onmas

August 2026

The magazine for mas Members

Saving lives when disaster strikes

Trauma surgeon

Savitha Bhagvan

'Don't delay fun'

Optometrists' fresh start

Debt vs investing

Understanding your options

How to spot a scam

Tips for staying safe online

onmas August 2026

In this issue

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nurture

grow

inspire

Enjoy these stories and more by visiting **mas.co.nz/onmas**.

Photography Emily Chalk, Reuben Looi

A warm welcome from MAS

Here at MAS, we take huge pride in our unique beginnings as New Zealand's first dedicated insurer by doctors, for doctors. Back in 1921, our founders recognised that times were changing and they created MAS to better serve the needs of their professional community.

Over the years we have built on that legacy, expanding our membership and adding investments and advice to our services, without ever losing sight of the values and purpose we started with.

While it's wonderful to reflect on where we've come from, we know we can't just rest on our laurels. We must continue to honour our roots by rising to meet today's unique challenges.

To do that, we're undergoing major transformation within our business right now, in particular taking great strides to modernise and strengthen our technology and systems so we can keep providing the best possible service for you well into the future.

When it comes to acts of service, we take much inspiration from you too. Our Members never cease to amaze me with the positive impact they make. In this issue of onMAS, we meet New Zealand's first female trauma surgeon, Dr Savitha Bhagvan, who steps up to save people in their worst moments; Dr Michael Wynn-Williams, an endometriosis expert who is pioneering new pathways for treating and managing this complex condition; and dentist Gary Lawrence, who has not only provided dental care to his own community for 45 years, but regularly travels to Fiji in a voluntary capacity to do the same for children there.

There are so many uplifting Member stories in this issue, as well as helpful advice and ideas for looking after your physical and financial wellbeing. We hope it will offer you a moment to pause, reflect and feel proud of this remarkable community that continues to lead the way.

As always, we'd love to hear from you. If you have stories you'd like to share, you can email us at **onmas@mas.co.nz**.

Jo McCauley
Chief Executive Officer

Tēnā hoki mai anō koutou ki tēnei purongo kōrero o tō tātou hāpori, arā ko koutou ngā mema o MAS. Tēnā rā koutou katoa.

Me ū tonu tātou ki te whakarangatira i ō tātou pūtaketanga mā te tū ake ki te whakatutuki i ngā wero ahurei o te ao o nāianei.

Hei whakatutuki i tēnei, kei te haere mātou i tētahi huringa nui puta noa i tā mātou whakahaere. E kaha ana mātou ki te whakahou me te whakapakari i ā mātou hangarau me ā mātou pūnaha, kia taea ai te tuku tonu i ngā ratonga kounga tiketike mō koutou ā ngā tau e tū mai nei.

Mō ngā mahi manaaki tangata, he nui hoki ngā whakaawenga ka ahu mai i a koutou me ō koutou mahi ki ngā hapori huri noa i Aotearoa.

Hei tāpiri atu, kei roto i tēnei putanga ētahi kōrero motuhake nō ngā tākuta me ngā kaimanaaki o tō tātou hāpori. Tēnei te mihi, tēnei te whakanui i ā rātou mahi nui e tautoko ana i te oranga o te tangata me ngā whānau i ia rā.

Mark Ormsby
(Te Ātiawa, Ngāti Maniapoto, Ngāti Wairere) is Kaumātua/Tikanga Advisor for MAS and MAS Foundation. He shares this mihi whakatau (welcome message) for the issue.

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News in brief

Art in the Park

MAS is very proud to be the official Principal Partner for Art in the Park as part of a 2-year collaboration that reflects our commitment to the arts, wellbeing and community.

Owned by Eden Park, Art in the Park is a world-class art show, which sees our national stadium transform from a sports ground into one of the country's most unexpected art galleries.

Nick Sautner, Eden Park CEO, says the partnership helps strengthen Art in the Park's role as a unique cultural experience. "Each year it grows bigger, bolder and more immersive, and it's a privilege to provide a platform for Kiwi artists to showcase their work while giving the public the opportunity to engage with art in such a special setting."

MAS Chief Marketing and Distribution Officer, Matt Harvey, says the partnership aligns strongly with MAS's purpose and vision. "We want to support Art in the Park in a way that reflects genuine commitment, not just visibility. This partnership gives us the opportunity to be part of an event that celebrates creativity, fosters connection and highlights the important role art plays in personal and community wellbeing. It aligns strongly with our vision of supporting the financial health and wellbeing of our Members and the wider community."

This year, Art in the Park will take place on 12–15 November.

Above Auckland's Eden Park transforms into an unexpected gallery space for the annual event.

Scan here for more about Art in the Park and to buy tickets, or visit artinthepark.co.nz.

Creating wellbeing

It's no secret that having a creative outlet is good for the soul, but recent science has revealed just how much it can enhance our physical and mental health too. To explore the depths of this connection, and provide advice and inspiration for our Members, MAS is excited to be hosting a webinar on the relationship between creativity and wellbeing, led by Professor Daisy Fancourt, a world-renowned researcher and expert in the subject. Daisy is a Professor of Psychobiology and Epidemiology at University College London and author of the best-selling book 'Art Cure', which draws on decades of research to demonstrate that the arts are not a luxury, but a fundamental part of human health. For tips on adding a dose of creativity to your routine, turn to page 42.

Join us for our webinar, Art Cure: The Science of How the Arts Transforms Our Health, on 10 September at 6:45pm. Scan to book your spot or visit mas.co.nz/art-cure-webinar.

Learn to save a life this Shocktober

At MAS, we believe protection starts before a crisis happens. That's why we're proud to be in our second year of sponsoring the Hato Hone St John 3 Steps for Life programme. Through 3 Steps for Life, New Zealanders learn 3 simple but lifesaving actions: call 111, start CPR, and use an AED.

This partnership with Hato Hone St John reflects the role MAS plays for Members and communities across Aotearoa. Just as we're there to support Members through important financial decisions and unexpected life events, 3 Steps for Life helps people be there for whānau, friends, neighbours and colleagues when they need help most.

With thousands of Kiwis experiencing an out-of-hospital cardiac arrest every year, knowing what to do in those first critical minutes can make all the difference. Sign up to 3 Steps for Life during Shocktober and make sure you're ready to save a life.

Below Mia Noyes and Andy Gibbs from Hato Hone St John.

Scan here for more about the MAS and Hato Hone St John partnership, or visit mas.co.nz/hhsj-partnership.

A true honour

Congratulations to our wonderful MAS Members who have been recognised in the 2026 King's Birthday Honours List. We thank you for your important contributions to Aotearoa New Zealand.

Knight Companion of the Order of Merit (KNZM)

Dr Paul Andrew Baker of Auckland for services to health.

Officer of the Order of Merit (ONZM)

Dr Colin David Mantell of Wānaka for services to health education, obstetrics and gynaecology.

Associate Professor Nicola Cecile Austin of Christchurch for services to children's health.

Member of the Order of Merit (MNZM)

Captain Alexander van Wijngaarden of Blenheim for services to the maritime industry.

Dr Katrina Ivy Roberts of Matamata for services to the dairy industry and the community.

Dr Lesley Ansell of Auckland for services to midwifery.

Dr Luk Sun Chin of Cambridge for services to health and harness racing.

Professor Marc Timothy Malcolm Shaw of Hamilton for services to travel health.

Dr Mark Robert Fraundorfer of Mount Maunganui for services to health, particularly men's health.

Member moments

Over the past few months, we've had the pleasure of attending many events across the country and connecting with our wonderful Members. In May, we were at the New Zealand Association of Artist Doctors' Concert in Christchurch, an uplifting event we've proudly partnered with for 16 years. June saw us supporting TOIORA 2026, the annual NZ Medical Students Association (NZMSA) conference, and then showing up to the New Zealand Veterinary Association (NZVA) conference in Auckland, providing coffee, giveaways and Adviser support. We were also on site for GP26 and both the North and South General Practice Conference & Medical Exhibitions (GPCME). We served coffee, led panel discussions, had great kōrero and, as always, were proud to stand alongside the country's primary care community.

Clockwise from top left The NZ Association of Artist Doctors' Concert; the MAS stand at GPCME North; MAS was a Diamond Sponsor for TOIORA 2026; medical students attending the NZMSA conference.

From risk to resilience: Supporting health providers

In June, the inaugural 'Future of Healthcare in Aotearoa' conference took place in Auckland, with a session chaired by MAS Chief People Officer Hayden Saunders focusing on workforce wellbeing. It's a topic that continues to be critical for healthcare organisations and the people who work within them.

The conference was hosted by law firm Duncan Cotterill and led by medico-legal specialist Simone Tune. Simone has a long-standing passion for the health sector, having worked in it for the past 12 years. This includes a decade working for Health New Zealand in Auckland Hospital, where her aim was to proactively minimise medico-legal risk for the organisation.

Now at Duncan Cotterill, Simone advises health providers on a wide range of medico-legal issues. Her work includes drafting policies and consent forms, assisting with complaint responses, responding to audits, preparing for coronial inquests and acting for individual practitioners through disciplinary tribunal processes.

Simone notes that regulatory expectations are evolving, with increasing scrutiny being placed on health providers by the Health and Disability Commissioner. "Because of that, I really want to help businesses understand the risks they face and alleviate these risks wherever possible."

Through initiatives such as the 'Future of Healthcare in Aotearoa' conference, Simone hopes to foster greater collaboration across the sector and support health providers in building stronger, safer and more resilient organisations.

Above Duncan Cotterill medico-legal specialist, Simone Tune.

Cheers to 21 years!

We're marking a special milestone for HealthyPractice as we celebrate 21 years of providing much-needed practical resources to people with health practices.

It's also a great moment to look back on our history and how HealthyPractice has continually evolved to meet the changing times and needs. It all began back in 1998, with the creation of MAS Business Advisory Services (BAS), built to support Members through a rapidly evolving healthcare landscape. BAS offered expert guidance on everything from business planning and practice valuations to legal, financial and employment matters.

Then in 2005, with compliance and risk management becoming increasingly complex and burdensome for practices, BAS recognised the need for more specialised support. Enter HealthyPractice: a subscription-based online model for business owners that focuses on key management issues. As the success of the platform steadily grew, its remit also expanded to serve veterinary, dental and specialist practices as well.

With HR guidance and advice clearly becoming the greatest requirement for subscribers, our recent focus has been ensuring we have all the templates and solutions to support them. As we look ahead to the future, we'll keep reviewing and responding to what's needed and ensuring subscribers always have the right practical support at their fingertips.

Digital transformation

We're on a journey to create a better online experience for our Members, which includes continually updating our myMAS portal. Recent changes include making it easy to view your investment documents (including annual statements and tax certificates) and update your email address directly in myMAS. On 30 September 2026, we will be closing the Investor Portal so myMAS will be your one-stop shop for managing all your investment and insurance needs – no more juggling multiple logins! We'll keep you informed about future improvements, and if you haven't set up your myMAS account yet, please do so at **mas.co.nz/members**.

Private Wealth Adviser Mariette Koen.

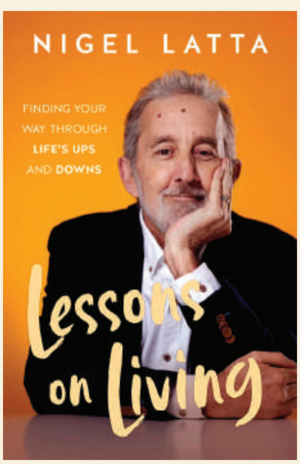
Fleet in the street

Getting to connect with our Members in person is so important to our MAS Advisers. It's where the best conversations happen, whether it's at a practice, workplace, cafe or kitchen table. That's because we know that good advice should feel accessible, personal and human. So to make it easier for our MAS Advisers to get to you, we've rolled out a fleet of new fully branded MAS cars – you can't miss us! From insurance and protection to KiwiSaver and investments, our team is here to help Members make confident decisions through every stage of life. We'll see you soon!

Moment in time

1931 Hastings Post Office

The Hawke's Bay earthquake struck Napier in 1931, 10 years after MAS was formed in the very same city, and a number of Members were affected as a result of that event. While it wasn't typical at that point to have insurance for earthquake damage, a decision was made by the MAS Board to meet the claims of Members who were not technically insured but who had suffered losses.



Well-deserved win

Celebrated clinical psychologist and MAS Member Nigel Latta was posthumously recognised at the Aotearoa New Zealand Book Industry Awards in July for his book 'Lessons on Learning: Finding your Way through Life's Ups and Downs'. The Special Achievement Award was accepted on Nigel's behalf by his wife, Dr Natalie Flynn. At the ceremony, she said, "He really just loved writing and he loved helping people, and he was so pleased he could put those 2 things together, it gave him so much joy." At MAS, we continue to remember Nigel's incredible contribution to New Zealand and feel honoured to have had him as a Member.

Behind the scenes of this issue

From top Dr Savitha Bhagvan is joined on set by MAS Content Manager Bekah Smith, publisher Sido Kitchin and photographer Reuben Looi; onMAS Editor Nicky Dewe has a kōrero with Head of MAS Foundation Julie Wharewera-Mika; writer Fiona Fraser and videographer Abe Raffills share a laugh with Members Geoff and Lynne Parker; one of Dr Paul Eason's grateful patients.

Photography Reuben Looi, Leo Lemuel White / Auckland Libraries Heritage Collections 1370-094-17 and supplied

Photography Rachael McKenna

First things first with... Doug Hill

MAS Board Chair Dr Doug Hill shares his long history with the mutual and what he loves about life in Dunedin.

When did you first become aware of MAS? My first memory of MAS is when we had a chimney fire at home. It seemed like a complete disaster at the time with fire engines everywhere, but my dad was just so cool, calm and collected. He said, "MAS have got this, they'll look after us." That confidence and trust in our insurance company to take care of things was something I've never forgotten.

