

Caring for our Wisdom Bearers

Pacific Mātua (Elder) Care Report

Authored by:
Siautu Alefaio-Tugia,
Tracie Mafile'o, Sione Vaka,
Kotalo Leau and Petra Satele

This research was funded by the Health Research Council of New Zealand (HRC) Pacific Projects Grant 18/579



ACKNOWLEDGEMENTS

O le fa'amoemoe ua taunu'u o le la'au o le soifua lea
(At the end point of a journey, a tree of life springs
wellbeing -Samoan metaphorical proverb)

Koloa 'a Tonga ko e Fakamalo
(The Treasure of Tonga is in saying thank you).

This is our combined tree of wellbeing for current and future generations of Pacific families who care deeply for our beloved Matua (elders). We would like to acknowledge with hearts full of gratitude and appreciation all our Pacific Matua, carers, youth, Tina/Fa'e (mothers), Tama/Tamai (fathers), families, churches and communities who shared and gave freely their time, experiences, insights and wisdom. This research project would not be possible without your willingness to share and give so graciously your experiences which were poured out so generously.

We acknowledge our pilot family who after hearing an interview responded immediately by gifting us with their incredible experiences of caring for their Matua, we deeply appreciate your vision to share your experiences as a gift to our research for learning that can impact the quality of life for our Matua, their carers who are their family.

Fa'amalo fa'afetai tele lava i Ta'ita'i o aulotu ma ekalesia Susuga i Fa'afeagaiga ma Faletua ona o le lagolagoina o lenei su'esu'ega. Fakamālō atu, special thanks, to our church leaders and families for their willing support and eager participation, it made our research journey a joy filled enterprise.

We wish to respectfully thank our Advisory group: Malia Hamani (TOA Pacific), Rev Reupena Leau, Ikamafana Tameifuna and Rev Simatavai Alefaio. Our special mentors and wise counsel: Professors Fiona Alpass and Christine Stephens thank you both for being a constant and calm sounding board, welcoming and including us in the ageing space, always making a way for Pacific to be heard and seen. We acknowledge our international collaborators Professor Halaevalu Vakalahi (Council of Social Work Education, Washington) and Dr Paul Kowal (World Health Organisation), who are integral to this research through their global reach and leadership.

Copyright © NIUPATCH Massey University 2023

Pacific Health Collective Team
NIUPATCH
School of Psychology
Private Bag 102-904
North Shore, Auckland 0745
niupatch.com



TABLE OF CONTENTS

Acknowledgements

1. Overview: Executive Summary

2. Introduction

About our research

Aims and Objectives of the Study

3. Background and Context

Pacific Peoples in Aotearoa New Zealand

Carers in Aotearoa New Zealand

Caring for Pacific Mātua (Elders)

The impact of changing times

4. Our Pacific-centric Methodology

Feeding back to our communities of research – taking everyone with us

Church-engaged families

TalanoaHUBBS Community-fono: Totara hospice palliative care partnership

Parliamentary-fono engagement

Parliamentary Launch

5. Our Findings

Pilot Study family – gifting us their experiences to lead the way

Pacific Mātua care practices

Impacts of Change on Carer practices

Supports Needed

6. Policy Implications

Carer Leave

Definitions of family beyond households

Provision of super (pension) beyond realm countries

Church and community-led centres of care

Housing that is accessible

7. Conclusion

8. References

1. OVERVIEW: EXECUTIVE SUMMARY

This final report outlines findings from research investigating Pacific mātua (elder) care practices and the way in which caring for mātua impacts the health and wellbeing of Pacific carers and families. Traditionally, Pacific Islands households mobilise around caring for Mātua (Elders) - in this study our elders are referred to as *'wisdom bearers'*. With migration to Aotearoa New Zealand, change impacts the care Pacific families have traditionally provided. Very little was known about the cultural changes that impact traditional family based elder care, and the needs of aiga (extended family) who sustain it, until now. This report provides insights about Pacific carer practices and the blessing with challenges they faced in Aotearoa New Zealand. Pacific methods of research, Talanoa and Fa'afaletui, were used to capture perspectives and experiences of caring for Mātua. Fa'afaletui of 8 Talanoa (cultural- participatory dialogue) were conducted with over 120 participants representing 57 families, across two North Island cities of urban and regional areas. Fa'afaletui (collective houses of wisdom) represent Samoan and Tongan populations of the Pacific diaspora from Carers, Mātua (elders), Tinā (mothers), Tamā (fathers) and Tupulaga (youth). The ages ranged from 6 - 87yrs.

