

Pacific Health 'Ala Mo'ui

Pathways to Pacific health and well being

A guide for improving Pacific health
outcomes

Pacific population overview

- Pacific people in New Zealand make up 7 % of the population - 266,000 people
- 13 distinct Pacific languages and cultural groups – increasingly mixed ethnic groups
- Children and youth make up 48% of the population – 12% of the total NZ age group
- Urbanised – 93% live in the North island, 67% in Auckland

Source: Census 2006

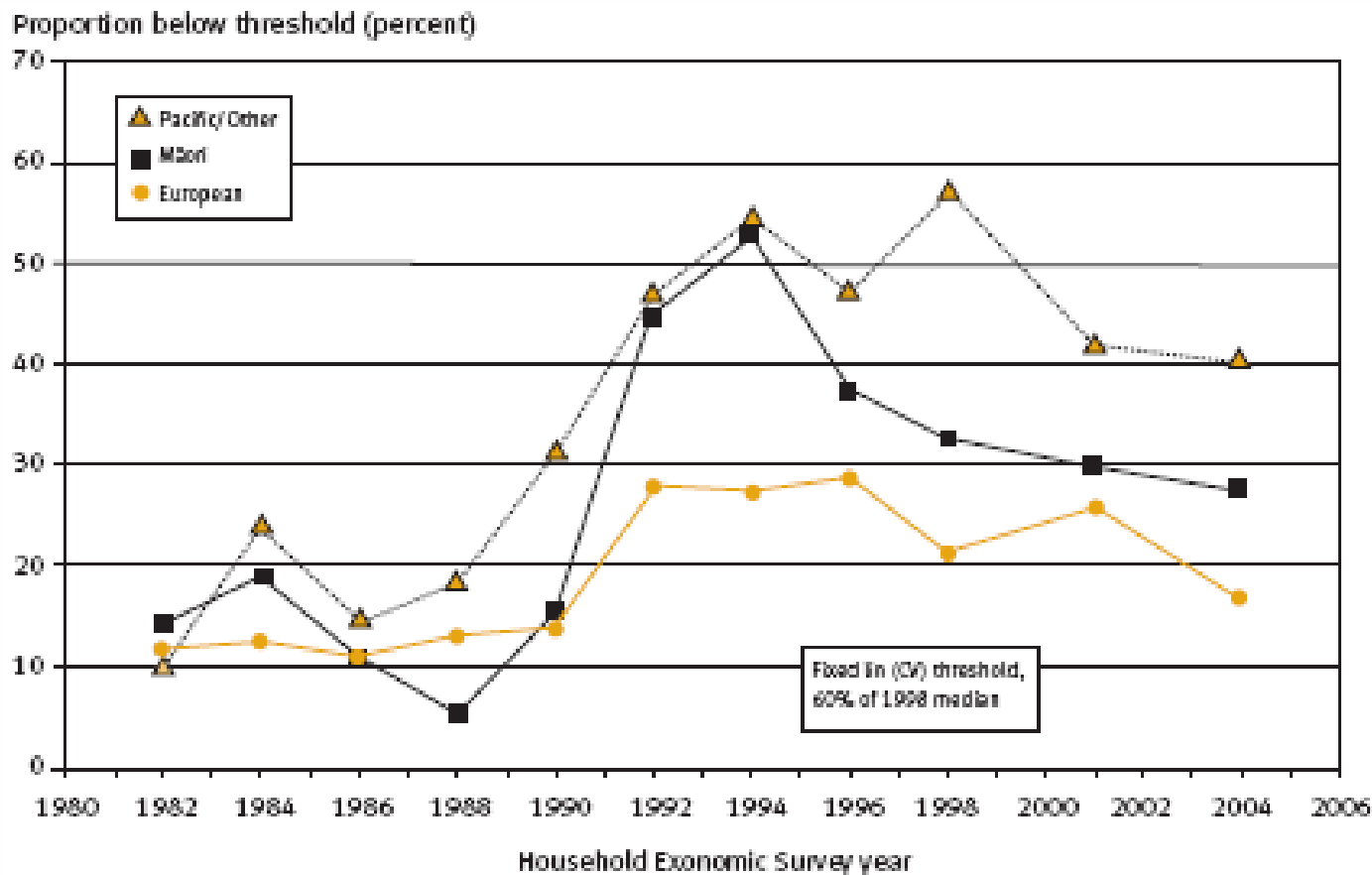


Pacific children an important part of New Zealand's future



In 2026, one in every eight people in the working age population will have Pacific ethnicity .