We've now got 3 generations of MAS Members in our family. My dad was a doctor, so my parents were Members right from the start, and both my brothers are Members. My wife, Jennifer, is also a doctor and she's a Member, and now my kids are MAS Members too!

You're a doctor as well – what do you love about your job? General practice is unique in that it's 'cradle to grave' care. We get to work with individuals and their families over a lifetime. Being someone's doctor is an absolute privilege.

What are the biggest challenges and opportunities in general practice right now? I think the immediate challenge for the medical community is around funding and the workforce crisis we're facing. There is a big gap between the number of GPs we have and the care we need to deliver. I do think there's potential for digital technology, especially AI, to help solve some of this. I'm not a fan of AI replacing people, but I think our ability to look after more people with the assistance of AI will be huge. There's definitely an opportunity there, it's just a matter of how we harness it for good.

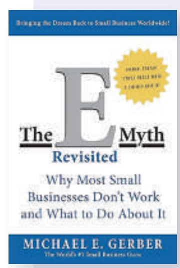
What do you love about life in Dunedin? It's a fantastically liveable city and has been a wonderful place to bring up our 4 kids. The relationship between the university and the town is just great. The city attracts academics and medical professionals that a place of this size wouldn't normally have. There's also so much to do within just a few minutes from home. I'm a passionate mountain biker and I like to do a bit of fly fishing as well. My main focus, though, is spending as much time as I can with my family and our 2 miniature dachshunds, Frank and Alfie. They're our pride and joy.

Doug's firsts

What was your first car? A red Datsun 180B with a vinyl roof which I inherited from my brother.

What's the first piece of advice you'd give? Take the opportunities when you've got them, because they won't always come back a second time.

What's the first book you'd recommend? A book called 'The E-Myth' by Michael Gerber. It's about the barriers to small business progression. It's not actually about medical practices, but it explains why medical practices struggle to get beyond being small. It was quite profound for me when I read it and I've been known to buy copies for friends.



What's the first thing you'd grab in a fire? My dashies of course!

In safe hands

New Zealand's first female trauma surgeon, Dr Savitha Bhagvan, has witnessed many life-and-death moments during her 30-year career. She talks to Sophie Neville about human resilience, healthcare inequity and staying grounded amid the chaos.

Photography Reuben Looi

Most of the people who end up in the care of Auckland trauma surgeon Dr Savitha Bhagvan start their day just like any other.

Her patients are often in the prime of their lives. They might have dropped their children at school, driven to work, gone for a run, climbed a ladder, crossed a road or hopped on a bus. Then something happens. A car crash. A fall. A violent encounter. A split-second event that turns an ordinary day into a medical emergency, the patient and their families' worlds turned upside down.

By the time they reach Savitha and her team, lives can be hanging in the balance.

For MAS Member Savitha, New Zealand's first female trauma surgeon, helping to put shattered lives back together is what continues to inspire her. Nearly 3 decades into her career, she still considers it a privilege to be trusted with a patient's care at one of the most devastating and vulnerable moments of their lives. It is work that has given her a front-row seat to both the fragility of life and the extraordinary resilience of the human spirit.

"I see people and their families in what is usually the worst time of their lives. But what I've learned is that humans are truly amazing," she says. "We are survivors, you know? No matter what hits us, human beings find a way to get on with life. And you can't break that. It makes me very optimistic."

The 53-year-old can still pinpoint the moment as a trainee doctor that she fell in love with surgery: Savitha was 18 months into medical school, and on her first day of clinical training at a hospital in Bengaluru, India, she watched her professor remove a thyroid cancer. →

Cool, calm and collected: Despite the fast-paced and chaotic nature of her job, nothing can break Savitha's focus when a patient's life is at stake.

> *We are survivors, you know? No matter what hits us, human beings find a way to get on with life.*

Above When she's not scrubbing up for surgery or following up with trauma patients, Savitha trains other trauma clinicians and works in private practice. **Right** Savitha circa 1975; her school photo from 1988; completing the Auckland Marathon in 2024.

"I thought, 'How cool is that? There was a problem, and he went and fixed it,'" she recalls. "It completely made sense to me. I thought, 'Right, that's it. That's what I want to do.' I was hooked."

Now, Savitha is one of New Zealand's leading trauma specialists. Alongside her work as a Trauma and Acute Care Surgeon at Auckland City Hospital, she leads the Northern Region Trauma Network, helping coordinate care across the upper North Island. She also helps to teach and train the next generation of trauma clinicians, and spends several days each month operating in private practice.

At home she's raising a 16-year-old daughter with her husband, who is a heart and transplant surgeon. "There is quite a bit to juggle," Savitha says with a laugh.

Getting in the zone

There is no such thing as a typical day for Savitha. When she's on a trauma take at Auckland City Hospital, she arrives at 7:30am and "waits for something to happen. Invariably it always does."

Based in the Surgical Department, Savitha and her team are alerted to incoming trauma cases – often patients with the most catastrophic injuries – by a pager system. When the patient arrives, "everything comes together very quickly."

Savitha and her team enter what she calls 'the zone'. The focus narrows, the noise fades. The room seems to slow down as they rapidly sort through injuries, risks and possibilities and make a plan. She believes trauma surgeons are wired a little differently; they can access a level of focus and calm amidst total chaos.

"It's a bit like changing a tyre in Formula 1. Everything happens as it should, you're focused in on the task and you block everything else out."

After an initial 'damage control' surgery, treatment is often a multi-step approach. But being at a patient's side from the very start until the end of their recovery is the most fulfilling part of her role, she says. This can sometimes take weeks or months.

"It's the best feeling in the world when someone survives after they were expected to die. It's hard to explain what it feels like to be part of, but you get a real high from that."

A difficult lesson

Savitha's journey into medicine happened almost accidentally. As a high school student she applied for – and was accepted into – both engineering and medical school, and she opted for medicine.

It was a learning experience in every sense of the word. Seeing her first cadaver was confronting, but so too was the poverty she'd been shielded from growing up in a middle-class family with educated parents. She recalls a moment early on when a poor family faced a decision no parent should ever face.

"They had a child with fairly advanced cancer, and she needed chemotherapy. But if they'd stayed in hospital for the treatment, it would have meant leaving their other children alone in their village with no food or care. If they didn't work, there was no money, and there was no social security. In the end, they had to take their daughter home, knowing she would die, in order to save their other children."

The experience left a lasting impression. It was one of many moments during her training that exposed her to the realities of poverty and inequality, and how profoundly they shape health outcomes. It was a lesson that continues to inform the way she views healthcare today.

"The poor and the disadvantaged always suffer, the world over," she says. "They start off with poorer nutrition, poorer education, and that feeds into disease and poorer health outcomes throughout their lives. We need better prevention, better input into social problems."

After graduating as a doctor, Savitha undertook surgical training, during which she met her husband. In 2003, the pair moved to New Zealand so the heart surgeon could gain experience at Green Lane Cardiothoracic Unit – which was famous for its pioneering heart surgery. They expected to stay for a year, but 23 years later, New Zealand is firmly home.

"We love it here," says Savitha. "We are Kiwis."

Their daughter was 5 years old when Savitha completed post-fellowship trauma training at Sydney's Westmead Hospital, becoming the first woman in New Zealand to be appointed as a trauma surgeon in a tertiary trauma centre. Since then, she has helped shape trauma care in this country and, in 2022, was awarded Fellowship of the American College of Surgeons.

Perspective shifts

When Savitha began her career, surgery was still widely regarded as a male-dominated field. Today, she's delighted to see women entering the profession in equal numbers and takes great satisfaction in mentoring the next generation of surgeons.

She is equally passionate about the collaborative nature of trauma care, and not just in the operating theatre or wards, but with the emotional burden of the work. "We debrief after big events, we talk things through and help each other," she says. "We've all got a lot better at that."

For all the calm she brings to her work, Savitha is quick to dismiss any suggestion that years in the job have made her immune to its emotional toll. Telling families a loved one hasn't made it is still the hardest part of her job.

"Sometimes you're just struck by how unfair life is. When young lives have been cut short, and they did absolutely nothing to deserve that. It's one thing getting older, having diseases and reaching the end of your life. It's another thing when someone in the prime of their life loses everything. And the family left behind have to carry on for the rest of their lives. That's heartbreaking."

Savitha's work also gives her a unique window into the changing nature of trauma in New Zealand. When she first began working here, the vast majority of serious trauma cases stemmed from motor vehicle crashes. While these remain a significant cause of injury, she has noticed an increase in violence-related trauma over the years, particularly cases involving firearms as well as serious domestic violence.

"It's very sad," she says. "People are under pressure."

For Savitha, cooking, sewing, spending time with family, hiking, meditation and running all help her to unwind. Yet she admits that working in trauma has changed the way she sees her own life. Spending every day confronted by how quickly things can change has given her a heightened appreciation for the people she loves.

"The perspective is different," she says. "You can't avoid it. I see all the things that can go wrong."

She tries not to let that knowledge make her overly cautious, although she admits e-scooters, bicycles and even her daughter catching the bus can set her mind racing. When her daughter wanted a trampoline, she agreed to an in-ground one to lower the risk.

But if there is one thing her work has taught her, it is not to take people for granted. And on the days when the outcome isn't what she hoped for?

"Everyone gets an extra hug."

Scan here for more of Savitha's story, or visit **mas.co.nz/trauma-surgeon.**

Stylist Justine Muxlow

Shared vision

Inspired to make the most of life, Lynne and Geoff Parker turned future retirement plans into an adventure for the present. Moving from Auckland to Havelock North, the husband and wife set up a new business and are thriving in their community.

Words Fiona Fraser **Photography** Emily Chalk

Lynne and Geoff Parker have settled comfortably into their new Havelock North lifestyle, and built their stunning home on land behind the award-winning Black Barn Vineyards.

"Don't delay fun" is the motto shared by MAS Members Geoff and Lynne Parker. After losing a friend to cancer, they didn't wait a moment longer to start living their dream lives, so they sold their successful Auckland optical practice and moved to Havelock North. Their new venture, Index Optical, offers high-end frames and eyecare expertise, and this outgoing husband and wife are using the opportunity to enjoy everything the region has to offer.

Where the magic started

Lynne: I met Geoff in Tauranga. My usual optometrist was away on maternity leave having twins, and when I went for my appointment I was asked if I wanted to see 'the young guy'. I was convinced I needed coloured contacts because I was going on a Contiki tour and wanted my brown eyes to be sapphire blue, or maybe dark green. Poor Geoff, he was so patient with me. It was an hour and half of me not being able to make a decision! The next morning, I went back and said I'd just get my normal prescription after all, and he said, "Well, you owe me a drink." I'd clearly dazzled him with my 90s shoulder pads and massive earrings.
Geoff: And that was 34 years ago. I'd just graduated from the University of Auckland and it was my first job. We got married in 1994 and bought our first optometry practice in Auckland's Ponsonby that same year. It wasn't like the Ponsonby of today – in fact, I remember when the first cafe opened down the street from us and how exciting that was!

How business became pleasure

Lynne: The day before we took the place over, our receptionist quit and suddenly we didn't have staff, which was terrifying. I was working in sales at the time, so I took annual leave while we figured out what to do next. The first 3 months were... interesting. It was Geoff's baby and for a while I think we were both trying to do each other's job! We soon figured out that if we separated our areas, it worked perfectly.
Geoff: Working together wasn't in the plan, but we were very complementary in our skill sets so we just went with it. I love talking, I'm great with people and I'm a good clinician, while Lynne has such a sharp brain for business and completely transformed the way we operated. I describe it often as a right hand, left hand situation. I feel genuinely →

> *One friend would always say, 'Don't delay fun,' and we felt there was a lot of truth in that.*

lucky to work with Lynne. She knows what I don't know, and vice versa.

You only live once

Geoff: Over the past few years, we've lost both friends and clients to cancer. During her final chapter, one friend would always say, "Don't delay fun," and we felt there was a lot of truth in that. You just don't know what's ahead, do you? Off the back of the 2020 lockdown, we'd bought a bit of land in Havelock North and thought we might build on it and retire there one day.

Lynne: But increasingly we began to wonder, "If not now, when?" I'd completed my MBA, and our Parker & Co eyewear store in Newmarket was growing. Life was just busy. We'd get in the car to go home and I'd have to ask Geoff, "How was your day?" We barely saw each other, even working in the same building. And we also decided that if we wanted to be part of a new community like Havelock North, we should open a business, not just move when we retire. How would we meet people then? So that brought our timeline

Opposite The bespectacled pair at Index Optical; Geoff is passionate about giving his clients the best experience possible. **Clockwise from right** Making the move now rather than after retiring has allowed Geoff and Lynne to improve their quality of life; Geoff has started dabbling in DJing; their sun-drenched home in the hills; Lynne with some of her pottery creations.

forward. We packed up, moved and established Index.

A new tribe

Lynne: The people in Hawke's Bay are so welcoming. It helped that we already had friends here, and they introduced us to everyone they knew. I love the lifestyle and being able to make time for dinners out at the amazing restaurants, golf lessons, pottery, gardening, line dancing. And what I've realised is that because we've made this positive change, we will extend our time in business. Running a business in Auckland was stressful and we'd talk about what we would do when we retired. But we're now re-energised by work, we love having such interesting clients and being here in Havelock North village. We have a much better work-life balance, so we're having fun as well as working.

The wonderful part for me is that we get to grow this business from scratch, combining our focus on the latest tech in eyecare with amazing frames and accessories, trunk shows and collaborations. It's a beautiful blend.

Geoff: I think – I hope – our clients know us for the experience we offer them. We listen carefully to their concerns. We make sure they know they're understood and valued. It's something we are both very passionate about in our respective areas.

How they make it work

Geoff: I love how fearless my wife is. She steps into challenges and owns them. I've always admired that. As a clinician, I'm more cautious, and I think anyone would say they'd prefer their optometrist to be conservative in their management! But I respect Lynne enormously for being the brave one.