Objectives of this study were:

- Identify Pacific elder-care practices that contribute to the health and wellbeing of Pacific elders, carers and families
- Examine the impact of cultural-contextual change on Pacific Mātua care practices
- Detail the socio-cultural and material supports needed to sustain Pacific care practices.

Results highlight a unique Pacific Aiga-care practice called *'Tausi Mātua'* (Caring for Elders), as a collective system of care based on family life-cycle. Tausi Mātua is a Samoan term and is found to be alive and well within the Pacific diaspora of Aotearoa. Although it has changed over time and place, impacting the way it is now practised, Pacific Mātua remain the core of Aiga-wellbeing. *Tausi Mātua* is expressed by families as a blessing endowed with its own challenges that require support. Pacific families are an integral part of Aotearoa New Zealand's diverse cultural fabric, and they make significant contributions as caregivers.

Tongan participants discussed their fatongia (duties and responsibilities) in the traditional halafononga (pathway) and the need to change this halafononga in NZ. However, they encounter challenges that hinder their ability to fulfil their caregiving roles effectively. Our findings call for Pacific Mātua-care policies centred on Aiga/kāinga (family) wellbeing that should consider: Carer leave provision for Aotearoa, focused Pacific Mātua carer training, transitional support for life after care (especially for Youth carers), broadening definitions of family beyond households to accommodate multiple carers, extending the provision of super (pension) beyond realm countries to enable freedom of mobility to age-well, support for church and community-led centres of care, and housing that is *accessible* ensuring families are supported to care well, and be well.

2. INTRODUCTION

Carers play a crucial role in the well-being and quality of life of individuals with disabilities, chronic illnesses, or aging-related issues. Traditionally, Pacific households mobilise around caring for Pacific Mātua (Elders)¹ who hold pride of place as wisdom bearers within Pacific society. With migration to Aotearoa New Zealand, change

inevitably impacts the care Pacific families have traditionally provided; however, very little is known about the extent to which caring for Pacific Mātua impacts the health and wellbeing of Pacific carers and families. Two main areas this report contributes to the overall wellbeing of Pacific peoples and Aotearoa as a nation are:

1. UNDERSTANDING, MAINTAINING AND ENHANCING THE HEALTH AND WELLBEING OF ALL PEOPLE THROUGHOUT LIFE

The research findings will contribute to practical means of support for Pacific Mātua, their carers, and families to enhance health and wellbeing for Pacific peoples. It will inform people within Pacific communities, health care providers, and government policy makers about very specific and culturally appropriate ways in which to support Pacific health.

2. DELIVERING DIRECT ECONOMIC BENEFITS FOR NEW ZEALAND, IN ADDITION TO ACHIEVING A PRIMARY OUTCOME OF HEALTH BENEFIT

In New Zealand the economic value of informal caregiving to society is high, but there is no knowledge of the particular demands on resources from Pacific caregiver and caree needs. This report gathers culturally relevant information from Pacific communities, and delivers the findings directly to community leaders, local government, and community health care organisations, and to relevant government ministries and stakeholders.

60% live in rental housing

95% from multi-generational households

Fa'afaletui of 8 Talanoa



Over 120 participants

57 Families

Ages of 6 - 87yrs

2 North Island cities urban + rural

ABOUT OUR RESEARCH

This project addresses the need to understand Pacific elder care practices within the Aotearoa New Zealand environment. Family based elder care is an important contribution to the wellbeing of older people and to the Aotearoa New Zealand economy, yet very little is known about the cultural changes that have impacted traditional family based elder care, and the needs of Aiga/kāinga (family) to enable them to sustain Pacific elder care. This report outlines family, community and church perspectives and experiences of caring for Pacific Mātua and the supports needed to maintain family health and wellbeing in the Aotearoa New Zealand context.

AIMS AND OBJECTIVES OF THE STUDY

The broad aims of this research were to explore family, community and church perspectives and experiences of caring for Pacific Mātua in order to improve the health and wellbeing of Pacific families and communities. We set out to do this by: a) identify Pacific elder-care practices that contribute to the health and wellbeing of Pacific elders and carers, b) examine the impact of cultural-contextual change on Pacific Mātua care practices, and c) detail the socio-cultural and material supports needed to sustain Pacific care practices.