% of NZ children in poverty 1982-2004 by ethnicity



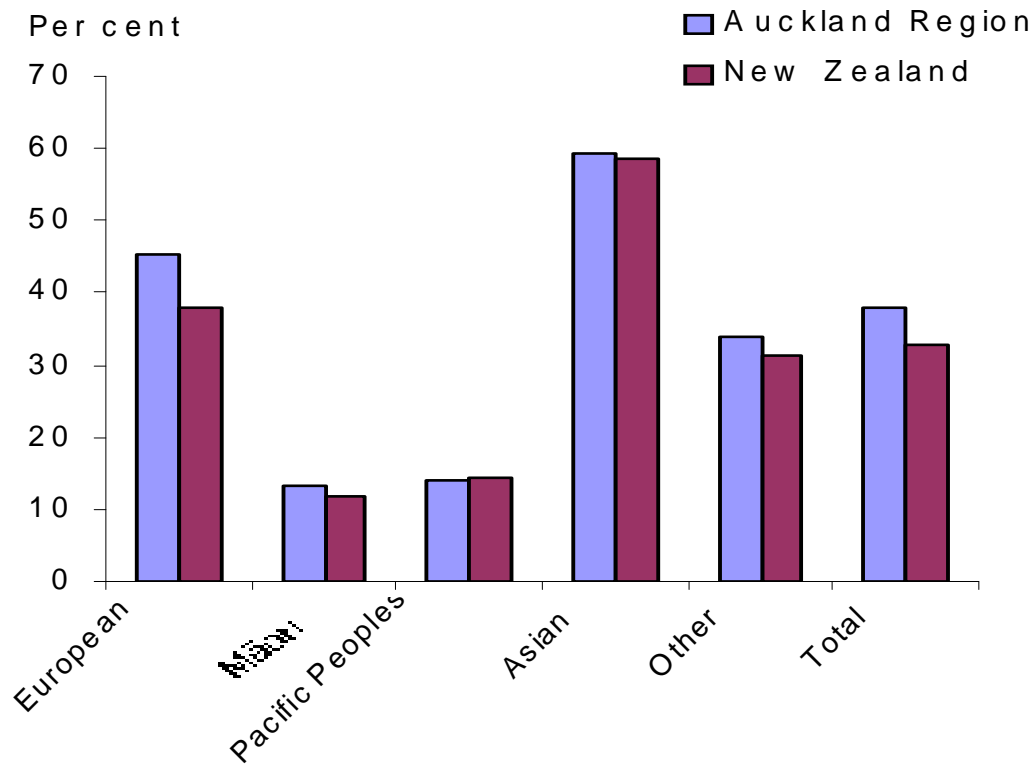
Source: Prof Innes Asher
MSD 2007

Youth 2000 – national secondary school health and well being survey

- 10% Pacific students had 2 unemployed parents (4% European)
- 52% Pacific households worried about having enough money for food (33% European)
- 10% Pacific students did not have a phone in their home/ family did not own a car (1% European)
- 20% Pacific students moved house at least twice in the past year (7% European)

Source: University of Auckland

School leavers qualified for university

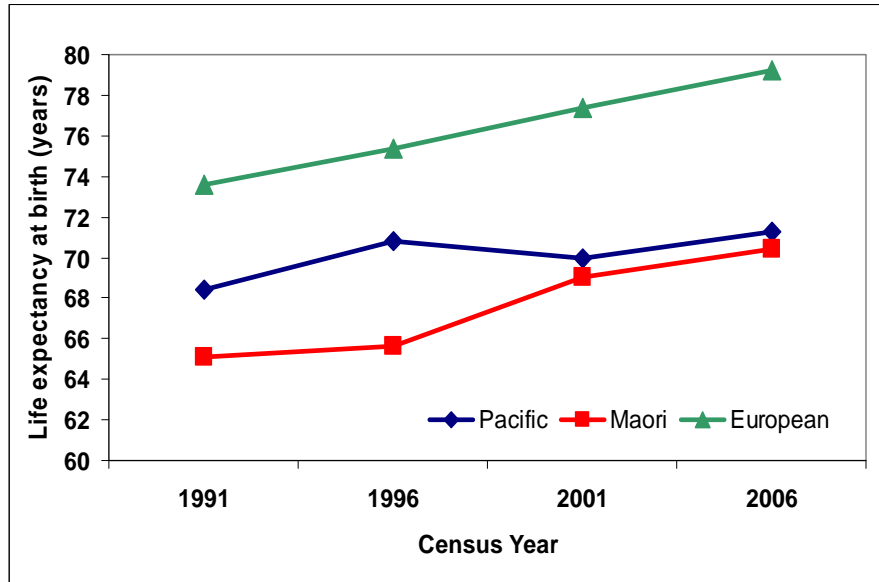


Percentage of school leavers qualified to attend university, by region, sex and ethnicity.