Lynne: Geoff is kind and so gregarious. He loves company and he loves to chat, that's why his appointments are always an hour long! I enjoy being able to see his professional side in our day-to-day lives, and that he knows to go and get my second coffee of the day without being asked!

What the future holds

Lynne: More travel, while we're young enough to enjoy it. I remember watching tourists trying to climb some steps to visit a church in Siena, Italy – they weren't steep but it was a struggle. I decided then that if there were places to go and see, I didn't want it to be when I was using a walker!

Geoff: When you're a younger person, you think you have so much time. But when you begin to lose friends, your perspective changes. Our daughter, Holly, is 28 now and lives in Sydney, so we want to be over there regularly, and continue with our buying trips to Milan and Paris, and see the world. Get out there and make the most of every day!

Scan here for more about Geoff and Lynn, or visit **mas.co.nz/index-optical.**

The extra *smile*

From Kāpiti Coast to the classrooms of Fiji, MAS Member Gary Lawrence's dedication to dentistry is clear. He talks to Nicky Dewe about the challenges and rewards of providing dental care to isolated island communities.

For the past 16 years, Kāpiti dentist and MAS Member Gary Lawrence has been making regular trips to the tropical paradise of Fiji. Not to lounge by a pool with a cocktail, but to provide critical dental care for local school children.

Taveuni, known as Fiji's 'Garden Island', is almost 300km northeast of Nadi, and is connected daily by a short flight. It has approximately 20,000 residents, about 16 schools and a small Rotary Club that has sponsored many charitable projects to enhance its residents' health and wellbeing.

One of these projects has been running since 2004, when Pukekohe dentist and Rotarian Johnston Luen started travelling to the island every 2 years with other dentists to provide dental care for local school children. Gary, who has run Care Dental in Paraparaumu with MAS Member Simon Wilson for 3 years, after 42 years in Raumati Beach, joined the group in 2010 and took over running the project in 2014 when Johnston retired.

The island has become a home away from home for Gary, who has continued travelling there every 2 years, except during an enforced 5-year hiatus over the Covid-19 period. The team, which now includes 3 other dentists from across New Zealand, works tirelessly over a 2-week stay to see as many patients as possible.

"We get to 6–9 schools over the 2 weeks, where we will see children from 8:30am until 3:30pm. Then after school until about 5:30pm or so, we see the teachers along with people from the village who have issues or problems," Gary explains. "We typically travel there in August when temperatures are slightly cooler and easier to work in, although they're still positively balmy for us Kiwis. The locals are wearing jerseys, and we all get around in jandals and shorts!"

The locations they work in are not typical for dentistry. "We work in classrooms, school libraries or on balconies. There's no privacy as such, but technically we supply a high standard to the basic services we provide."

It's not uncommon for curious eyes to peek through the windows as the sessions are taking place on school grounds. "After Covid, we had kids coming to us who had never seen dentists or had dental treatment before, so they were very inquisitive. The older kids knew us from previous visits."

What the team can offer has evolved. "When I first started, we only had hot water sterilisers and we'd work by sitting on wooden benches and leaning over the children. Now we have collapsible manual dental chairs and mobile stools to work from behind the patients – less sore backs!" Gary says. "Most of the schools don't have

Photography Billie Brooke (left) and supplied electricity, but we have now purchased 2 petrol-driven generators and a dental compressor. One of the generators feeds the compressor to drive all our air-driven portable dental units, which pack down and fit into a suitcase. These units basically function like those we have at home."

While the equipment has improved and the team's expertise both at running the trips and working in the environment has grown, other challenges have arisen to meet them. Gary says over the years he has witnessed first-hand how greater access to soft drinks and sweets has led directly to serious dental issues.

"The marketing for them has really ramped up since about 2014. Before that there was hardly any advertising around. Now you see signage and billboards at the village stores, with the multiple chillers inside packed with their products."

Coming back after the Covid break made this problem even more pronounced. "Previously we'd tried to go to a different school every day, but that all changed when we returned in 2023. We ended up having to spend 3 days at the first school and then it just carried on like that in each school. We have returned every year since 2023 attempting to catch up. On our last trip, we placed over 1,000 restorations but had to extract 47 permanent teeth from children under 14 years of age," says Gary.

Mission possible

Clearly the need is great, and the team's commitment is strong, although there are still many hurdles to jump through. Lots of paperwork and administration is required to even get the group off the ground, including temporary registration to work in Fiji issued by the Fiji Medical

Opposite page Gary Lawrence in his Kāpiti clinic; tending to a patient during the 2024 trip. **Above (clockwise from top)** The team working in a local classroom; school kids waiting patiently for their turn in the dental chair; transporting equipment around the island. **Below** Children are gifted dental hygiene packs after their treatment.

Council, dental indemnity insurance and Certificates of Good Standing (COGS) from the Dental Council of New Zealand. Then there's travelling with 180kg of equipment and materials that must all be accounted for, valued and inspected at customs entering and exiting Fiji, and also re-entering through customs into New Zealand at the end of the trip.

The financing of the trips has come through many channels: fundraising from Rotary Clubs and Rotary Districts around New Zealand, charitable trusts, the New Zealand Dental Association (NZDA) and even private benefactors. Gary's wife Diane helps manage many of the admin tasks, and in the past there has been huge support from Taveuni Rotary too, including hosting by Australian expat Rotarians Helene and Peter Brown. The couple, however, have recently returned to Australia for medical reasons, leaving the future of the dental missions uncertain.

While there is a dental hospital on the island, for many families it means taking time off work, paying for bus fares and potentially waiting hours to be seen. Unfortunately, the dentists there cannot provide treatment at the schools and by the time patients turn up with pain, all they can do is extract the offending tooth. "It's an ambulance at the bottom of a cliff rather than a fence at the top, which is what we're trying to do," says Gary.

Being able to positively impact the wellbeing of Taveuni's children means a lot to Gary, and his efforts have not gone unappreciated. At the 2025 NZDA Awards he received the Public Service Award. The Taveuni Rotary bestowed the team with Paul Harris Fellows (PHF), and Gary gained a double sapphire pin. His host Rotary of Kāpiti recently presented him with a ruby PHF for his work in the South Pacific.

Gary has also been honoured within the Taveuni community itself. "Last time I was there I met a 10-year-old whose first name was Gary. There aren't many Fijians called Gary, so I must have impressed that family somewhere along the way!"

Dr Emily Yassaie (left) and Mariann Betham.

Making a difference

For people living with visible differences, knowing they're not alone can have a huge impact. That's why MAS Member and craniofacial surgeon Emily Yassaie is helping to create community, share knowledge and provide support beyond the operating room.

As a craniofacial surgeon, MAS Member Emily Yassaie spends her days performing complex operations on patients who come through the hospital doors for many reasons. They may have had a tumour removed, suffered from facial palsy, experienced trauma to the face or body, or been born with a congenital condition such as a craniofacial cleft.

In a medical capacity, her role is to deliver the best possible treatment and care, but in many cases that's only one part of what people require in order to move forward confidently with the life that follows.

"Throughout my training, my time working overseas and then coming back to New Zealand as a consultant, I realised there's this gap between what the hospital can provide and what people actually need. We can look after the physical side, but there is often no public funding for the psychological support which provides that extra layer of care," Emily explains.

"I've found that in many consultations I've had with parents of a new baby with a visible difference, the time is spent talking them through what life might bring, rather than the surgical stuff. And it's similar for people who've had cancer or a trauma too. They're seeking reassurance and advice."

During her years working in the UK and Canada, Emily came across several charities working in this space, helping provide vital support beyond the treatment phase. "We didn't have that here, so I decided we needed to create it," Emily says.

Visible Difference Aotearoa is a Wellington-based not-for-profit charity created by Emily, nurse and anaesthetic technician Mariann Betham, and consultant Pip Arnott. With support from MAS Foundation, Visible Difference was able to launch an online hub in 2025 to provide much-needed resources, guides and information which had been otherwise hard to find. Already they're building a virtual community of people with shared experiences, and the next step is to begin connecting people in person.

"It can be really isolating to live with something that makes you different and that everybody can see. You can't avoid it, and it just adds pressure on people when they're being looked at. They might start to pull back from society, do fewer social activities," Emily explains. "There's lots of evidence showing that people who live with a visible difference have much higher rates of depression and anxiety. That's why being able to bring together people who are experiencing these challenges day to day is massive."

One of the reasons Emily believes this kind of organisation may have been missing from New Zealand could come down to our pragmatic approach to life. "People often don't want to be seen to be upset about, or even aware of, their appearance. In our clinics at the hospital, we'll hear them say, 'Oh, I don't want to be vain.' But it's not vanity. When you're talking about differences to the face in →

Being able to bring together people who are experiencing these challenges day to day is massive.

Sarah Couper

Mother of 3-year-old Archie

"My son Archie has an incredibly rare genetic mutation which has impacted his craniofacial bones. He was born with a small jaw and a different shaped skull, which means his eyes are wide set and he's got little ear canals, but that's the only area of his body that's been impacted.

"In every way he's a happy, healthy boy – always racing around, chatting and doing all the things 3-year-olds love to do. It's just that he has a visible difference.

"We've experienced so many different questions from people. I don't mind if they are curious and want to ask, but sometimes they will say things like, 'What's he got?' My husband and I have had lots of conversations about how we explain it to people. 'Visible difference' is exactly the right way to put it.

"Archie has had several medical interventions, and we met Emily when he had a jaw reconstruction when he was 1. It was a massive deal for us and it was very overwhelming. I'd been searching for information on other children and parents who'd been through it too, but it's such a rare mutation. I said to Emily, 'There's no Facebook group for this,' and she said, 'That's exactly what we're trying to build. A community of people who can support each other.'

"The resources they provide are so valuable. As a parent, you'd do anything for your child so you stay up all night searching and hoping for answers, even though you're already exhausted. When Emily told me about Visible Difference in the clinic that day, it made me realise, 'Wow, people do really care and want to help.'

"Because he's 3 now and he's meeting all his milestones, I'm in a much better space, but in the early days there were times of intense stress and worry for the future. Nobody could give us any answers.

"I think about the parents who might be about to go through the same thing as us and what a difference having those resources will make, from pregnancy and birth, to preparing for surgery and starting school. It's all so helpful."

Above Thanks to Visible Difference Aotearoa, parents like Carterton mum Sarah have great resources to support their children as they grow.

Left Like most 3-year-olds, Archie is energetic, curious and chatty. **Below** Boisterous brothers Archie and 5-year-old Ollie.

particular, it has a big impact. Around 60% of our communication comes through our facial expressions, not our words, so it's a huge thing."

But it's not just the people with the difference themselves who need this support. For new parents, it can be really hard. "They love that baby immensely and they want to do everything for them, but they've never navigated the system before and don't know where to begin. Instead of having those parents spend hours in the middle of the night googling things, we've put that information in writing for them and we've had amazing feedback," Emily says.

"Some parents have told us they've never felt so seen. It doesn't necessarily change their journey, but it lets them know that people have been through this before, and these are normal feelings to go through." Alongside the guide for new parents, there are also resources about how to support your child during surgery and starting school.

Then there are unique challenges for those who didn't begin life with a visible difference but acquired it through an event or a condition like Bell's Palsy. "Right now, we're working on a resource about how people can deal with loss of identity and grief for their previous self. This will address things like how to handle questions about their appearance or people staring at them – things that have never been their 'normal'," explains Emily.

The list of goals the Visible Difference team hopes to achieve is long. They have plans to start school programmes in the future, and they also want to increase the amount of research happening in this area, so the field of knowledge can grow. In particular, Emily says there is very little information around the impact of visible differences on Māori and Pasifika communities.

For Emily, Visible Difference has become an important way to help resolve some of the challenges that she can't fix through her day job alone, because the surgery is often only the start.

"The most important thing is for people to be able to live their lives, feel supported and have the confidence to contribute to their communities," she says. "The more awareness we create about some of the conditions or issues that cause visible differences, the more the curiosity dies back and people can actually communicate properly with the person behind the difference. That's what I'd really like to achieve in the bigger picture."

Scan for more about Visible Difference, or visit **mas.co.nz/visible-difference.**

Mariann Betham

Clinical Nurse Co-ordinator and Visible Difference Aotearoa board member

"My burns happened when I was 3. I feel that I went on to work in medicine because when I was a kid I spent so much time in hospital. It was where I felt safe and people didn't judge me. Some of the plastic surgeons who treated me when I was a child, I've now worked with as their charge nurse!

"Thanks to modern technology, things have moved on a lot in terms of treatment. These days we can often start the surgery right away, and send people home again as quickly as possible. But then there are no resources that tell them, 'where to from here?'

"From my own experience, I know that the journey is not only for the person who has the difference, but also for their family. I'm lucky I'm from a big Samoan family of 13 and my mum was really my voice. But it would have been great when I was growing up to know that there were other kids and families who went through what we went through – that we were not alone in isolation.

"Following surgery, there is a further psychological shift for the individuals and families to navigate. This can be new to someone who has previously been judged by how they looked.

"The real key is education. There are so many different syndromes or accidental causes, so it's about making people more aware of them. Also helping people understand that just because a person has a visible difference, it doesn't mean that they're intellectually different.

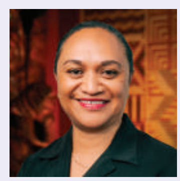
"I see a lot of mums and dads who are really fighting for their children. They want people to know that their child is like every other child, they just look a little bit different.

"People need people, and no one is an island. That's why we'd love to have more resources and to get more people who have visible differences and their families involved. To make the wider community understand we all make a visible difference."

Words Nicky Dewe **Photography** Hagen Hopkins and Mike Heydon

Julie says: "Visible Difference Aotearoa shows the power of lived experience, clinical expertise and community leadership coming together to fill a critical gap in support. Through our Community Koha grant, we're helping ensure tamariki and whānau feel seen, connected and understood, creating the confidence, belonging and resilience that enables children and families to thrive."