As a whole new way of understanding the wellbeing of elders and their families in Aotearoa-New Zealand, this research, with its focus on intergenerational relations and the nexus of change following migration, will provide greater understanding of the issues and support needed by Pacific Mātua (Elder) people from within their families, churches, and communities.

3. BACKGROUND AND CONTEXT

PACIFIC PEOPLES IN AOTEAROA NEW ZEALAND

Pacific communities have unique cultural practices, languages, and traditions that contribute to Aotearoa New Zealand's rich cultural fabric. As peoples of Te moana nui a kiwa (Oceania) communities are comprised of diverse ethnic groups mainly Samoa, Cook Islands, Tonga, Niue, Fiji, Tokelau, Tuvalu. These communities exhibit strong cultural values and traditions that prioritize family and community care. However, Pacific carers face numerous challenges that are often distinct from those encountered by other groups. The Pacific community also faces various socio-economic disparities, including lower educational attainment, higher unemployment rates, and increased health issues compared to the general population. Recognizing and addressing these disparities is crucial for ensuring the well-being of Pacific peoples and their ability to provide care for their loved ones.

This report aims to shed light on the specific challenges faced by Pacific carers in New Zealand and provide recommendations to enhance support systems and improve their overall well-being. By understanding and addressing these challenges, policymakers, support service providers, and community organizations can work together to ensure that Pacific carers receive the necessary assistance and resources to carry out their caregiving responsibilities effectively.

CARERS IN AOTEAROA NEW ZEALAND

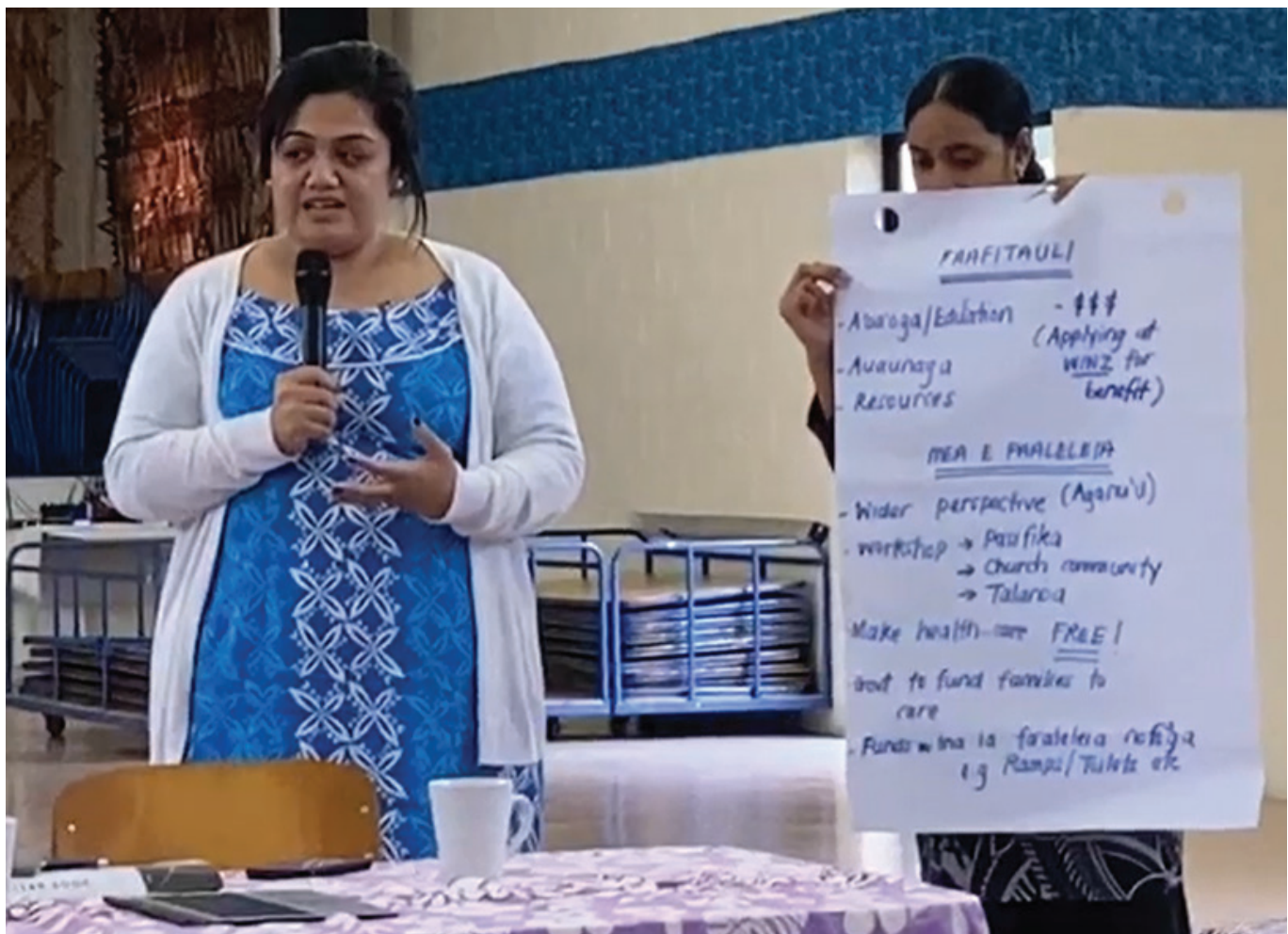
Carers are individuals who provide unpaid assistance and support to family members or friends with disabilities, chronic illnesses, or age-related conditions. Carers play a critical role in the lives of those they care for, often dedicating significant time and effort to ensure the well-being of their loved ones. In New Zealand, carers make a substantial contribution to the healthcare system by providing informal care that reduces the burden on formal healthcare services.