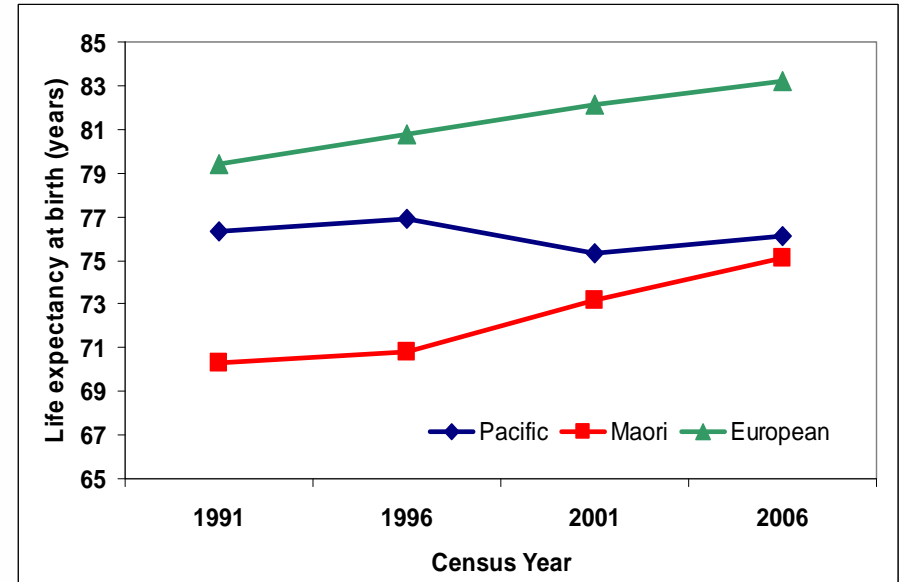
Data source TEC 2006

Ethnic trends in Life Expectancy 1991-2006

Males



Females



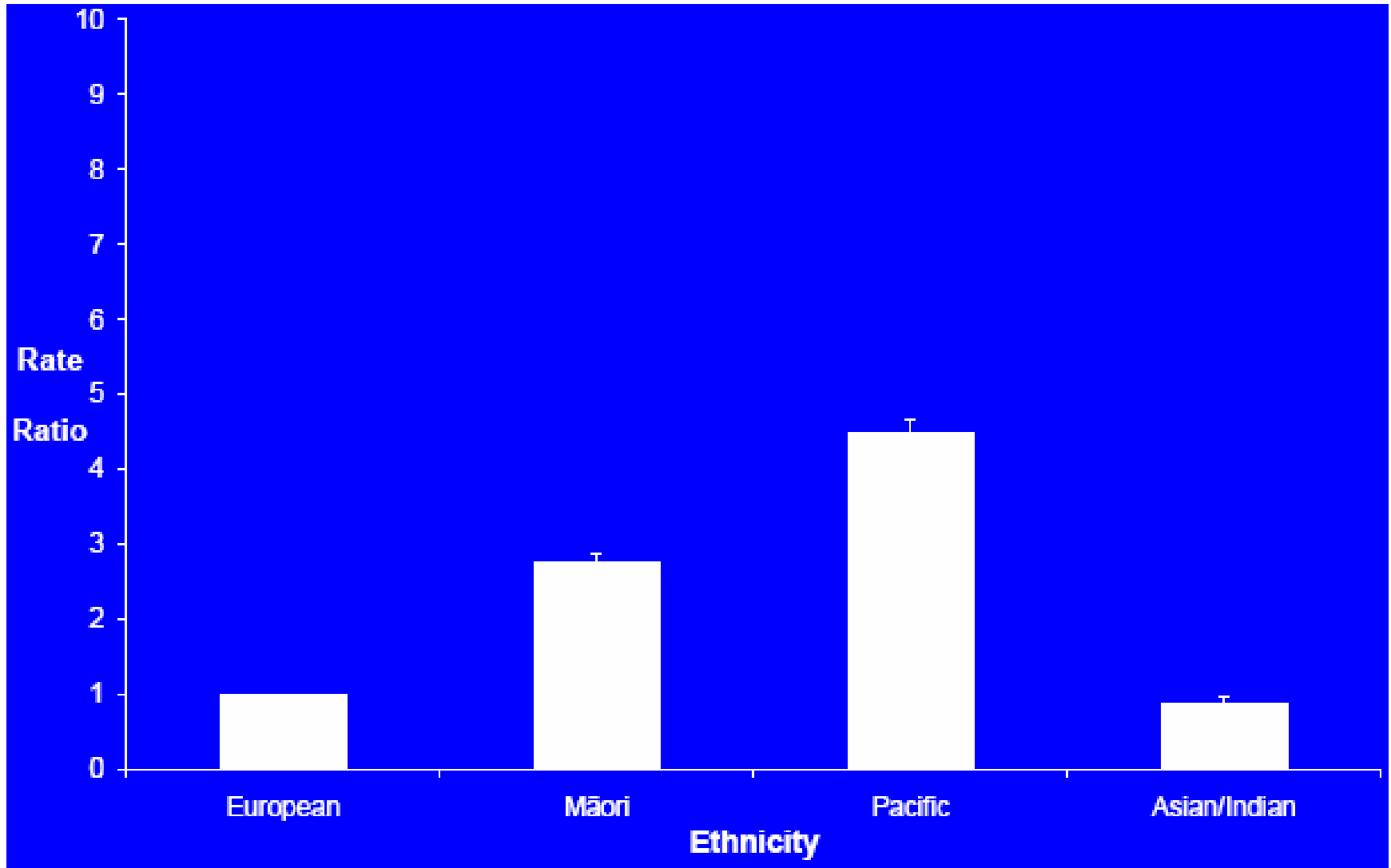
Source MoH 2009

Hospitalisation for serious bacterial infections and respiratory diseases risk by ETHNICITY 0-14 yr 2002-2006

Cause of hospital admission	European	Māori	Pacific	Asian/Indian
Meningococcal disease#	1	2.13	4.05	0.31
Rheumatic fever	1	22.97	48.62	0.99
Serious skin infections	1	2.77	4.77	0.88
Tuberculosis	1	11.10	45.18	54.98
Gastroenteritis	1	0.88	1.45	1.10
Bronchiolitis	1	2.95	4.34	0.45
Pneumonia	1	2.04	5.07	1.05
Whooping cough	1	2.25	2.77	0.29
Bronchiectasis	1	4.03	10.63	0.7
Asthma	1	2.19	3.14	1.14

Source: Prof Innes Asher
 Craig E, et al. NZCYES: Indicator Handbook. 2007.

Serious skin infection hospital admissions

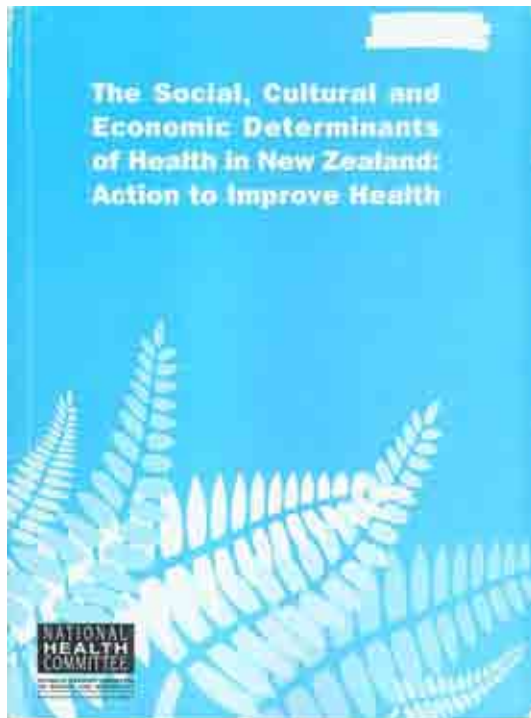


Source: Prof Innes Asher
Craig E, et al. *NZCYES: Indicator Handbook*. 2007.