Mafi says: "We are grateful for the courageous work of Visible Difference Aotearoa, supporting those who are often unseen and underserved by the system, and who experience inequitable health and wellbeing outcomes. By building a virtual community that connects people through shared lived experience, they embody our Foundation's value of weaving people together to maximise collective impact."

Heads of MAS Foundation
Dr Julie Wharewera-Mika (Left)
Ngāti Awa, Ngāi Tuhoe,
Te Whānau-a-Apanui
Mafi Funaki-Tahifote (Right)
Tongan (Tongoleleka – Ha'apai,
Kolofo'ou, Ma'ufanga,
Tofoa – Tongatapu)

mas foundation

Stroke of inspiration

For artist, teacher and MAS Member Sam Gilmour, painting is a way to bring her childhood dreams to life in vivid colour. She tells Nicky Dewe about embracing the messiness of the creative process and nurturing the next generation.

Glistening piles of rainbow-coloured pipi and cockle shells, crashing waves and waterfalls, a dream house nestled in lush native bush... These are some of the scenes and subjects brought to life in the paintings of MAS Member and artist Sam Gilmour. For Sam, her lifelong creative expression has provided more than a compelling pursuit – it's been a portal to another world too.

"I've always loved the ocean and as a child I was obsessed with mermaids. Now as an adult, painting has become a way to live out my childhood fantasies. I always paint places I want to be or things I want to look at. My paintings have become a window into the things that bring me joy."

Sam is not only a professional painter in her own right – appearing in the MAS Emerging Artist's Gallery at Art in the Park this year and last – but is also helping another generation of Kiwi creatives to grow and flourish in their artistic pursuits. As an art teacher at Auckland's Aorere College, it's a subject she believes is becoming more valuable and important as the world and technology evolves.

"A lot of the students I teach are real perfectionists, and nothing gets in the way of creativity more than wanting to be perfect," says Sam. "I tell them, 'I want to see the mess. I want to see the scrappy stuff because that's how your brain works things out.' There's a big focus on literacy and numeracy these days and of course they are really important, but sometimes the non-core subjects take a hit as a result. Art involves real problem-solving too.

"Some of these kids come into class and you can see they've never had that tactile experience. They're nervous to give it a go because they don't want to be bad at it. I try to teach them that it's not about instant gratification, that there's value in chipping away at a project and building skill and seeing your progression. That's completely new thinking for some students."

She's not surprised, however, when parents seem concerned if their children want to pursue it as a career, given how hard it can be from a financial standpoint.

> *I want to see the mess. I want to see the scrappy stuff because that's how your brain works things out.*

"When I have parent-teacher interviews and there's a student who is more into the arts than into academia, the parents are sometimes worried. I do think you have to be more dogged, or you might have to have your fingers in many pies. Potentially you might have to create while you have your day job too. But it's worth it."

And while the viability of a career in the arts may feel even more precarious in current times with new technology posing a threat to creativity, Sam sees it differently. "I've had people say things like, 'Oh, I'm sorry, your purpose is gone now that AI can just whip up an image.' And yes, it can, but there's no humanity to it and there's no craft. I do see value in using AI to give me more time for creativity. In terms of teaching, it's helped remove lots of admin from my life, but I don't see it as a replacement for creativity. I don't worry about it as a painter."

Sam's own talent was nurtured at home from an early age by her parents, both MAS Members and physiotherapists, who encouraged and supported her passion through the years. She's since had the support of The King's Trust Aotearoa New Zealand, which helps young creatives turn their talents into viable careers through workshops, mentoring and grants. Then there's the opportunity to exhibit at Art in the Park, thanks to sponsorship from MAS.

"When organisations like The King's Trust and MAS come on board, it's like they're saying, 'Art is really important,' and that means so much," Sam says. "Having your own stand at Art in the Park means you get to watch people interact with the things that you do. You do feel vulnerable exposing your inner thoughts and dreams and seeing if people appreciate it. But when they stop and really take it in, or when they look up close, as if they've found some thread that they really like, it's an amazing experience."

Whatever comes next for Sam, she knows she's on the right path for career satisfaction and personal fulfilment.

"I think what we see and visualise every day has an effect on us, and it should be valued for the ideas and perspective it brings. For me, I know I can't stop doing it. During periods where I haven't been making art, my life hasn't been what I want it to be. I just have to learn how to make space and find the balance."

Turn to page 42 to see how creativity can positively impact your wellbeing.

Above Sam uses Japanese watercolours and oil paints to depict New Zealand bush and river scenes, such as her colourful work, 'Cockles'. **Opposite** The Auckland-based artist in her studio.

Art in the Park 2026

MAS is the Principal Partner of Art in the Park, New Zealand's world-class art show. Held at Eden Park from 12–15 November, the event transforms our national stadium into the country's most unexpected gallery. To find out more, visit artinthepark.co.nz.

Photography Reuben Looi

> *We still don't know what causes it. We've got some ideas, but ultimately, we don't have one cause.*

The mystery of endometriosis

It's a condition that affects around 1 in 10 women, but endometriosis is still commonly misunderstood by doctors and patients alike. Health journalist Niki Bezzant talks to MAS Member and endometriosis specialist Dr Michael Wynn-Williams about recent discoveries regarding symptoms and causes, plus possibilities for future diagnosis and treatment.

For generations, endometriosis – a painful reproductive condition marked by heavy, painful periods and fertility issues – has been dismissed as simply a 'women's problem'. But scientists are increasingly discovering that the reality is far more complex.

Evolving evidence suggests that endometriosis may be a whole-body inflammatory disease involving the immune system, hormones, genetics and even the gut microbiome. For the estimated 120,000 New Zealanders living with the often-debilitating condition, which causes endometrial-like tissue to grow outside the uterus, this shift in understanding could pave the way for better diagnosis, more effective treatments and, ultimately, improved quality of life.

MAS Member and renowned endometriosis specialist Dr Michael Wynn-Williams has spent his career treating patients with the condition. Yet despite decades of research, he acknowledges there is still much scientists don't understand about it. In fact, a 2023 editorial in the International Journal of Molecular Sciences described it as an 'enigmatic disease' – a characterisation Michael agrees with.

"Endometriosis is very complex," says the Auckland-based gynaecological surgeon, who returned to New Zealand in 2020 after 20 years abroad – 3 in the UK and 17 in Australia. "We still don't

Dr Michael Wynn-Williams is a highly experienced laparoscopic surgeon, a dedicated gynaecological educator and a staunch advocate for women's health.

know what causes it. We've got some ideas, but ultimately, we don't have one cause. If we did, we would have a much sharper cure than we do now. We don't have a cure and we have very blunt treatments."

As well as his private practice, Michael heads the Minimal Access Gynaecology Service (MIGS) at Auckland Hospital, is the President of the Australasian Gynaecological Endoscopy & Surgery Society (AGES), and Training Director of their Advanced Training Programme. He is also an active member of the Auckland Hospital Women's Health Pain Service.

A disease of multitudes

Though it's thought around 1 in 10 women suffer from endometriosis, diagnosis remains tricky; it takes an average of 8 years to be diagnosed.

Part of the challenge, says Michael, is that endometriosis can present very differently from one person to the next. Some women have extensive disease but relatively mild symptoms, while others experience debilitating pain despite limited visible endometriosis. Others have no symptoms at all.

While awareness and research funding are improving, Michael says endometriosis has long suffered from what many experts describe as medical misogyny – the tendency for women's symptoms and pain to be minimised, dismissed or under-researched.

Michael also believes part of the reason progress has been slow lies in the fact it's not a life-threatening condition.

"It's not cancer, so that puts it a rung down in importance [in medicine]," he explains. "But there's so much research showing that the effects of endometriosis and endometriosis pain are just as bad as having cancer."

But as understanding of endometriosis has evolved, so too has recognition that its effects extend far beyond painful periods. Fatigue, migraines and brain fog are increasingly recognised as part of the condition, reflecting its links to chronic inflammation and persistent pain. Research has also associated endometriosis with an increased risk of cardiovascular and metabolic disease later in life.

Michael believes one reason the condition has proved so difficult to understand is that endometriosis may not be a single disease at all. Instead, it may encompass several distinct disease processes that present in different ways and affect different parts of the body.

Most cases involve tissue growing →

They're educating hundreds of children about periods and pain, what's normal and what's not. It's so important.

Above Michael says the wide-ranging symptoms and causes of endometriosis, as well as the different ways the disease presents itself from patient to patient, make diagnosis extremely difficult.

within the pelvis, but endometriosis can also affect organs such as the bowel and urinary tract. In rarer cases, it has been found higher in the abdomen and even close to the heart, highlighting just how far-reaching the disease can be.

Research revelations

There has been more exploration of the causes of endometriosis in recent years, leading to some interesting discoveries and theories. Michael explains: "In terms of what causes endometriosis, it's got something to do with the immune system, but it's not an autoimmune disease. We think it has something to do with stem cells, and then genetics as well; not just genetics, but epigenetics – the effect of the environment on your genes."

Another area of scientific exploration is the microbiome, the idea that changes in gut and reproductive tract microbes are linked to how endometriosis develops, persists and causes symptoms. Research is ongoing.

Advances in diagnosis are also offering fresh hope. While laparoscopy was once the primary way to diagnose endometriosis, transvaginal ultrasound is now the preferred method. However, the condition can still be missed if scans are not performed and interpreted by practitioners with specialist expertise.

Looking ahead, Michael is optimistic about the development of biomarkers – detectable signals in blood, saliva or urine that could help identify endometriosis without the need for invasive procedures. He is involved in biomarker trials and believes they could become available within the next 3 years.

On the treatment front, global guidelines – including those from the Royal Australian and New Zealand College of Obstetricians and Gynaecologists – increasingly steer towards exploration of other methods of treatment, rather than surgery alone. New hormonal treatments are also an important step forward.

"Surgery is good, and surgery can be life changing," says Michael. "But doing multiple operations is often of no benefit. We can do surgery and it doesn't make a difference to the pain, or it might even make the pain worse."

Because of the multifactorial nature of endometriosis, he says treatment should involve multidisciplinary care. That might include pelvic physiotherapy, pain psychology, targeted hormonal treatment and other pain management.

Michael and his Endometriosis NZ colleagues are advocating strongly for women. He points to the great blueprint in Australia, where a National Action Plan on Endometriosis (NAPE) is making multidisciplinary care more accessible and including education. Part of this is the PPEP Talk (Periods, Pain and Endometriosis Programme), a highly successful schools-based initiative teaching kids about pelvic and period pain and endometriosis. "They're educating hundreds of children around Australia, boys and girls, about periods and pain, what's normal and what's not. It's so important," says Michael.

Endometriosis NZ also recently applied for funding for 2 new medications from Pharmac: Visanne and Ryeqo.

In the meantime, Michael offers advice to GPs, who are often the first professionals women see with pain. "Listen to your patients. The key thing is to recognise that if they're coming to see you repeatedly for period pain, there is an issue."

And his advice for women? "Trust yourself. Don't gaslight yourself, which is what people do on top of being gaslit by the system. Trust yourself and if you're not happy, get a second opinion."

Scan here for more about endometriosis, or visit **mas.co.nz/endometriosis.**

Photography Reuben Looi, Ainsley Duyvestyn-Smith, David Dunham, Getty Images and supplied.

Everyday endo warriors

Adele O'Leary

51, Wellington, teacher and writer

Adele suffered excruciating periods for much of her adult life, yet it wasn't until she struggled to get pregnant at 29 that she got an endometriosis diagnosis. She went through several surgeries to remove the disease and went on to have 3 children.

"I battled through extremely painful periods when they came back after each pregnancy," she recalls, adding that the contraceptive pill had dulled her symptoms. "But I just thought, 'This is the price I'm willing to pay to have the family I want.'"

Adele "soldiered through" until her early 40s, when she had a hysterectomy. It was during the procedure that adenomyosis was discovered, a related condition where endometrial-like tissue grows into the uterine muscle wall. Evidence now suggests around 70% of people with endometriosis also have adenomyosis.

"Since the hysterectomy, it's been amazing," Adele says. "I've had no pain. My life has turned such a corner." Still, she admits, the removal of an organ is a drastic way to get relief.

Ainsley Duyvestyn-Smith

35, Auckland, photographer and communications executive

Ainsley has spent most of her life battling debilitating endometriosis pain. She'd always thought that because her mother suffered similar pain, her excruciating teenage periods were "just part of the deal of being a woman".

Her other symptoms – severe abdominal pain and gut issues – were not recognised as related, even by her. Visits to doctors about her pain were unhelpful, and hospital admissions were inconclusive. Over the years, she was told by different doctors that her pain wasn't enough to prove endometriosis, and that she was seeking a diagnosis because endometriosis was "trendy".

"One of [the doctors] told me it was just 'learned' pelvic pain, which didn't explain why my periods were so painful in the first place. I thought, 'This doesn't make any sense.'"

She remembers times when she didn't want to be around anymore. "I was lying in bed wishing not to wake up, basically. I was just so sick of being in pain all the time."

Ainsley had surgery, which was effective for a few months until a bout of Covid-19 sent her spiralling into more pain, severe depression and fatigue. Now, she's using a hormonal progesterone treatment, which has made a huge difference to her life. "I've slowly been getting my energy back. I'm getting my life back now."

Determined to use her experience to advocate for others, she launched Now You See Me, an empowerment project featuring stories and photos of women from all over New Zealand who have been on endometriosis journeys. A free exhibition of her work is running from 8–13 September at Thistle Hall Community Gallery in Wellington.

Ainsley is philosophical about her own situation. "I feel very grateful to be where I am at the moment, but also very aware that this isn't going to last forever. So I'm trying to make the most of it while I can function."

Below Ainsley's 'Endo Empowerment' photography spotlights endometriosis sufferers from across New Zealand.

Lighting the way

For many medical professionals, placing IVs can be a particular pain point of the job. MAS Member Dr James Stone has developed a bright solution to make this common clinical procedure easier and more efficient.

