you couldn't sort of talk to yourself and say, you've got eight weeks, get on with it. Just count them down. You didn't know, and then not knowing is a bit hard.
- *(Pākeha male, east coast)*

Yeah and the other thing was dealing with tangihanga during that. I mean not saying we got used to it from COVID, but that again was pretty yuck and stressful. That’s what patients were fretting about. Yeah ‘cause my father passed in April, just before ANZAC Day, in Kiri Te Kanawha, we didn’t even know if we could get him up to Ruatoria. So all that sort of stuff that impacts. Everything is impacted by those weather events.
- *(wahine Māori, medical practice, city)*

When was the last time I went [up the Coast] and why haven't I gone? Even recently one of my good friend’s mother passed away up in Whangaparaoa, I didn't go, because we’d already had, the gorge was already closing, opening and closing, I just didn't go, physically didn't go. Because I don’t wanna get stuck. - *(wahine Māori, city)*

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