The Strategy of Preventive Medicine



The National Health Committee 1998

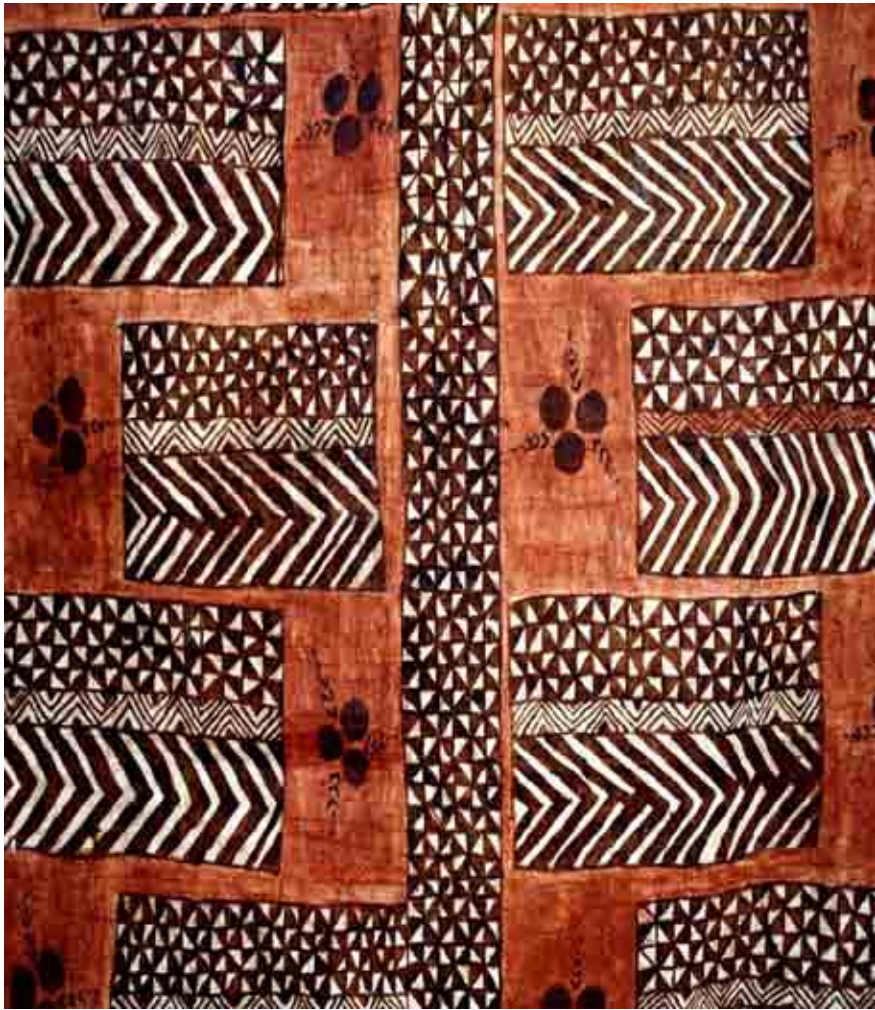


“Social, cultural and economic factors are the most important determinants of health. ..

There are deficiencies in income, education and housing which contribute to ill health, and the marked ethnic disparities. ..

There are immediate health gains to be made by applying information and knowledge that is already available”.

‘Ala Mo’ui Principles



- Respecting Pacific culture
- Valuing family
- Quality healthcare
- Working together

Respecting culture and family

Relationships - family based priorities and kinship obligations, reciprocity , custom and group interaction, enduring – lasts over centuries

Spirituality – Christian and ancient tapu beliefs coexist, therefore Church and Minsters are key leaders, but role also for traditional healing

Cultural values and beliefs are dynamic, diverse and evolving

Mobility of the Pacific population

Working together

Preferred holistic perspectives rather than piecemeal approaches

Integrated development across central and local government - health, social and economic actions

Wraparound approaches to service provision, e.g. Integrated Family Health centres

Community development – e.g. Pacific providers



- Pacific workforce supply meets service demand

- Systems and services are more responsive to Pacific people



Innovation in health service delivery



**new models of care, home
visiting, community settings
workforce - community health
workers, social workers
systemic cultural competence
supporting community
leadership of behavioural
determinants**

Church Based Programmes addressing lifestyle factors

Lotu Moui – CMDHB

HVAZ – Auckland DHB

NZ Heart Foundation Church Programme

CCDHB Older peoples Lifestyle Programmes

Samoan pastor preaches gospel of healthy eating

Weekly exercise classes are also on the menu for his congregation

Fish and ripe bananas are the favourite foods of health-conscious churchman the Rev Elifasa Maafala Koko.

The Auckland minister, who graduated from a course on healthy eating and exercise for Pacific people, is already taking its tips to his congregation.

Weekly musical exercise classes have started at his Pacific Islanders Presbyterian Church in Owairaka and a group walks up Mt Albert on Saturday mornings.