Placing an IV drip into the arm of a patient is a routine procedure that is performed millions of times a day by clinicians all over the world. Given those numbers, and the fact that it's a precursor to numerous medical procedures – from the everyday to the emergency – you'd think it was a straightforward matter, with a high strike rate.

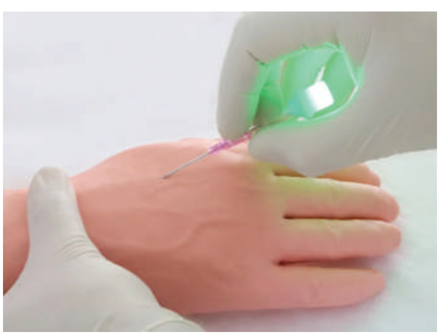
In reality, it's a complex manoeuvre that is hard to get right. Someone who knows the frustrations first-hand is Dr James Stone, a dental surgeon turned entrepreneur with a pioneering solution to the problem that is set to go global.

"I still remember the first IV I did," he says, reflecting on his time as a graduate working in the maxillofacial department of a hospital in Manchester. "The patient was watching me nervously as my hands were shaking. I said to them, 'It's going to be fine,' but it wasn't.

"It probably took 6 months of doing them every single day to get to the point where, I wouldn't say I was confident, but more often than not, they were going in."

After 2 years on the job, James says he would have described himself as 'average' at inserting IVs, which statistically still means a 35% failure rate. And there are repercussions for that failure rate too. "It's not just the pain and the bruising for the patient, it's other complications like increased likelihood of infections and delayed treatments when it's not successful," he says.

When he moved to New Zealand in 2012 and began working in a dental practice, James became the go-to guy for placing IVs ahead of wisdom tooth surgery. As he was doing it less frequently, however, he felt his skills were slowly lapsing. Fed up with finding it hard, he had a bright idea, literally: an IV catheter attachment with a pressure sensor that instantly lights up green when the needle successfully enters a vein.



Clockwise from above Dr James Stone; the Cannulight needle attachment; a device training session with nurses in Wellington.

While the initial concept for Cannulight (as it's now called) was born 8 years ago, it was another 4 years before a working prototype was created. In true Kiwi fashion it was made in a garden shed in Auckland, and James was the first guinea pig. "I stuck it in my arm while my wife was filming me and it worked! I sent that video to a few people and it kind of went crazy from there."

James was then joined by Mike Munley, formerly of the Medical Technology Association of New Zealand (MTANZ), who came on board as COO, and with interest from a design manufacturer as well, everything started moving in the right direction.

Still, it wasn't an instant transition into successful entrepreneurship. "There were definitely days when I'd wake up and think, 'What am I doing? This is a complete waste of time. It's not going to work. No one's going to buy it.' But then every so often we'd have a big win and that kept us going," says James.

International interest

The big wins came in the form of the first in-human test (James in his kitchen); then the Royal New Zealand Navy trialled it as part of a simulated missile attack on a ship; and then they won funding from the Pentagon in the US. "When that happened I was kind of in shock!" James recalls.

With the help of New Zealand Trade and

Enterprise (NZTE), the Cannulight team had been given the opportunity to deliver a 15-minute pitch of the product as part of a competitive programme run by the US military. From among thousands of applicants worldwide, they got accepted into the programme and are only the third New Zealand company ever to do so.

This meant more money to further test the Cannulight device, and also the chance to develop and test an infrared version that would make it easier to place IVs in low-light conditions with night-vision goggles.

James says the greatest win yet, however, has been getting Cannulight directly into the hands of medics on the front line in Ukraine. "To think that our product, made here in New Zealand, is being shipped to a war zone in eastern Europe, where people are using it and reporting positively on it, is fantastic."

The next step on Cannulight's journey will be receiving approval from the US Food and Drug Administration (FDA) and the European Medicines Agency (EMA), which could come any day now. This will open the door for Cannulight to be sold into hospitals too.

While James is not yet resting on his laurels, it's certainly looking good. "There are still some things that could go wrong," he says, "but at this stage, they're probably things we can fix."

Forward thinking

Certainly entrepreneurship is not for the faint-hearted, but nor is it ultimately compatible with another full-time job. Over the past few years, as things have taken off, James has been slowly retreating from dentistry so that he can commit more time and energy to Cannulight. While it's been a leap of faith, he says he's lucky to have his wife and 2 kids right behind him.

"Lisa's been amazing. I've come up with crazy, silly inventions before and she has kind of rolled her eyes, but with this one she's been incredibly supportive."

The schedule is full-on right now, with James regularly travelling to the US for trade shows and conferences. Ultimately, however, he feels there will come a time when he can step back and let Cannulight continue on its own trajectory.

"I feel I've been very useful on the journey so far, because up until now it's really been a research and development project. It's medical, it's regulatory, and these are things I understand. The next stage is the commercialisation and launch of a new product, and on that I have very little clue. I think as a start-up founder you have to know where your limits are."

Possible next steps are that Cannulight could be acquired by a larger medical company, or it will continue independently with James handing over to local market experts in the US and Europe to steer the course. While it's too soon to relax just yet, there's no doubt it's been a massive achievement that will make life better for patients and the people who care for them.

As James says, humbly, "I do sometimes think in 10 years time I'll look back and be pretty proud of what we've done."

Words Nicky Dewe **Photography** Getty Images and supplied

Advice from *Aunty*

Young Māori parents make careful money decisions every day, often managing real complexity on limited resources and in systems that were not built with their lives in mind. With help from MAS Foundation, a new programme is set to support financial wellbeing for whānau.

It's no secret that many young people face financial challenges as they come of age in a cost of living crisis and with the constant pressure of consumerism.

Receiving wisdom from a trusted family member when it comes to budgeting and building resilience can be hugely beneficial. This concept is the basis of Kōrero Pūtea with Aunty Āwhi (Money Talk with Aunty Āwhi). It's a new programme preparing for its first pilot from Ki Tua o Matariki, a kaupapa Māori service supporting young parents, particularly in those critical first 2000 days of their pēpi's life.

"We provide a suite of wraparound services for our mātua taiohi (young parents), including housing, social care, training and employment," explains Chief Executive Zoe Witika-Hawke (Ngāti Pāoa, Ngāti Hako, Ngāti Tamaterā). "But we came to realise that there was an important missing element in terms of their holistic wellbeing. We want our new māmā and pāpā to be stress-free, so they can focus on their tāmariki, but the financial space is an area of great stress for our whānau."

So the idea for a new initiative was born. Recognising both the need and the value, MAS Foundation came on board to fund the development of this targeted approach.

"The cost of living and the constant pull of consumerism place real pressure on our young whānau," says Zoe. "There is also the constant promotion of flash, shiny new things everywhere, and a wider narrative that judges whānau by what they can buy. We wanted to build something that pushes back on that, and starts instead from what our young parents already know and carry.

"We see young parents who are already making difficult decisions every day about what to pay, what to delay and how to look after their tamariki on very little. That's a capability that too often goes unrecognised."

To build the programme, the team drew on a range of sources and expertise. First, a cultural framework was developed with Te Whare Tapa Whā at its centre, recognising financial wellbeing as inseparable from wairua, whānau and hauora.

Project Manager Natalie Vincent (Ngāpuhi) says, "We worked with a leading financial capability educator and professional designers, and grounded everything in mātauranga Māori. But it was our young parents who shaped the design. They were

Opposite page Education and Employment Team Lead Anita Lomas works through the programme with some young māmā. **Clockwise from right** Natalie Vincent (right) is the Project Manager for Kōrero Pūtea with Aunty Awhi; CEO of Ki Tua o Matariki, Zoe Witika-Hawke; one of the resources created for the programme is a reflection journal.

the authority on what this programme needed to feel like, sound like and do."

Rather than bearing an intimidating budgeting-related name, Zoe says the programme is built around a trusted character, Aunty Āwhi. "It's based on the idea that we've all got that aunty who gives you good guidance, but also some stern kōrero about managing your money and your pūtea (funds) for the future. She wants to ensure that you are financially safe and happy."

For authenticity, the team also spoke to many actual aunties from across the motu. Aunty Āwhi is a character, but the wisdom she carries is real, drawn from the lived experience these aunties shared, and is incorporated into the programme modules. Zoe says, "As you travel through the programme, there are group-based activities, individual activities and real-life stories. It's really interactive stuff with lots of tips and tricks along the way."

The course can be followed in te reo Māori or English and while it's designed to address the missing support for Māori in this area in particular, it works well for non-Māori too. "It's for everyone," says Zoe.

Currently in the trademarking process and preparing for its pilot, Kōrero Pūtea with Aunty Āwhi is already drawing early interest from across the sector. Natalie says, "We've had interest from financial institutions like banks, as well as Government agencies, businesses and community groups, because they know the existing resources aren't meeting the needs of this group."

The intention over time is for the programme to become self-funding, with interested parties and relevant organisations purchasing the training in order to pass on the knowledge. "We can share it and we can train the trainers," explains Zoe, "and this model allows us to then continue supporting whānau ourselves too."

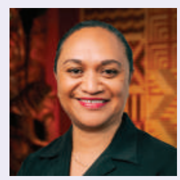
Zoe also points to the longer term benefits this type of initiative can bring. "If our young parents can start their journey well, with some solid resources, advice and support, then there's a good chance that their tamariki will follow.

"Thanks to the support from MAS Foundation, we've been able to create a high-quality, highly attractive programme, ready to put into the hands of our whānau," says Zoe. "What we hope to see is young parents stepping into financial systems with their own knowledge, their own whakapapa and their own mana intact. We want them to feel confident and certain about what they can do, and to be rangatira of their own financial futures, for themselves and for their tamariki."

Words Nicky Dewe **Photography** Emily Chalk

Julie says: "Financial wellbeing is about more than money; it's about giving whānau the confidence, knowledge and tools to make informed decisions that strengthen their futures. By supporting Ki Tua o Matariki to develop the Aunty Āwhi kaupapa, we're investing in young parents so they can build stronger foundations for themselves, their tamariki and generations to come."

Mafi says: "This is a unique financial capability programme that prioritises our most vulnerable populations and is co-designed with those communities themselves, reflecting a fundamental Foundation value that lasting solutions are found within those very same communities. While the programme is kaupapa Māori in design and delivery, it is inclusive of all parents who wish to engage in this approach."



Heads of MAS Foundation

Dr Julie Wharewera-Mika (Left)
Ngāti Awa, Ngāi Tuhoe, Te Whānau-a-Apanui

Mafi Funaki-Tahifote (Right)
Tongan (Tongoleleka – Ha'apai, Kolofo'ou, Ma'ufanga, Tofoa – Tongatapu)

mas foundation

Scan here for more on Kōrero Pūtea with Aunty Āwhi, or visit **mas.co.nz/aunty-awhi.**

Debt *versus* investing

If you've ever wondered whether you should be focused on paying off debt or growing your investments, you're not alone. MAS Head of Growth (Investments), Jacob Hattersley, breaks down the benefits of both options.

It's one of the most common financial questions out there: Should I pay off all my debt or start investing? And the truth is, the right answer isn't always either/or. Sometimes, it's both.

Before figuring out the right path to take, it's worth understanding that not all debt should be considered in the same category. You may have heard financial advisers talk about good debt versus bad debt. A simple way to understand this is that some debt can actually work for you.

Jacob Hattersley
MAS Head of Growth (Investments)

When you borrow money at a reasonable rate to buy an asset that is likely to increase in value over time, like a home or business, or you take out a student loan that might lead to greater earning potential in the future, that can be considered good debt. It's debt that may lead to an improvement in your financial position in the long term. It's worth noting, of course, that even good debt can become a problem if you borrow too much or can't manage the repayments.

Bad debt, on the other hand, is when you borrow money at a high rate to purchase something that is going to lose value, e.g. most consumer goods. An example of this is using your credit card, a hire purchase plan or a high interest personal loan to pay for items or experiences you can't currently afford. In this case, the debt is bad because those high interest rates mean you'll likely end up paying far more than the original purchase price for something that will quickly lose value.

Beware of bad debt

When it comes to investing versus paying off bad debt, the general rule of thumb is to pay off the bad debt first. The good news is that when you clear bad debt, you free up cash flow. That cash flow could then become money you invest going forward. No one wants to be worrying about credit card bills or a lingering personal loan later in life, so it's a good idea to eliminate the costly stuff first, then start investing to set your future self up to win.

Consider KiwiSaver

Here's something every KiwiSaver member should know: even if you're focused on paying off debt, good or bad, it's still smart to keep contributing to your KiwiSaver account. Why? Because your employer is legally required to contribute 3.5% (as of April 2026), but only if you're contributing at that rate too. This compulsory employer contribution rate is set to rise to 4% as of April 2028.

That's an instant, risk-free return. On top of that, the Government chips in with its annual Government Contribution of $260.72, providing you meet the contribution and eligibility thresholds.

When it comes to investing versus paying off bad debt, the general rule of thumb is to pay off the bad debt first.

That's money you don't want to leave on the table. Free returns are rare, so it's great to grab them.

While you're contributing, remember the powerful forces at play: long-term compounding and dollar-cost averaging. Small, regular contributions – through good markets and bad – add up over the decades. Time in the market beats timing the market every time.

Mortgage matters

When weighing up whether to invest or pay down your mortgage, a split approach can be worth considering. Extra repayments provide a certain benefit by reducing the interest you would otherwise pay. That's effectively a known return.

Current fixed mortgage rates are relatively low by historical standards. This raises the question of whether some capital could earn a higher return if invested. Returns from investing are uncertain and can vary over time, so this comparison is not straightforward.

If your cash flow allows, it can make sense to do some of both. Paying down the mortgage reduces your interest costs, while investing provides exposure to potential long-term growth, with the trade-off of short-term variation.

Over long periods, share markets have often produced positive returns, although outcomes vary from year to year, and past performance does not guarantee future results. For New Zealand investors, currency movements can also influence outcomes.