Informal family-based care is an essential part of the health care system and provides many benefits including improved patient outcomes, reduced unnecessary re-hospitalisations and residential care placements, along with considerable savings in health care expenditure¹⁻³. In New Zealand the estimated economic value of informal caregiving to society was 10.8 billion dollars or 5% of GDP in 2013⁴. As the population ages and life expectancy increases, there is an increasing need for the provision of care. Governments are focused on policies of ageing in place in an effort to minimise the expense associated with residential care⁵. With this shift in care burden comes an increase in demand for informal and unpaid family caregiving⁶.

In New Zealand, policies to promote ageing in place (or in the right place), have been central to the government's response to population ageing^{7,8}. With greater numbers of older people with disabilities and/or high dependency remaining in private dwellings comes an increase in the reliance on family caregivers. Over recent decades a considerable literature has accumulated to support the burdensome and stressful nature of providing care and its impact on health and wellbeing. For instance, caregivers have been shown to be at risk of increased rates of depression, stress and anxiety compared to non-caregivers⁹⁻¹¹ and there is evidence for the impact of the level of burden and type of caregiving on reports of life satisfaction and

mental health¹²⁻¹⁵. Caregivers have also been shown to have poorer physical health than non-caregivers^{11,16,17} with higher mortality risk reported for caregivers compared to non-caregivers¹⁸. Recent New Zealand research has shown that women and Māori in particular are more likely to be caregivers and that those in poorer mental health are more likely to take up caring^{12, 19, 20}, however, Pacific peoples are missing from this evidence base.

In general, the evidence suggests the importance of caregivers' health to the wellbeing of the ageing population and to the economy, and the need to enquire further into the ways New Zealand society can support caregivers. A very important gap in the evidence to date is the lack of any information on the situation for Pacific caregivers of older people. Although the population of Pacific elders is increasing and numbers are likely to grow rapidly in the next few decades²¹ very little is known about the needs of Pacific caregivers.



UNDERSTANDING THE INTRICACIES OF CARING FOR PACIFIC MĀTUA (ELDERS)