Next will be classes in healthier cooking. They will be designed to steer parishioners away from over-reliance on foods laden with saturated fat, like coconut cream, and into eating the likes of grilled fish and a variety of fruits and vegetables.

"Our older people, their favourite is salted meat and roasted pig's head," the minister said.

Mr Koko, aged 54, is a 1.85m-tall and solidly built Samoan. He has an active life: He runs regularly and plays tennis and touch rugby. However, at 97kg, he wants to lose weight.

A former psychiatric nurse, he said he had always eaten well. But weight was a problem in his congregation, which was why he and two women from the church had attended the nutrition courses, run by the Auckland University of Technology.

He said messages about nutrition and exercise now sometimes slipped into his sermons.

"If we are serious about our spirit then I believe it is also important for us to be careful physically, especially with daily exercise and the kind of food we eat."

Switching to healthier habits could be tough.



QUALIFIED: The Rev Elifasa Maafala Koko has just graduated with a Pacific Island Heartbeat certificate in Pacific nutrition. PICTURE / BRIETT PHIBBS

"For some of our older people it's a big change. They are not used to exercise," he said.

Some disliked the idea of eating a lot more vegetables.

Mr Koko's family, however, is used to healthy food. "I'm the cook."

For dinner on Wednesday he was making chicken soup, served with rice and slices of tomato and cucumber.

Sixty-five people are graduating from the Pacific nutrition courses this month, including, for the first time, a Wellington class.

The cause of causes

“What good does it do to heal people’s illnesses... then send them back to the conditions which made them sick?”

Prof Fran Baum
**WHO Commission on Social
Determinants**



Socio-economic factors and health

Low income for long periods

Low education levels

Less skilled workforce

Housing/overcrowding

Access to primary care services

Differential access to health care due to ethnicity

Literature Review

a workforce that reflects the culture of the population is an important success factor for improving the health of the community

Professor Joan Reid – ‘Patients will potentially get the best healthcare from those that look the most like them’

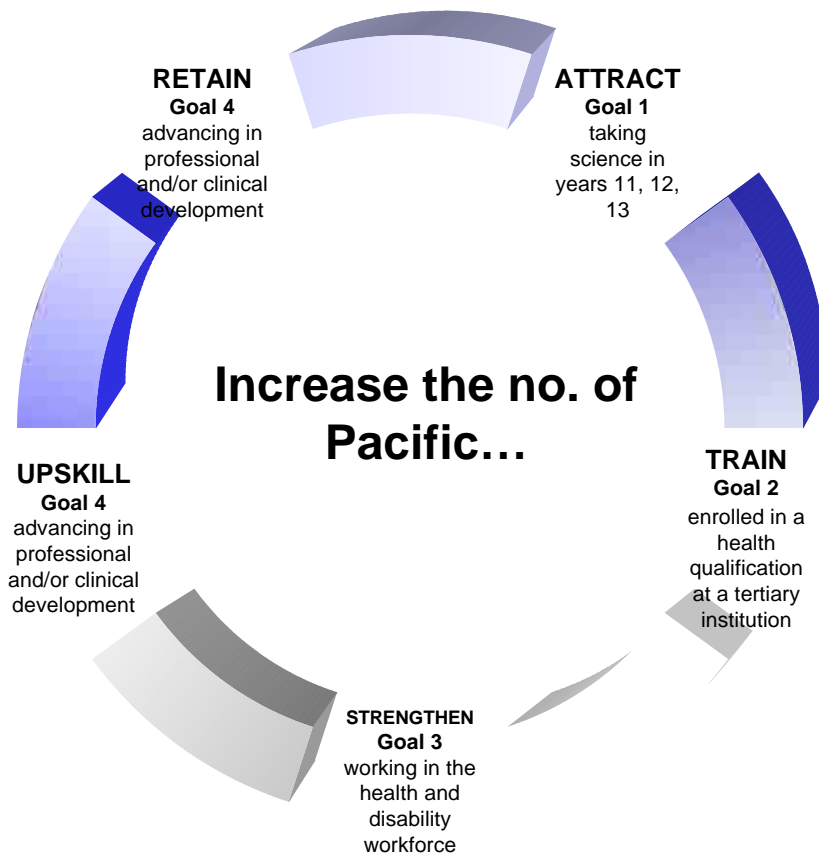
Serau

**Pacific Provider and Workforce Development Fund
Programme of Action 2009/10 to 2010/11**



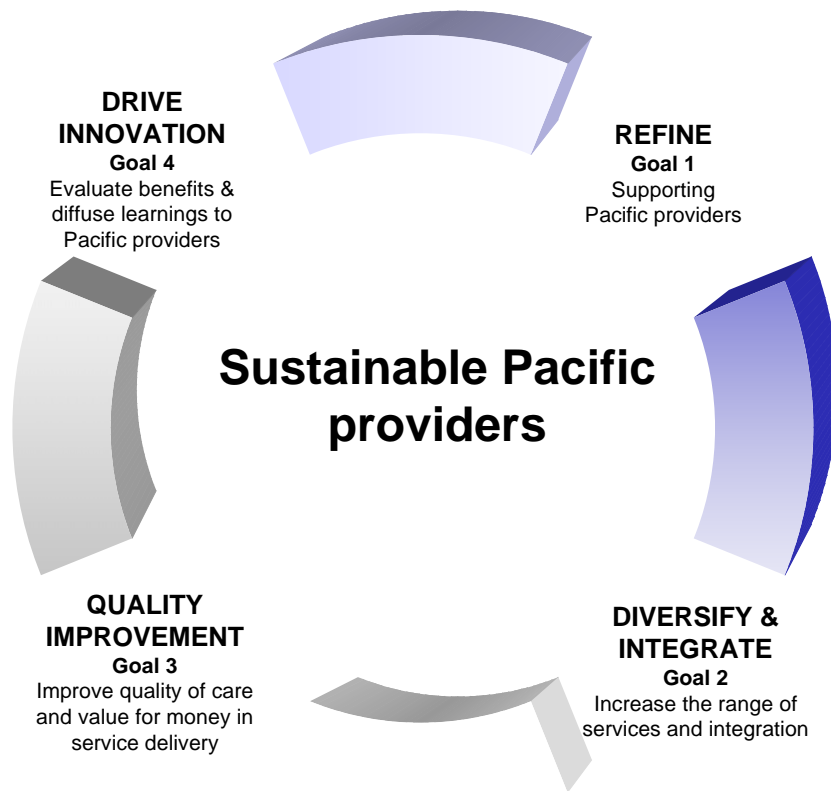
'Serau': Pacific Provider and Workforce Development Fund Programme of Action 2009/10 to 2011/12