A balanced approach, with steady mortgage reduction alongside regular investing, can help manage these trade-offs. The right mix depends on your risk tolerance, time horizon and need for certainty versus growth.

Student stats

Now, let's talk student loans. If you're a PAYE earner on the right tax code, 12% of your pay automatically goes towards any student loan you may have. For most people living in New Zealand, that loan is interest free, meaning the amount isn't growing over time and inflation is actually eroding the real value of what you owe. Therefore, if you do have money to spare once those payments have been deducted, then making regular contributions into an investment fund is a great option that your future self will thank you for. For Kiwis living overseas, interest does apply, so it might be a different matter.

Pick your path

As you can see, there are cases where paying off debt and investing simultaneously can make good sense. However, it's also completely understandable that some people simply prefer the peace of mind that comes with being debt-free. Reducing stress can sometimes be more important than potential earnings from investments.

Age and stage can also play a part. Younger borrowers have time for compound investment growth to work its magic, making investing attractive despite debt. Those nearing retirement might prefer to prioritise debt elimination as they enter their non-working years. The sweet spot for most is a balanced approach that evolves as you age.

Talking to a financial adviser is a good way to figure out what's right for you and, as a MAS Member, you have access to an Adviser at no extra cost.

Photography Getty Images

Scan here for more money tips, or visit mas.co.nz/debt-versus-investing.

Scam *survival*

With technology and AI making scams more sophisticated, it's important that you know how to protect yourself and your data. MAS Cyber Security Lead Min Kim shares some simple steps you can take to stop scammers in their tracks.

"As New Zealanders, we're typically very trusting," says Min Kim, MAS's Cyber Security Lead. "It's part of our Kiwi nature, and it's a great quality to have, but it can make us easy targets too."

What Min is referring to specifically is our vulnerability in the face of increasingly sophisticated financial scams. It's a sad truth that in today's world, fraudulent activity is not only extending in reach but also being aided by new technologies like AI. This makes the risk greater than ever.

Min says that in the past, fraudsters have been focused on populous places like the UK, EU, US, and even Australia, while New Zealand has been off the beaten path. This is no longer so.

"Unfortunately, we're starting to be more on the radar and it's important that we become more cautious when something doesn't feel right, rather than taking things at face value."

Putting on the pressure

A first step to staying secure is to recognise the common techniques that scammers use. "The easiest route they have for getting your information is through you," says Min. "It's not by trying to hack your password or hack a company – that's much harder for them. If they can get your details directly from you, they don't need to hack anything. And from there they can sign in to your accounts themselves."

So how do scammers convince people to willingly hand over private data?

"Their first move is to immediately make you feel flustered or worried," says Min. "They aim to contact you at a bad time, like at night, when your attention span is at its weakest or you're most tired, so you're easier to crack.

"If someone calls you and asks for personal details, don't give them out. Obtaining your name, date of birth and an account number could be all they need to then pose as you somewhere else."

Sense check it by asking yourself, "Why would they be contacting me about this?" Then apply a fail-safe method: Hang up and call the organisation back using a number you already have for them.

Enter AI

Emails and texts asking for information are common too, and the fakery is getting

If they can get your details directly from you, they don't need to hack anything... they can sign in to your accounts themselves.

Min Kim
MAS Cyber
Security Lead

harder to spot. "Historically, they would have tell-tale signs like bad grammar or spelling. Now scammers will run the copy through AI to correct it first."

Min says with an email, always check that the actual address it came from is legitimate, rather than just the name that appears at the top, because scammers can type that part in themselves.

On social media, some scammers go as far as recreating a person's profile then using that to reach out to the person's parents or family members saying they urgently need money.

Worse still, AI now has the ability to copy voices, so if a scammer has a sample of your voice, they can script it to deliver a particular message, where it sounds like you are talking. "That's a step further than what we're currently seeing in New Zealand," says Min, "but unfortunately it may be where we're headed."

If you do feel that you've fallen prey to a scam, the first thing to do is contact the relevant financial institution and explain what has happened so they can freeze your account or stop any pending transactions. You can also contact the National Cyber Security Centre (NCSC) and report the incident. They track local trends and can give you specific guidance on recovering your digital ID and any other steps to take.

Staying safe

As well as being aware of tactics, we can also put our own preventative measures in place.

"It's an obvious one, but don't use the same password everywhere," says Min. "Have unique passwords for everything, and then use a password manager to store them. Apple has their own one built into iPhones, and Google has the same for Android devices. The big problem with reusing passwords is that if the site gets hacked, the hackers can then try that password against all of your accounts.

"If you're given the option to use two-factor or multi-factor authentication, always opt for it," Min adds. "Especially if it's to do with money or other sensitive data. It's the ultimate line of defence."

This method of verification, where you're sent an 8-digit code to your phone or email, is now part of the login process for the MAS Member portal. "Previously, Members would simply sign in using their Member number and password. Now it's through your email address, and every time we'll send a code to that email which you need to enter. It can feel like an annoyance at the time, but it really is there to protect you and your money."

A trusted source

Another area for caution: Increasingly, people are turning to AI for financial information. Min warns against entering specific details into a free AI tool, even though it may feel like you're talking privately to a friend. "There's a reason why things are free," says Min, "You're usually paying for it in some way." In this instance, you're providing data to the AI tool, with no way of knowing how it's being used.

If you do ask an AI chatbot for tips or advice, make sure you always check its sources and consider how its answers may be skewed. "Some AI tools give answers that are deliberately oriented towards what they think you want to hear," says Min. "They might also draw on information you've told them previously and use that to shape the answer, without seeing the whole picture, including information you haven't shared." As has now been well documented, AI systems can also have hallucinations, where they simply make things up.

"There is a reason why only licensed financial advice providers, such as MAS, are permitted to give regulated financial advice in New Zealand," says Min. "They must have the necessary training, ensure advice meets the appropriate standards, and keep your information safe."

To check if a company or person is registered in New Zealand to provide financial services, check the Financial Service Providers Register.

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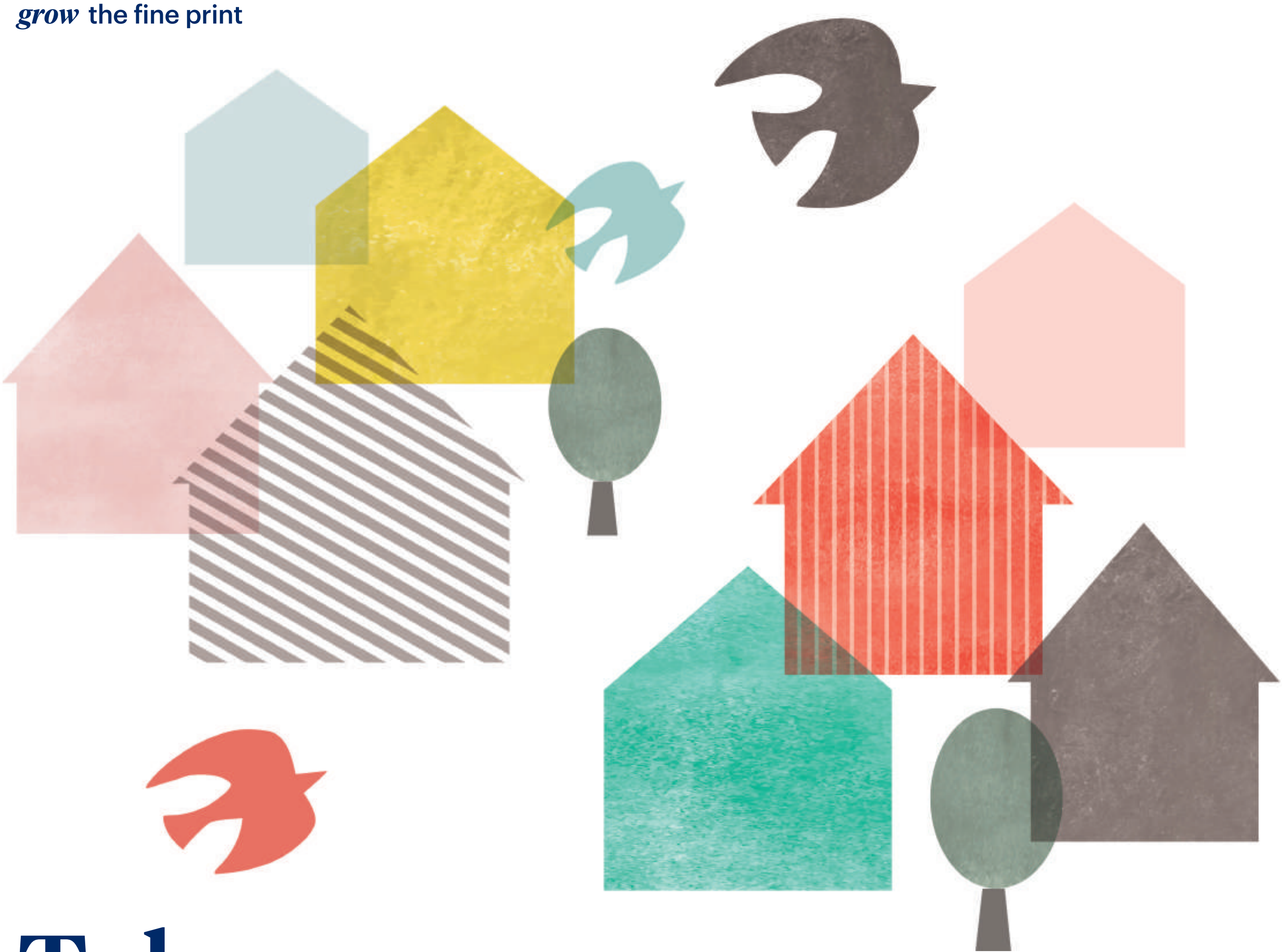
Photography Getty Images



Take *cover*

Is your insurance covering what it should be? David Saunders, MAS Product Manager – General Insurance, shares some key considerations to ensure you don't get caught out.

Most of us take out our first household insurance policy as we enter adulthood and then adjust it when we meet certain milestones and our lives evolve. It helps bring peace of mind and, in the best-case scenario, we don't have to think about it much more than that.

The catch is, in not thinking about it, people sometimes lose sight of exactly what's covered, to what value, and under what circumstances. Checking in on the parameters of your policy and staying up to date on details is a small act that can have a big impact. To help you avoid any surprises, we've highlighted some common knowledge gaps that can catch people out.

David Saunders
MAS Product Manager
– General Insurance

What's in and what's out

When it comes to any type of insurance, David Saunders, MAS Product Manager – General Insurance, says it's important to keep in mind what it's designed to do: Cover you when sudden, unforeseen events occur. If disaster strikes, be it fire, floods, an earthquake, an accident, a burglary or vandalism, that's when your insurance kicks in.

David says a common misconception, however, is that issues that result from gradual deterioration can also be claimed. In fact, wear and tear, lack of maintenance or issues like slow leaks that develop over time are not typically covered by house insurance policies. MAS may cover some costs when the loss has been caused by an internal water system that is hidden from sight, but it's worth noting that limits apply.

Another factor that people sometimes forget is that insurance companies don't cover the land your home sits on, so if a severe weather event or earthquake causes damage to the area under or around your home, this will be assessed by the Natural Hazards Commission (NHC). Often when there is damage to the land, there is damage to the house as well, so MAS will handle the NHC claim on your behalf, providing you with one point of contact for both claims.

Do your sums

Being clear on when you're covered is one thing, but having the right amount of coverage is also critical. The most common type of house insurance in New Zealand is 'Sum Insured' or 'Agreed Value'. This means your house is insured to a fixed dollar amount, which you've agreed with your insurer, and that's the maximum amount that will be paid out. It's important therefore that you set this accurately, reflecting what you'd actually need if you had to rebuild completely.

While most insurers do adjust sum insured policies annually for inflation, there could be other significant price fluctuations or economic factors to consider. "It pays to be conscious that certain costs, such as building materials and labour, can rise over time or spike during a widespread event," David says. "If your agreed value hasn't been updated since you took out the policy, there could be a shortfall if you have to claim years later. This is obviously something you want to try and avoid as best as possible." David suggests revisiting this amount when your policy renewal notice arrives each year, and make sure it still feels right.

An alternative house insurance coverage type, which MAS is one of the only New Zealand insurers to offer, is Full Area Replacement. Rather than insuring at a fixed dollar value, full area replacement means the insurer will pay the reasonable costs for a full rebuild to the same square metreage and condition of your house as it was before the loss.

This option takes the onus off the homeowner to correctly estimate what they might need. Note this is subject to MAS Underwriting criteria and acceptance, and Area Replacement is not available for all property. Where it is available, MAS require a supporting Sum Sure estimate, or if no estimate is able to be completed, then a valuation would be required.

Stay content

Contents insurance is another policy to keep track of and update as life moves on. There are 2 things to keep an eye on here. Check the amount you're insured for to see if it still accurately covers the total replacement value of your possessions. This value can climb gradually over time without people necessarily thinking about how that affects their insurance.

You should also update your policy if you acquire any individual items of high value. Most policies will have a set amount they'll pay out for individual items like art, jewellery or electronics – this is known as a 'single-item limit'. If you've got an item or items of higher value than the limit, you can increase your cover for those items specifically.

Ultimately, David says your insurance is there to work for you when a sudden, unexpected loss occurs, but staying across it is the best way to have peace of mind that the right numbers are in place.

"Checking your schedule on an annual basis when your renewal notice arrives is a good start. Or if you see something happening somewhere else, a weather event or an accident, have a think about your own situation: 'If that were me, what would I need to help me actually get myself back on my feet?"

If you have any questions about your insurance policy, reach out to the MAS Member Support Centre for a chat at 0800 800 627.

This article provides general information only, and is not intended to constitute financial advice. Before taking out any insurance product, you should carefully consider the terms and specific policy wording. Underwriting criteria will apply. MAS is a licensed financial advice provider. Our financial advice disclosure statement is available by visiting **mas.co.nz** or by calling 0800 800 627.