In Pacific societies, the older person has an important role within the traditional practice of intergenerational kinship care and multiple systemic living²². New Zealand research shows the value and importance of Pacific Elders' wisdom in families, churches, and communities²³. Research also highlights that Pacific families are more likely to be living in extended family households consisting of three or more generations²⁴. Elders are not considered separate to one's family and are the most respected individuals within the aiga/kāinga (family) given their valuable roles as advisors, holders of wisdom and traditional knowledge, healers of social issues, and protectors of family genealogy²⁵. The traditional belief and practice of respect and care is accorded to Mātua (Elders) in order to receive spiritual rewards and blessings²⁶. In Samoan society 'Mātua tausi' refers to the practice of honouring and caring for one's elders (parents/grandparents). Beyond the literal meaning of looking after or caring for elders, Mātua tausi is part of a cultural context in which depth of learning and sharing takes place, and an aspect of cultural phenomena that sits at the core of being Samoan as it is the "heart and soul of nurturing"²⁷. Mātua themselves provide cultural sustenance as shown in the words of His Highness *Tui Atua Tupua Tamasese Efi*: "They give love and stability and provide the basis for consensus in the family context. They bring wisdom and serve as arbitrators in moment of family upheaval...The place of Mātua tausi in the hearts and souls of Samoans are found in the everyday experiences of ensuring they received the best food the family could offer"²⁷. This Samoan cultural concept illustrates the depth of importance of elder care to Pacific families and to the mobilisation of family members to ensure care is achieved.

Pacific perspectives on health are holistic and bring together body, mind and soul/spirit contextualised within family, extended family, village/community/ church and culture. The philosophical values of spirituality, culture, family, interpersonal relations

embedded within Pacific languages underpin a unique Pacific understanding of health that contributes to models of care. The Fonofale model²⁸ provides a clear illustration of the holistic nature of health that Pacific peoples espouse.

Whilst there have been developments in models of care for Pacific mental health and health in general²⁹, research remains sparse regarding community care and wellbeing. There has been some work on family relationships, but this is mainly oriented toward the wellbeing of children and younger people^{24,26}. One recent study focuses on the quality of health for Pacific grandparents, however little is known about the impact of caring for Elders on carers and families. Understanding the broader social cultural and economic determinants of community care and wellbeing for Pacific elders, carers, and their families in New Zealand is the focus of this research.

THE IMPACT OF CHANGING TIMES

Traditionally, Pacific households mobilise around caring for Pacific Mātua who hold pride of place as wisdom bearers within Pacific society. With migration to Aotearoa New Zealand, change inevitably impacts the care Pacific families have traditionally provided, however, very little is known about the extent to which caring for Pacific Mātua impacts the health and wellbeing of Pacific carers and families.

Pacific families' obligation to care for Mātua and develop meaningful relationships stem from beliefs that place great value on the passing of wisdom and blessings (equated to health and wellbeing) on to generations that follow. However, new housing, work and living arrangements have created many difficulties for maintaining these traditional sources of wellbeing. Traditionally, older Pacific people have lived with their families, providing an interface between the generations. But the changing nature of Pacific families and role expectations are placing some Elders under a good deal of stress^{31,23}. The 'nexus of change'³¹ within new lands describes the point where colliding values effect change at a socio-cultural level for the diaspora of Pacific peoples. For example, the colliding values of Tu



ma Aga Fa'aSamoa (ways of knowing, being and doing Samoan) based on communal economy, inter-connectedness and collective responsibility, collide with new-land cultural values based on a cash economy, independence, and individual pursuits³². The *nexus of change* that has occurred in New Zealand post-migration creates an opportunity to build a platform of research that can develop understandings of the issues and support needed in order to enhance resilience and wellbeing³³ of Pacific Mātua and families.

This is vital given the rapid increases in the elder population. For example, the population of Samoan Elders (65+ years) increased from 3.5% (2006) to 4.5% (2013)³⁴ and numbers are likely to grow rapidly in the next few decades³¹. This has

created multiple challenges in maintaining care and wellbeing of Elders and families. Although it has been shown in the US that kin networks positively affect chronic disease-related health behaviors³⁵, published work largely focuses on descriptions of disparities in Pacific populations compared to others³⁶⁻³⁹. This research is an essential starting point for uncovering how intergenerational relationships support both older people and whole families in a new and dynamic cultural context. As a holistic approach to understanding the health and wellbeing of Pacific Mātua in New Zealand, this research focuses on intergenerational relations, specifically intergenerational kinship care and Pacific-indigenous Mātua (Elder) care practices.