FOCUS 1: Pacific people with the rights skills in the right places (\$4 million)



'Serau': Pacific Provider and Workforce Development Fund Programme of Action 2009/10 to 2011/12 cont.

FOCUS 2: Strengthening Pacific providers (\$3.4 million)



Where to from here for Lotu Moui?

Issues to consider:

BMI – Control for BMI loses the ethnic differences

>35 meant 7x risk of ICU admission during swine flu

Effect of exercise negligible – needs comm action

Smoking – Ethnic differences

Still high rates for Pacific men

Acculturation

Problem gambling?

Government's Health Targets 2009/10

Shorter stays in Emergency Departments

Improved access to elective surgery

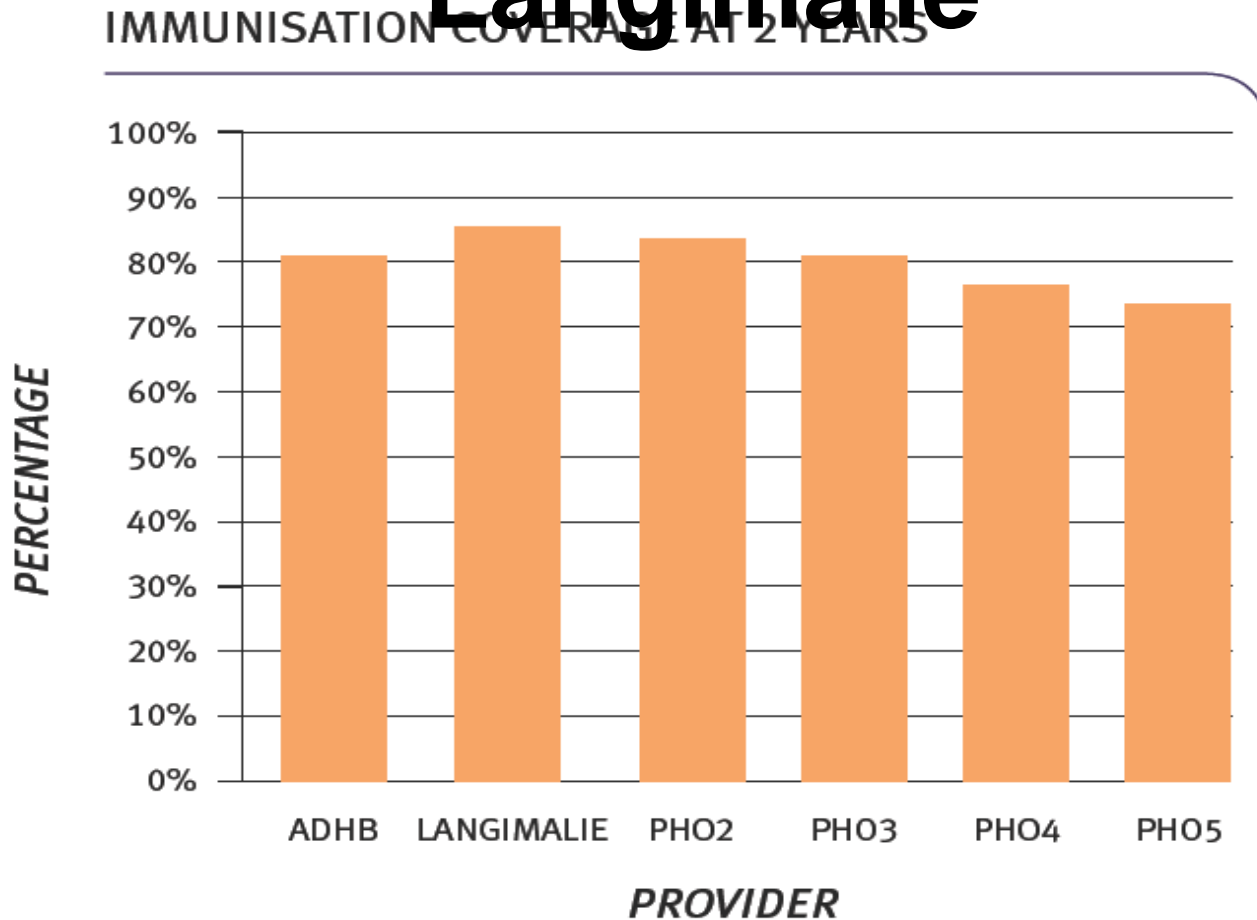
Shorter waits for cancer treatment

Increased Immunisation (95% 2 yr olds by 2012)

