

NZASE
scientist
profile

Matire Louise Ngarongoa Harwood

Born where and when

Auckland, 1969; Ngāpuhi, Ngāti Hine, Te Mahurehure, Ngāti Rangi

How she got into science

When she was seven, her Pāpā (grandfather), who named careers for his mokopuna, said she would be a doctor. Matire was “a little freaked out”, as she knew nobody who had studied medicine, been to university or was a doctor. But she thought if he wanted it and the whānau supported it, she’d try to do it for him.

At school

Shortly after that, Matire and the whānau moved to Australia where she went to a small rural school. Her high school science teacher drove a hot rod, wore stilettos, and told her female students that they had every right to enjoy science. Matire and three others were the first girls in the school to study physics, and all ended up working in science fields. Matire says the result proves the power of an excellent teacher and a keen peer group.

Education and jobs

Bachelor of Medicine & Surgery (MBChB),
University of Auckland

PhD, University of Otago (Wellington)

General Practitioner (GP), Wainuiomata,
Papakura Marae Health Clinic

Senior lecturer, Associate Professor,
University of Auckland

Field of science

Health science, medicine and rangahau hauora Māori. Matire studies health inequities between

Māori and non-Māori in long-term conditions such as cardiovascular disease, asthma and diabetes, and ways to reduce them.



*Above:
Dr Matire
Harwood,
back left,
with the
kaimanaaki
team of the
Mana Tū
diabetes
research
programme
at their
monthly
hui,
Papakura
Marae.
Left: Matire
in front of
the whare
hui.*

Covid-19

Matire co-leads the family doctors subgroup of a national Māori pandemic group, Te Rōpū Whakakaupapa Urutā, which has created online sites with expert advice for whānau, iwi and health providers. Matire represents Urutā on the Ministry of Health’s Technical Advisory Group for Covid-19.

“Whānau and iwi have been really positive, they say they feel a sense of security that this group of experts are advocating for them, and they love the Māori-specific, evidence-based advice on tangihanga, kaumatua, kainga, and the burial of whenua after a baby’s birth.”

How she find things out

- Population surveys and statistical analysis of health inequities
- Individual or group interviews about people’s experience of health systems
- Randomised controlled trials of health treatments or programmes
- Kaupapa Māori methods.



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Representing the needs of science teachers

Health inequalities/disparities:

Unavoidable differences in health results across populations caused by genetics or other factors.

Health inequities: Preventable differences in health results across populations caused by unfair or unjust social conditions or treatment, such as discrimination.

Random controlled trial: An experiment that reduces bias by randomly allocating people to an experimental group, which receives the treatment being tested, and a control group, which receives no intervention.

Examples of research topics

Rehabilitation from stroke

For her PhD, Matire studied why Māori and Pacific peoples experienced greater disability than others after they'd had a stroke and been discharged from hospital. Interviews found they experienced discrimination in health care. Matire ran a randomised, controlled trial to test a single Take Charge session from a health worker, which outlined risks and helped people to identify where they could make progress and set goals in daily living activities. The 1.5-hour talk led to significant improvements after a year in 200 Māori and Pacific people who had had strokes, and was just as effective for Pākehā.

Health literacy & cardiovascular disease (CVD)

Matire supported family doctors involved in one of the first international clinical trials with indigenous people. It found that three education sessions by nurses trained in health literacy meant people with CVD had a better understanding of their condition, more confidence taking their medicine, and were less likely to end in hospital. "Everyone thinks health literacy is an individual issue, but the intervention re-organised the way the health system provided information to patients about managing heart disease."

What she likes about science

"Working with patients, mentoring junior scientists, research participants telling us what healthcare they want, seeing how my work makes a difference in people's lives."



Matire in general practice.

Most valuable results

1 "Māori get less time with doctors than non-Māori, and are less likely to get blood tests, and scans that might provide quick diagnoses, so they wait longer on average for a correct diagnosis. As a result, Māori receive more limited treatment and are less likely to get operations they need."

2 "If we get treatments right for Māori, everyone benefits."

Science & kaupapa Māori research

"I bring together the two concepts; I look critically and analyse systems to find how inequities happen, and how they can be more responsive. Mātauranga Māori has a lot to offer the world - when we bring those two things together we can do amazing things."

Links

- [Te Rōpū Whakakaupapa Urutā](#), national Māori pandemic group website
- [Te Rōpū Whakakaupapa Urutā](#) Facebook page
- [Matire's profile](#) on Curious Minds, 2017
- [The Changemaker Viva](#), 2017
- [Medrecruit](#), 10 minutes with Matire Harwood.

Ngā Kupu

[Huangō](#) - Asthma

[Mahi rata](#) - Medicine (profession)

[Mate huka](#) - Diabetes

[Pūnaha toto](#) - Cardiovascular system

[Rangahau hauora Māori](#) - Māori health research

[Tirohanga tauanga](#) - Statistical survey

[Whakatoihara](#) - To discriminate

From Te Aka Maori Dictionary and Pelekupu



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