4. OUR PACIFIC-CENTRIC METHODOLOGY

The qualitative design of this study draws on Pacific methodologies that are comparable to 'participatory action-oriented' research methods but are Pacific-designed utilising Pacific language, metaphors and frame of reference (ways of knowing, being and doing). The overarching research process will employ Fa'afaletui, a Samoan metaphorical concept of searching for wisdom, and utilise Talanoa to gather information with Pacific families, communities and churches. Fa'afaletui (process of knowledge gathering through collective houses of wisdom) and Talanoa (process of relational engagement through dialogue within appropriate cultural protocols) are Pacific principles of research drawn from Samoan and Tongan cultural concepts. These function as methods of research, processes of engagement and transformation that are intuitively recognised

by participants. They guide dialogue with both the interdisciplinary research collaborators: Health and Ageing Research Team (HART), New Indigenous Unity of Pacific Humanitarians Pacific Mātua Advisory, TOA-Pacific (elder care NGO), World Health Organisation (WHO) and Morgan State University (Washington); and the research participants (families, community and churches). To complement Fa'afaletui and Talanoa, elements of Co-Design were initially drawn upon for its patient-centred approach in health settings, involving those directly at the heart of interventions developing ideas and designs that would work and be used. In our study the real-time situated practice of fa'afaletui and talanoa with Pacific churches and families are Pacific methods equivalent to, but different from co-design. Fa'afaletui and talanoa enable people-centred engagement that leads to

Figure 1 Project Methodology



Talanoa and Fa'afaletui, were used to capture perspectives and experiences of caring for Mātua.

Fa'afaletui of 8 Talanoa (cultural- participatory dialogue) were conducted with over 120 participants representing 57 families, across two North Island cities of urban and regional areas. Fa'afaletui (collective houses of wisdom) represent Samoan and Tongan populations of the Pacific diaspora from Carers,

Mātua (elders), Tinā (mothers), Tamā (fathers) and Tupulaga (youth). Ages range from 6 - 87yrs. A family of Tokelau Tuvalu descent approached our study to gift us their experiences of caring for Elders. As such, the shared multi-generational family experiences were utilised as a pilot for our study.

collective-design with communal impact. In effect, fa'afaletui and talanoa are Pacific methods that are intrinsically co-design as they intuitively draw on the collective interactions between participants for culturally-led solutions that have immediate impact. Our methodology is a dynamic integrated design captured in Figure 1. Working with family carers, Mātua, community and Pacific leaders and employing Fa'afaletui with project advisers, Health and Ageing Research Team (HART), Pacific Mātua Advisory group, Pacific community Elder- collectives (Toa-Pacific) and International collaborators, will ensure ethical practices, community engagement, and cultural responsiveness at each stage (with informed consent and anonymity of data being paramount).

FEEDING BACK TO OUR COMMUNITIES OF RESEARCH – TAKING EVERYONE WITH US.

While the initial strategy for disseminating our results aimed to follow the 3-phase methodology model in Figure 1. The reality of COVID-19 with subsequent lockdowns impacted this proposed process of feeding back to our communities of research. In adapting our process we drew on opportunities to collaborate with partners such as Totara Hospice and List MP Anahila Kanongata'a based in Papakura South Auckland. This led to a TalanoaHUBBS symposium in partnership with Totara Hospice and the Labour Pacific Caucus post-budget roadshow through a feedback presentation in the Papakura community.

CHURCH-ENGAGED FAMILIES

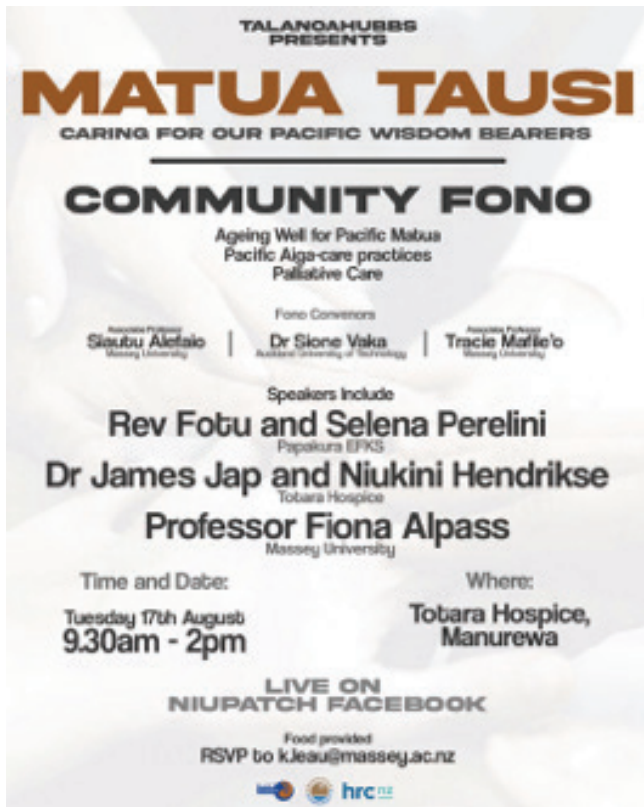
In collaboration with MP Anahila Kanongata'a our study findings were presented to church-engaged families through a Post-budget community meeting. This opportunity connected church, communities and services directly with Parliamentarians where discussion centered on