Better help for smokers to quit (90% given advice – hospital and primary care)

Better diabetes and cardiovascular services (inc CV risk assessment, free diabetes check, better diabetes management)

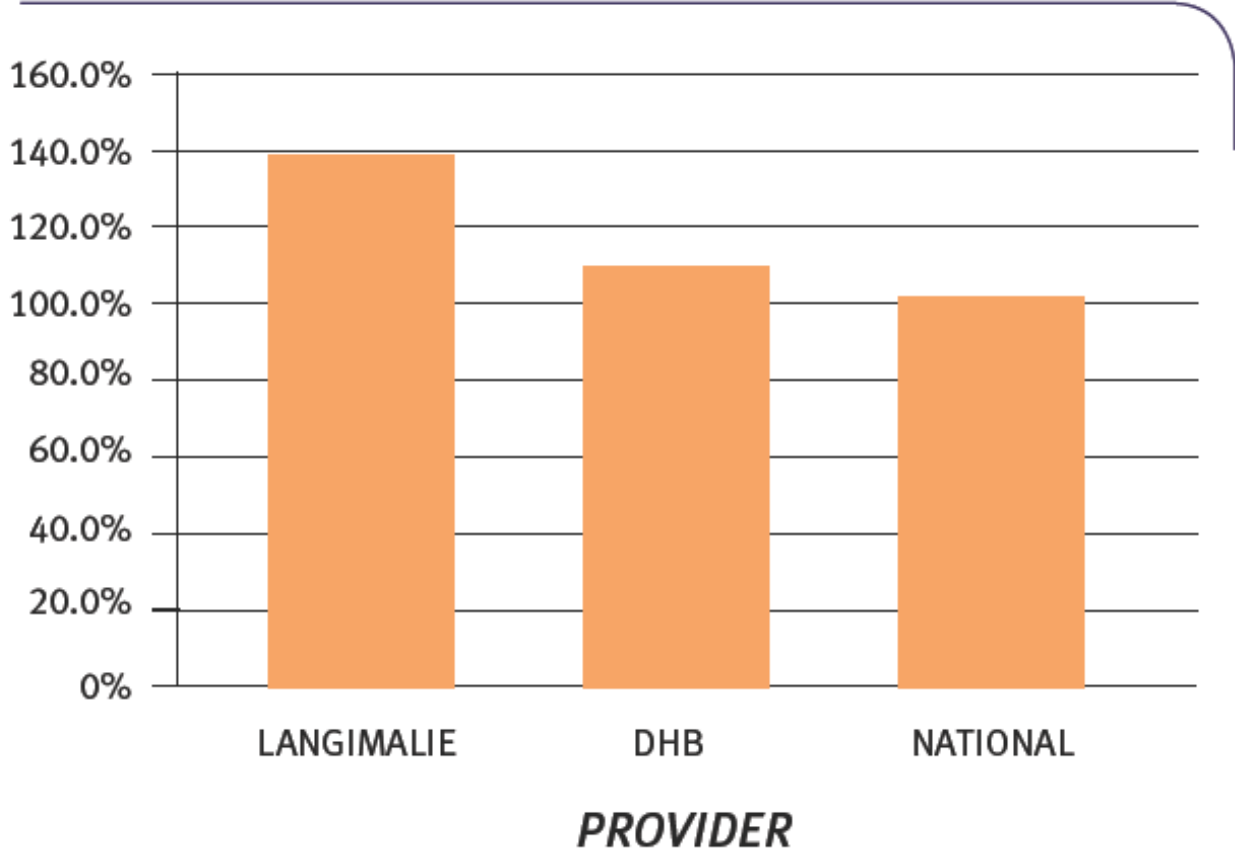
Child immunisation rate at Langimalie



Langimalie has the highest immunisation rate for ADHB PHOs – 85% in October 2009. This result reflects Langimalie’s success at targeting those most at risk – it reached 88% of children in the Dep 9–10 category (the highest level of deprivation).