Photography Getty Images

Key moments to review your house and contents insurance

Renovations
Extensions or significant renovations can increase your property's overall rebuild value.

Moving house
A different sized home and/or a new neighbourhood will impact both your house and contents insurance.

Marriage or de facto partnerships
Combining households typically means merging your possessions and you should review your contents insurance in light of this.

Separation or divorce
Conversely, dividing households is likely to affect this too.

Starting a business
If you're keeping expensive equipment related to your business at home, it pays to check whether your contents insurance covers this.

Over the hill

Martinborough local Sara Bunny shares her top picks for sipping wine, stretching the legs and stellar stargazing in Wairarapa.

Tucked away behind the dramatic Remutaka Range, you'll find a spot that's relaxed enough to count Crocs as suitable attire for any occasion, but proud enough to pump out some of the country's best food and wine. A tenacious little blip of a region where the ink-black skies are world renowned for top-notch stargazing, where having no traffic lights is a serious point of pride, where the Golden Shears sheep-shearing contest once put the place on the map.

Like Wellington's quietly self-assured little sister, Wairarapa is an area that was under the radar for a while. But nowadays, visitors from across the country have cottoned on to its many charms.

Unless you're a high-roller with a helicopter, one of the main roads into town is over the winding Remutaka Range. Known simply as 'the hill' to locals, it can feel like you're in a pretentious car ad or on a slightly unhinged racetrack, depending on traffic levels and general vibes. A constant hot topic on the community Facebook pages and part of the Wairarapa psyche, 'the hill' is the geographical and psychological gateway to the region. Arriving this way is part of the true Wairarapa experience. Shed your big-city worries (and hopefully not your stomach contents) as each hairpin bend puts the capital further behind you. If you've ventured this far – about 90 minutes' drive from Wellington – you're in for a warm welcome.

Glass half full

Much has already been written about Martinborough, the tiny town (we're talking less than 2,000 residents) that turns heads internationally for top-tier wine. Here, it's not just about crowd-pleasing zingy savs or blush-pink brunch favourite, rosé. Local winemakers are getting experimental with low-intervention drops and delish riesling, while the dry climate and face-stinging frosts create the ideal growing conditions for the notoriously finicky, delicately thin-skinned pinot noir varieties.

With 20-odd wineries all a stone's throw from each other, Martinborough is a popular choice for hens dos (giggling groups in tiaras and sashes are a common sight in wedding season), romantic getaways and family

Opposite SH2 winding through the Remutaka Range. **Clockwise from above** Martinborough; the Gentle Annie Loop Track; Cape Palliser Lighthouse on the south coast; Stable's tasty treats; The Runholder.

gatherings. You can hire some wheels and join the tandem bicycle brigade, but most places are easily accessible on foot if pedal-pushing isn't your jam.

Top spots for food and drink include Palliser Estate, where a new chef is earning rave reviews; Nga Waka, boasting quite possibly the best pizza in town; Cambridge Road Winery for classic and slightly more offbeat drops; Ata Rangi for incredible wines that will impress even the pickiest palette; Moy Hall, a local lunch favourite; and The Runholder, where the stylish dining room and fancy sharing plates are perfect for a special occasion.

New in town is Rabbit by Coney, a relaxed outdoor wine bar off the main vineyard strip that feels like you're in your own private garden, and special mention has to go to local distillery Reid + Reid, where you can enjoy top-notch gin on the sun-drenched lawn out the back.

For breakfast, try Nara at Martinborough Memorial Square, or if you're going to Greytown, head to Stable (only open on weekends), a new spot just out of town which offers a cabinet groaning with doughnuts, cakes, cream buns and other sweet delights, plus great coffee to match.

Light me up

After a day of looking into a wine glass, spend the night looking up at the sky. This tiny region is globally recognised as an International Dark Sky Reserve, the second in New Zealand after Aoraki Mackenzie in the south, and one of just 27 in the world.

The stars are one thing, but on a clear night out here you might also be treated to what looks like swathes of glittering icing sugar scattered against the darkness. That's the Magellanic Clouds, tiny galaxies inside our Milky Way that are most visible in winter, and Wairarapa is one of the best places on Earth to see the stellar display. Take it all in with expert guidance and the use of a powerful telescope at Star Safari near Martinborough, or book a stargazing expert to come to you through astronomy tour group Under the Stars.

Looking for something less nocturnal? Hop on a bike or e-bike and check out the Remutaka Rail Trail, part of the popular Remutaka Cycle Trail. This all-ages track takes you through abandoned rail tunnels and across a suspension bridge, and you can book through Martinborough's Green Jersey Tours.

If that's all too strenuous, round off a morning of sauntering around the shops in town with a scenic drive out to the rugged south coast. While you're there, scoff down some of the region's best fish and chips at the Lake Ferry Hotel.

Or head north from Greytown along State Highway 2 to Masterton. Here you can check out the excellent art gallery Aratoi, or blow out the cobwebs on one of the many short walks at the foot of the Tararua Range – the Gentle Annie Loop Track is well worth it for panoramic mountain views without too much puffing required.

Tuckered out? That's only scratching the surface. Whether it's winter or spring, wine-soaked or something more salubrious, this little region is looking up. And here, you can be as laid back as you want to be: Crocs are always welcome.

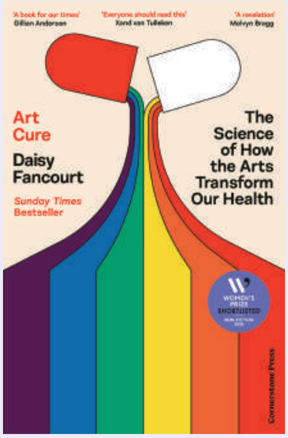
Photography Getty Images, Mark Gee, Jet Productions

Creative *power*

Engaging with art, whether creating it yourself or enjoying works made by others, is a simple but profoundly important human act. It can reduce feelings of stress and anxiety, put you into a meditative flow, provide a pathway for processing complex emotions and have a considerable effect on physical health and wellbeing. So here's how to expand your world in an artistic direction.

1 Explore the evidence

In her new book 'Art Cure', Professor Daisy Fancourt shares the cutting-edge scientific evidence for how the arts affect our minds, brains, bodies and behaviour. It looks at the whole spectrum of health, from how our day-to-day engagement in the arts influences our wellbeing, to how people can use the arts to support specific mental and physical health outcomes. It blends science with real-life stories and provides a 'daily dose' at the end of each chapter on how to apply the science to your own life to optimise your health. Daisy is leading a MAS webinar on the relationship between creativity and wellbeing – see page 5.



2 Start simple

Once you've realised the positive contribution art can make to your wellbeing, you'll want to get started right away. Daisy suggests an easy entry point is to put aside 10–20 minutes a day for artistic pursuits. But don't feel daunted: it doesn't need to be a major undertaking. Could you dedicate some time to doodling in a notebook? Or maybe grab some knitting needles and start a simple project? Singing in the shower, dancing in your kitchen, taking photos of your favourite people… these all count! We know we need to make time for daily exercise, so why not do the same for the arts?

3 Get inspired

Waiting for the muse to strike? You could give it a nudge by taking a turn around your nearest gallery, poring over a beautiful art or picture book, or hopping online and doing a virtual tour of a famous institution like the Louvre in Paris, the British Museum or New York's Guggenheim. This could prove to be just the kick-start you need, as studies have shown that engaging with artwork which affects you in some way can prime you for your own state of creative inspiration. Once you know what you like, follow artists and makers on social media to stay connected to their work.

4 Find your people

If you're a social creature by nature, then joining a local art group, creative writing circle or craft collective might help you stay engaged with your project. Creativity thrives in community, and the connections you make through a shared interest can be really rewarding in their own right. If an in-person group isn't doable, you can find virtual communities via platforms like Facebook or Reddit. There are also amazing online courses through programmes like MasterClass, where you can learn everything from film-making to spray painting in lessons delivered by world-renowned experts.

5 Make a purchase

Maybe you'd like to add more art to your walls, but the world of collecting feels a little confusing... and expensive. In fact, there are many ways to fill your home with art that don't cost the earth. You could visit student shows and support talented young artists as they're just emerging, look around in charity shops or check out estate sales and auctions to find something you love. Online marketplaces like Etsy sell creations by artists from all over the globe.

6 Check your facts

If you're buying a significant piece with a higher price tag, there are a few practices you should undertake to make sure you're paying the right price for an authentic work. Do some research about the artist to see if they have an existing body of work, an exhibition history and any information about what previous works have sold for. Factors like the size of the artwork, the complexity, how well established the artist is and the scarcity of their work will all affect the cost. When buying from a gallery, request a certificate of authenticity (COA) so you have documentation to store in your files.

7 Keep it cared for

Once you begin collecting or creating art, it's worth thinking about how to preserve and protect it. Works on paper and canvas are sensitive to light, humidity and temperature, so hanging pieces away from direct sunlight and in stable environments will help prevent fading and deterioration. Where possible, opt for UV-protective glass when framing, and store any unframed works flat in acid-free sleeves or folders.

8 See that it's safe

As well as keeping it safe yourself, it's also important to have peace of mind that your art is appropriately insured if something goes wrong. MAS Contents Insurance provides cover for works of art (including paintings, sculptures, ornaments and antiques) up to $25,000 for any one item. If you have higher-value pieces, these will need to be listed as 'specified items' on your policy schedule. The policy also includes a 'pairs and sets' clause, which means if one part of a set is irreparably damaged or lost, MAS will settle your claim as if the entire pair or set was involved in the loss. Terms and conditions apply.

Words Nicky Dewe **Photography** Getty Images

Stacks of soul

MAS Member and musician Scott Towers' Havelock North home is a symphony of colour and character.

After falling in love with the region while touring with his band Fat Freddy's Drop, musician Scott Towers, along with wife Fiona and their son Salvador, made the shift from Auckland to Hawke's Bay in 2016.

They purchased a 1920s stucco farmhouse on a couple of acres in Havelock North, and saxophonist Scott says it was the proportions and potential that drew them in.

"There was lots to love about the property – masses of space, which we quickly filled up with sheep, chickens, 2 dogs and a cat – but there was definitely work to be done, both inside and out."

Front of mind was preserving the heritage character and charming period features of the home, while tastefully updating it to suit their tastes.

"We're not that big on a house that feels too white or clinical," MAS Member Scott says. "We love being in a light, white environment when we're at a beach house or city apartment, but here in the countryside, with all the greens, golds, blues and browns surrounding us, we like to reflect that, as well as complement the rimu joinery and mataī flooring."

First on the hit list? Stripping the worn carpet and tired wallpaper and changing the interior colour scheme. "One room was painted in a shade I can only describe as a bit like margarine, another was a deep lavender. It just wasn't our taste," says Scott.

The Hastings Resene ColorShop quickly became their go-to source for colour, advice and inspiration as they overhauled each space, which included an office for PR powerhouse Fiona and a studio for Scott, both painted in Resene Atomic.

The studio is a place for Scott (aka Chopper Reeds) to revel in music, both creating it and listening to it, and a space where he can store an impressive record collection curated over years of world tours with the band.

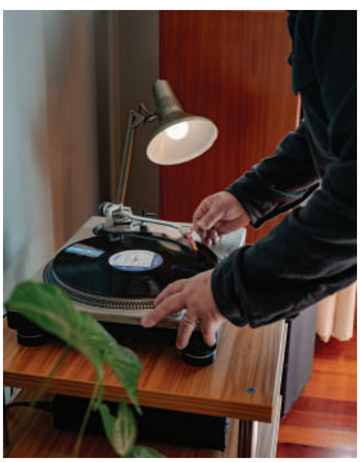
"I probably own about 4,000 records. For me, it's not about growing the collection. It's about having a better selection of the ones I really love. I spend more and more time in this studio because it's a good place to be. It's full of records and musical instruments and it's probably my favourite room in the house."

Want to share your home? We'd love to feature it in onMAS. Email **onmas@mas.co.nz**.

Lessons learnt

It was a process of trial and error to create an ambient and inviting feel in the sitting room, with the first grey tone the couple painted it being a non-starter. "It made the room so lifeless and cold, like walking into a giant refrigerator," says Scott. A friend in interior design put them straight, advising Resene Inside Back as a better choice. "It was a lesson in remembering to ask for help when you need it. It's incredible to see the impact a slightly different shade can make to a room. It was transformed into a place that's snug and inviting, using nothing but colour."

Above Resene Tuna was chosen in the kitchen to complement the stainless steel appliances. **Below (clockwise from left)** Resene Inside Back creates a cocoon-like vibe in the lounge; Resene White Pointer enhances the sense of space in the dining area; Fiona's office features walls in Resene Atomic. **Opposite** Scott in his studio and haven with his extensive vinyl collection. When he's not touring, practising his sax or DJing, Scott is a keen DIYer and always has a home renovation project on the go.