the implications of our study's findings and the government's budget developments.



TALANOAHUBBS COMMUNITY-FONO: TOTARA HOSPICE PALLIATIVE CARE PARTNERSHIP

In partnership with Totara hospice our study presented initial findings of Pacific carer experiences as uncovered in our talanoa with Pacific families from Auckland-based churches. The collaborative fono also provided an opportunity for Pacific communities to connect with Totara hospice and other Pacific Elder-care organisations such as TOA Pacific, Pacific HomeCare and relevant social service and health care providers. As a TalnoaHUBBS (Humans united beyond borders symposium), interdisciplinary and cross-cultural talanoa (dialogue) was enabled providing the impetus for future connections and engagement. Church leaders engaged in our study shared first-hand experience of palliative care, highlighting the unique Pacific dynamics of aiga/kāinga (family)-care that were encountered and how these shape decisions made during the most challenging and difficult times of end-of-life care.



PARLIAMENTARY-FONO ENGAGEMENT

An invitation for talanoa with key decision makers in government was extended through a parliamentary discussion with the Labour Pacific Caucus. This direct presentation of our preliminary findings provided an opportunity for our study to be presented and receive feedback from government leaders who face a myriad of challenges across a broad spectrum of nation-wide challenges. As such, our research team were invited to work together on drafting a carer leave bill. This direct feedback from government leaders provided new insights for our research team, pushing us past policy briefs and into a new realm of activating our research findings through the drafting of a bill, specifically the provision of care leave for Aotearoa NZ.

Niupatch Aotearoa is with Bella Samoa and 2 others at Beehive (New Zealand).
 December 6, 2022 · Wellington ·

What a blessing to be able to talanoa with the Labour Pasifika Caucus today, presenting preliminary findings from our HRC funded project 'Caring for our wisdom bearers: Pacific Mātua (Elder) care' ✨

Fa'afetai tele lava & Mälö 'aupito to Anahila Kanongataā-Suisuiki Labour MP and the Labour Pasifika Caucus for the priceless opportunity and for the pics of our team in action, Pacific-health Collective A/Prof Siautu Alefaio Bella Samoa A/Prof Tracie Mafie'o and Rev Dr Sione Vaka together with our amazing Prof Fiona Alpass from Massey HART (Health and Ageing Research Team) 🙏

Heres to the first of many! 🙌🔥

#aiga-wellbeing #Pacificpracademics



Labour Pasifika Caucus
 December 6, 2022 ·

Associate Professor Tracie Mafie'o, Rev Dr Sione Vaka, Professor Fiona Alpass and Associate Professor Siautu Alefaio presented a brief summary of their preliminary findings for Pacific Mātua research to our Pasifika Caucus Terisa Ngobi - MP for Ōtaki, Anahila Kanongataā-Suisuiki Labour MP, Lemauga Lydia Sosene MP, Dan Rosewarne MP and Tangi Utikere today.

This is a project they've combined their expertise on and this was a chance to continue a talanoa following a community fono at Papakura PIC with Anahila.

As practitioners they presented their findings around pacific mātua care policies centred in aiga (family) wellbeing.

Mälö 'aupito for your time today!