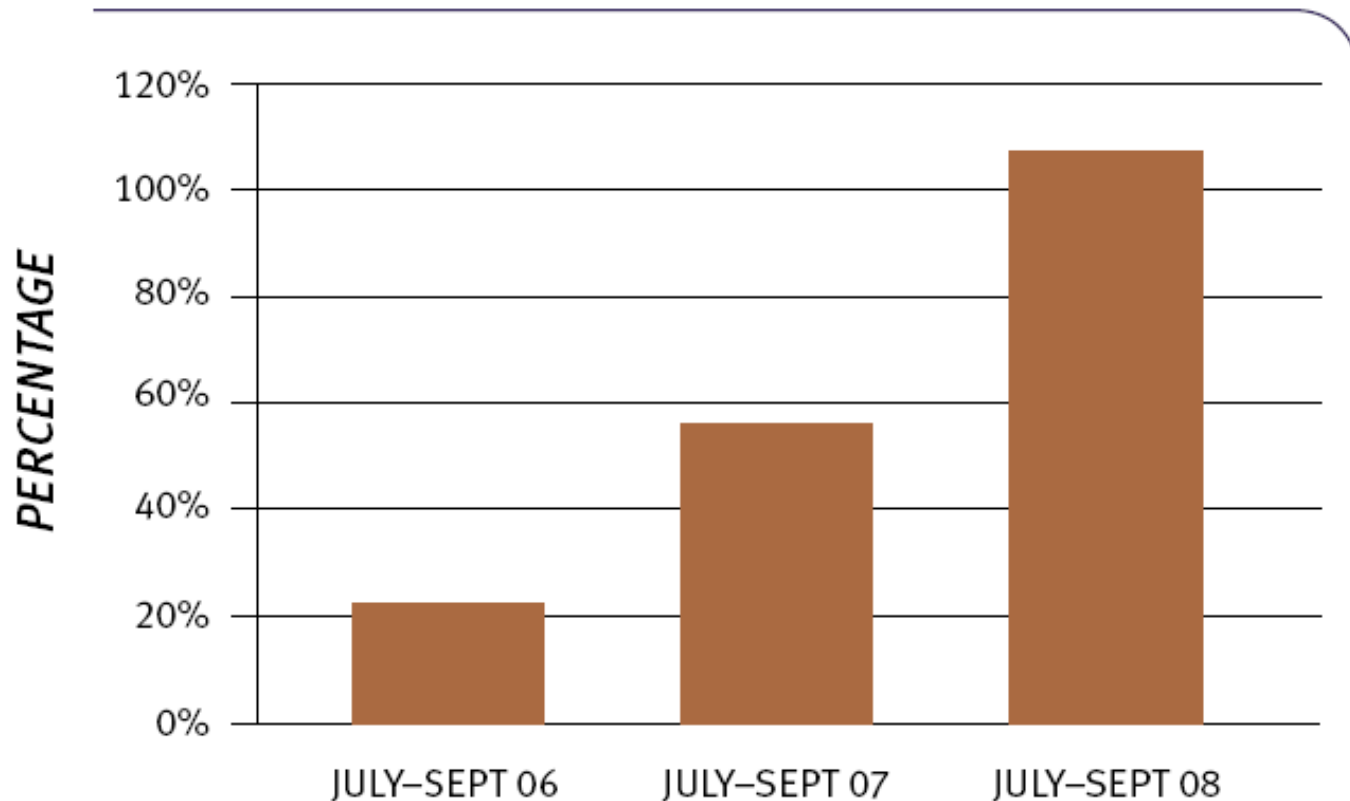
Diabetes detection for high

DIABETES DETECTION – HIGH NEEDS APRIL 09



Mammography rates at Bader Drive Healthcare

MAMMOGRAPHY – BDHT

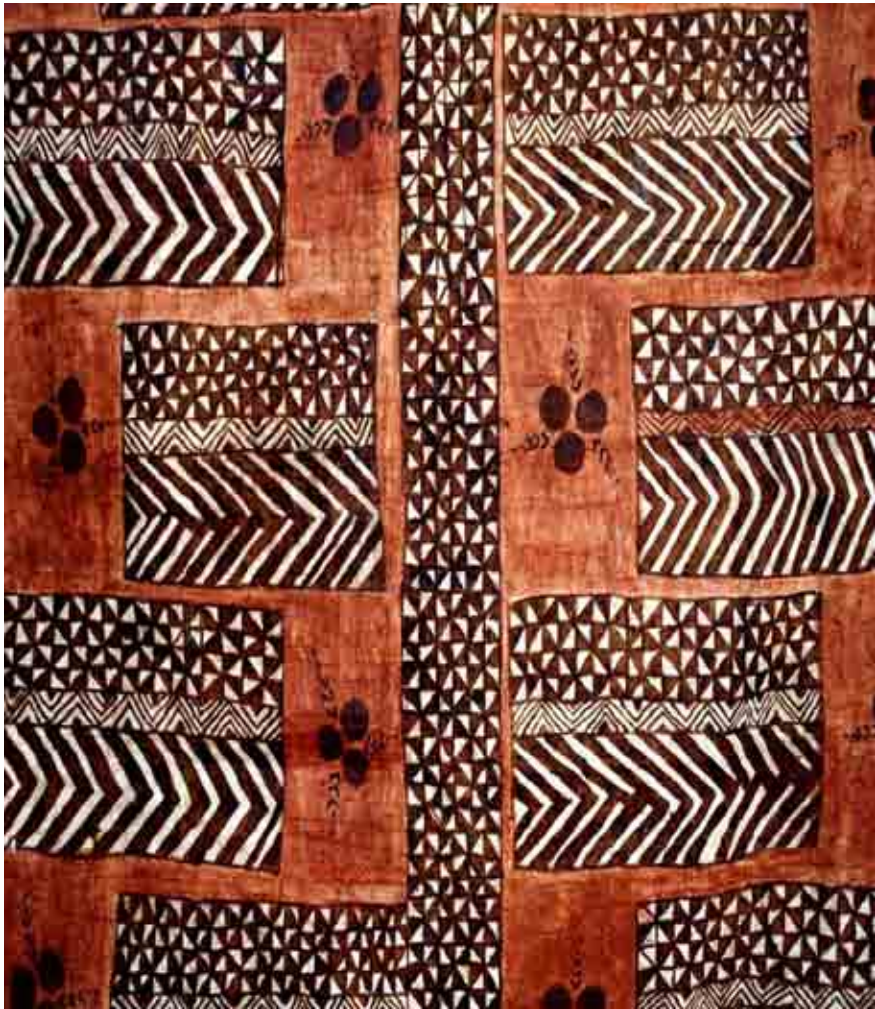


What works with Pacific learners

- The use of an holistic approach
- Meeting of learners where they are at
- The use of celebration, fun and humour
- A family atmosphere that encourages and accepts learners

Source: Marshall et al 2008

'Ala Mo'ui Principles



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- Valuing family
- Quality healthcare
- Working together

Vinaka vakalevu

Malo 'aupito

Fa'afetai lava

Meitaki maata

Faka'aue lahi

Fakafetai

Thank you