Get the look

Resene White Pointer

Resene Inside Back

Resene Atomic

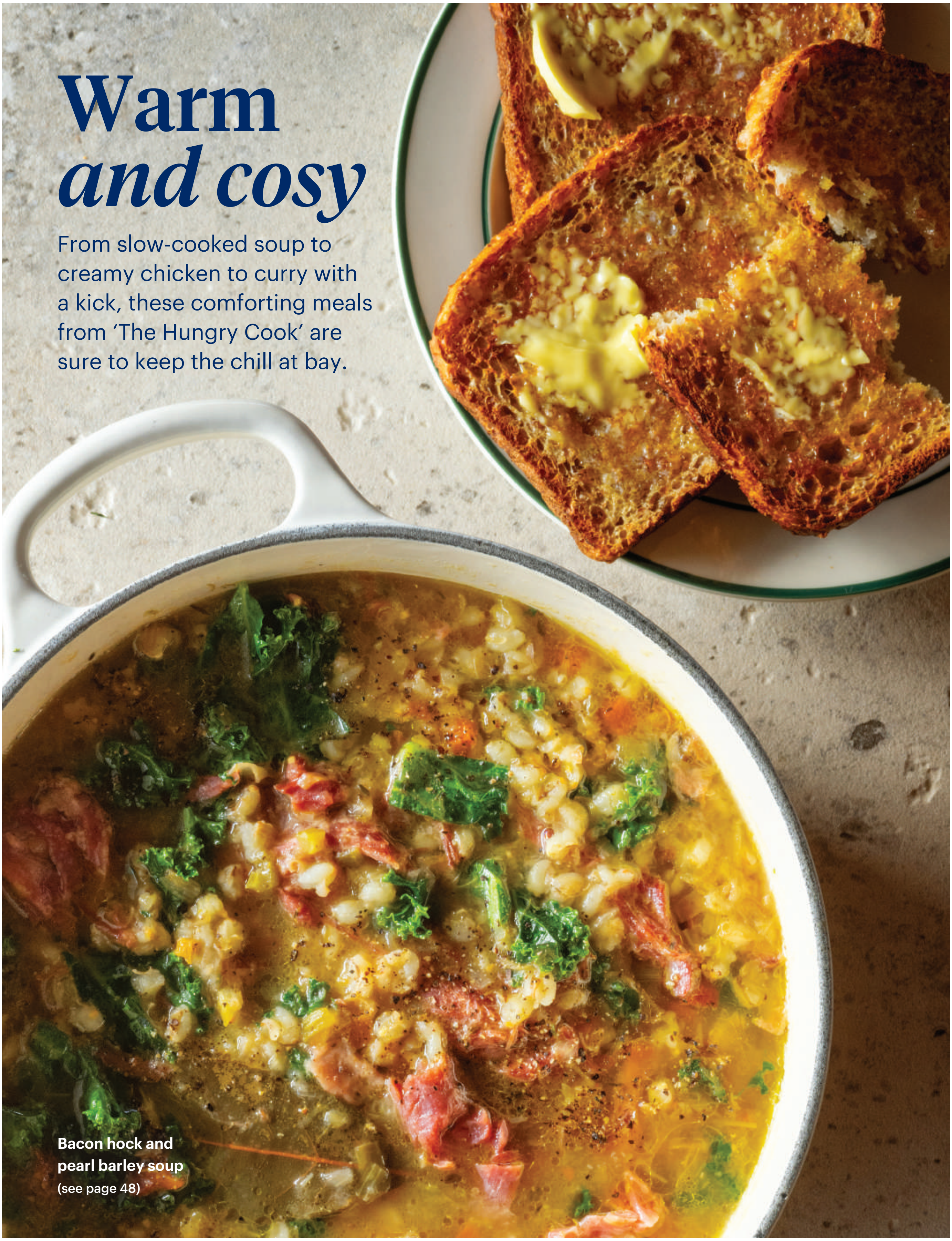
Resene Tuna

For more colour ideas and inspiration, visit your local Resene ColorShop or use the free Resene Ask a Colour Expert service, resene.co.nz/colourexpert. See Resene's top 20 colours at resene.com/top20.

Photography Florence Charvin

Warm *and cosy*

From slow-cooked soup to creamy chicken to curry with a kick, these comforting meals from 'The Hungry Cook' are sure to keep the chill at bay.



Bacon hock and pearl barley soup
(see page 48)

Heartbreak chicken (tarragon chicken with creamy leeks)

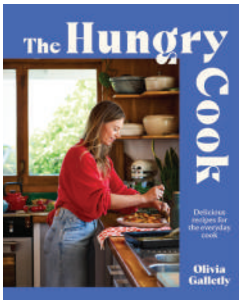
This is the dish I'd serve to anyone going through a tough time. It's a meal I turn to whenever I need cheering up. I like to serve the chicken with fettuccine, crusty fresh bread or mashed potato.

Serves 5

1 tbsp olive oil
30g salted butter
5 chicken thighs, skin on
1 leek, trimmed and diced
3 garlic cloves, chopped
1 tsp dried tarragon or ¼ cup fresh tarragon leaves, loosely packed
3 tbsp white wine
Sea salt
Cracked pepper
125ml cream
¼ cup finely grated parmesan

1 Preheat the oven to 180°C regular bake.
2 Heat the oil and 20g of the butter in an ovenproof dish over a medium heat.
3 Season the chicken thighs then place them skin-side down in the pan. Fry until the skins are golden and crisp. Turn them over and quickly brown the other side. Remove from the pan and set aside. They don't need to be cooked through at this point.
4 Reduce the heat to low-medium and add the leek to the pan. Fry for 15 minutes, stirring frequently. Once softened, add the garlic and half the tarragon. Pour over the wine, bring to a simmer then remove from the heat.
5 Put the chicken thighs skin-side up on top of the leeks. Top with small blobs of the remaining butter and the rest of the tarragon, and season with salt and pepper. Place in the oven, uncovered, and bake for 30 minutes.
6 In a jug, mix together the cream and grated parmesan. Season with a little salt and a good grind of pepper. Pour around the chicken thighs then bake for a further 5 minutes. Season to taste if necessary.

Food has been a lifelong passion for Auckland-based cook Olivia Galletly, and her first book is the culmination of a decade of recipe development and experimentation. 'The Hungry Cook' evolved from Olivia's popular blog of the same name, and contains a mix of her childhood favourites, crowd-pleasers for entertaining and dishes inspired by her travels, plus a selection of cocktails and sweet treats. Here are 3 of her comforting creations you can try for yourself.



Extract from 'The Hungry Cook' by Olivia Galletly. RRP $45. Published by Allen & Unwin NZ.

Coconut fish curry with eggplant and tomatoes

This dish is loosely based on one of the delicious curries I ate while travelling around Sri Lanka. I like to serve it with basmati rice and roti.

Serves 4

2 medium red onions
1 red capsicum
2 tbsp vegetable oil
2 tbsp finely grated fresh ginger
2 garlic cloves, finely chopped
1 medium red chilli, finely chopped
2 tsp cumin seeds
2 tsp ground cumin
2 tsp ground coriander
1 tsp ground turmeric
10 cardamom pods
1 cinnamon quill
30 curry leaves
1 eggplant
330g vine tomatoes, halved
½ teaspoon table salt
100ml water
200ml coconut milk
1 tbsp brown sugar
1 tsp tamarind paste
500g tarakihi or other firm white fish
1 tsp garam masala

TO SERVE
4 roti, lightly grilled
2 cups cooked basmati rice

1 Peel, trim and cut the red onions into wedges. Remove the core and seeds from the capsicum and cut into 3cm chunks.
2 Heat the oil in a large casserole or sauté pan over a low-medium heat. Add the onion, capsicum and ginger and fry for 5–10 minutes or until softened, stirring occasionally.
3 Add the garlic and chilli and fry for a further minute before adding the ground spices, cardamom pods and cinnamon quill. Fry for 2 minutes. If the pan is a little dry and the spices are sticking, add an extra tablespoon of oil. Add the curry leaves and fry for 2–3 minutes until dark green.
4 Trim and cut the eggplant into 2cm chunks and add to the pan. Fry for 5–6 minutes, stirring regularly. If it's a little dry, add a small amount of water to loosen the spices.
5 Add the tomatoes, salt and water and bring to a simmer. Cover and cook on a low simmer for 20 minutes, then add the coconut milk, sugar and tamarind paste and cook for a further 10 minutes.
6 Cut the fish into 4cm chunks and add to the curry along with the garam masala. Stir to combine, then cover and cook for a further 5 minutes until the fish is white and cooked through. Season to taste and serve with grilled roti and basmati rice.

TIP If your curry seems too sweet, add a bit more tamarind paste; if it's too sharp, add some brown sugar.

Bacon hock and pearl barley soup

On a rainy Sunday I find there's nothing more comforting than staying in and slow-cooking a soup. This is one of the first things I learnt to cook when I left home, and was a staple dish in all my grotty Dunedin flats.

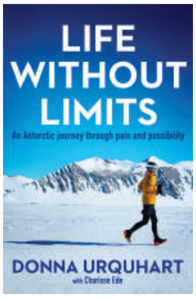
Serves 4

1 medium leek
1 tbsp salted butter
1 tbsp olive oil
1 brown onion, finely diced
1 large carrot, finely diced
2 celery sticks, finely diced
1 tsp dried oregano
5 thyme sprigs, leaves only, stalks discarded
4 garlic cloves, finely chopped
3 chicken or vegetable stock cubes
1 bacon hock
2 dried bay leaves
Cracked pepper
½ cup pearl barley
2 kale leaves

1 Cut the base and green ends off the leek and discard. Cut the leek lengthways down the centre and thoroughly rinse to remove any dirt. Finely dice.
2 In a large casserole dish, heat the butter and oil over a low-medium heat. Add the leek to the pan along with the onion, carrot and celery. Gently fry for 20 minutes until the vegetables become tender, stirring regularly. Add the herbs and garlic and fry briefly until aromatic.
3 In a large jug, dissolve the stock cubes in 1 litre boiling water.
4 Add the bacon hock, stock, bay leaves and a large grind of cracked pepper to the casserole dish. Bring to a simmer then reduce the heat to low. Cover and cook for 4 hours or until the meat is falling off the bone.
5 Using tongs, transfer the bacon hock to a chopping board. Cut the meat and skin off the bone and discard the bone and skin. Slice the meat into large chunks and add back into the soup.
6 Add the pearl barley to the soup, cover and cook for a further 1 hour. If the soup is looking a little too thick, add an extra 250–500ml boiling water.
7 Cut the stems off the kale and discard. Chop the leaves into 3cm pieces and add to the soup. Cook for 10 minutes or until the kale is tender.

In review

Recommended reads



Life Without Limits

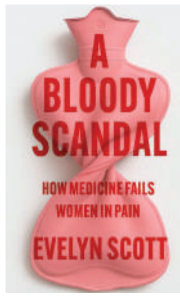
by Donna Urquhart with Charisse Ede

In January 2024, pain researcher Donna Urquhart completed an epic 28-day ultramarathon across 1402km of Antarctica. Pushing herself to the extreme to discover what she was capable of, the insights gained on this icy adventure form the basis for her book. Part memoir, part emotional toolkit, 'Life Without Limits' aims to help readers understand and manage physical and mental pain and adversity.

Land

by Maggie O'Farrell

The award-winning author of 'Hamnet' returns with another gripping historical tale, this time set in 19th-century Ireland shortly after the Great Famine. The story follows cartographer Tomás and his 10-year-old son Liam, who are mapping a west coast peninsula for the British Ordnance Survey when Tomás is sidetracked by an unsettling encounter.



A Bloody Scandal

by Evelyn Scott

Women's health advocate Evelyn Scott has suffered through decades of pain searching for endometriosis support, only to be met by misdiagnoses and dismissive doctors. She's not alone – women across the globe are taught that it's normal to live in pain, and this book sheds light on why so many are failed by the medical systems that are meant to help them.

Listen up

Creative Prep Talk

Turn your potential into reality by making your creativity a practice – that's the premise of this weekly podcast, hosted by author and illustrator Andy J. Pizza. With more than 500 episodes, including one with 'Art Cure' author Daisy Fancourt (see p42), you're sure to find something to get your creative juices flowing.

The Interface

Can the Pope save us from AI? Is your doorbell spying on you? In this weekly BBC show, tech journalists Tom Germain, Karen Hao and Nicky Woolf chat about AI breakthroughs, big-tech power, digital culture, cybersecurity and how technology is shaping our present and future lives.

One to watch

Lomu

In cinemas 3 September

From humble beginnings to rugby's first real superstar, Jonah Lomu is one of New Zealand's true legends. This new documentary, which debuted at the New Zealand International Film Festival on 1 August, looks at Jonah's life on and off the field – including a glimpse into his formative years in Tonga – and explores how this Kiwi icon balanced sporting success with his culture, faith and identity.

Healing hands

MAS Member Dr Paul Eason is a Pukekohe-based vet with special interests in surgery, emergency and critical care medicine. His days are long and intensive, but it's work that he loves.

"My childhood dream of flying fast jets came to nothing due to hay fever, so I took a career survey. It suggested that since I didn't want to be desk-bound but did want a challenging science-based job, I should consider becoming a vet. After spending much of my student life in mixed and equine practice, it was a little surprising to end up doing mostly orthopaedic surgery on beloved pets.

8:00am My average day starts with patient admissions, then it's straight into surgery. We aim to complete one larger procedure and perhaps a couple of shorter ones in the morning. Like many vets, my workload is shaped partly by animals being hit by cars, putting a foot in a hole or fighting with other animals, though much of my time is now spent on routine procedures such as cruciate ligament surgery. As a vet, you see things most people never do, and it takes resilience and mental grounding to manage that while still enjoying the work. You never forget the first time you see an animal that has been run over by a train, or a small animal that has been attacked by a much larger one.

1:00pm Lunch is usually grabbed when there's a spare moment, then it's back into surgery until 4 or 5pm, followed by patient discharges and consults. As vets, we often fill many roles at once, especially in general practice: surgeon, anaesthetist, physician, criticalist, behaviourist and more. That can be challenging when the public is used to medical specialists and expects us to be equally skilled across every subject and multiple species.

Historically, many vets seem to have carried a bit of an inferiority complex about this, partly because we have often been expected to be less capable than our medical colleagues. It's great to see that changing, with vets taking more pride in the depth of their skills and knowledge across a vast range of subjects.

6:00pm By day's end, I'm often helping in the clinic's urgent care area until 7pm or later. After that comes the inevitable paperwork, along with calls to clients about the day's cases or to arrange upcoming ones. The days can be long and the pressure intense, but honestly, I love it. There's nothing quite like working out how to mend a broken patient, spending a few hours with the power tools, seeing the animal walk home a few days later, then watching it return a week after that with its tail wagging. It doesn't get much better than that."

Photography Robin Kerr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