PARLIAMENTARY LAUNCH

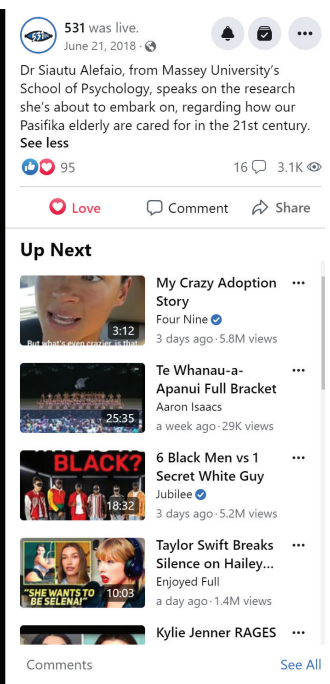
Our final report launch in Parliament is the presentation of our findings through the lives of our communities. Through our church and communities present at the launch in parliament this final step of activation showcases how our study brings everyone with us to engage together with change-making leaders of our nation.

5. OUR FINDINGS

PILOT STUDY FAMILY

Following a radio interview by our lead researcher <https://www.rnz.co.nz/national/programmes/sunday/audio/2018650663/siautu-alefaio-living-with-elders> a Pacific family carer reached out wanting to be a part of the study. They became our pilot study family and were of Tokelau Tuvalu descent. After listening to the interview the carer thought “what if we could help and be part of it [the study]..so I contacted and asked can we please be part of it..we can be the exception to the rule“. The family from Central Auckland wanted to help the study by sharing their carer experiences as one of the “last Island families left in town whose services around their area are predominantly for Europeans” (daughter and main family carer). The gift of participation from the pilot family contributed a wealth of aiga-carer experiences, shaping talanoa and fa’afaletui with our respective families. The

intergenerational Pacific carer experiences were shared across generations of the pilot family and captured the challenges of care in a health system that was not conducive to family care of Elders in the home. Ageing well and in place was stifled at every step of the family’s carer journey, despite their Mātua (Elder) being a long-serving health practitioner herself.



WHAT ARE PACIFIC MĀTUA (ELDER) CARE PRACTICES?



Sharing the Care, lighten the load

O le tele o lima e māmā ai se avega
(plenty of hands make light work)

Tausi Mātua is a unique Pacific Aiga/ Kāinga (Family) care practice which is a collective system of care based on family life-cycle.

“

..you do it together. You do it in a collectivistic way just like we're doing anything else. So you share it...there's two of us here at home. So me and her often taking turns and when were both away. One or the other siblings, steps in so everything is shared (Tongan Youth)

Tausi Mātua is:

- our fa'asinomaga (divine designation/ cultural identity/ connectedness) *“O lou fa'asinomaga e te tausia lava ou Mātua - O le fatu e totō E le mafai ona e alo iai”*

- protector of dignity and preserves cultural identity through minimising anxiety
- Brings meaning and life-purpose, is a blessing and inspiration for life
- Inter and multi-generational caring within aiga (family, extended family, church as communities of care)
- Features a unique phenomenon of Youth as carers captured by the Samoan concept of *Vae mo'emo'e* i.e. get tablets, do ipu ki, entertain them, connect them to fb live, provide translation and accompany to medical appointments.
- Holistic - providing cultural safety, comfort and support e.g. example of not just being a translator but being a physical representation of comfort and support during appointments.

The term **Tausi Mātua** is used to identify and describe aiga/kāinga (family) carer practices. It comes from the Samoan concept of *Mātua Tausi* which embeds the holistic nature of caring for Mātua within identity, culture and wellbeing.



Caring for elders at home is inherent and engrained in the Pacific everyday way of life, a difficult yet instinctive and willing decision.

"we've all seen our aunts, do it. Even my grandma, I watched her being looked after. And I thought she did it, and never complained, like, but now that we're doing it we're like, wow, that is a lot of work. Like she took it all on... So we kind of decided like, what would the point to send her somewhere? And then I would think the decline in health would be quite fast" (Pilot family)

"It feels like I'm kind of just tiny, like in a small part contributing back to all of the sacrifices that they made...they didn't need to come here to New Zealand and start from scratch in a country that's not their own culture, that's foreign. So that was all done for us. So I feel like a lot of that...plays a big role and why we put time aside and prioritise their needs today as they're ageing." (Tongan youth)

".. I think that is where it all comes from.. us witnessing our parents do it. When they took care of their parents and now it's our turn to help take care of them" (Samoan Tupulaga - youth)

"you can tell the difference. Between them and the doctors, like if it's something that we are able to do, we step up and do it. Yeah, even when nurses come in, stuff like that, we try and step up and do it and we pay attention to what the nurse's saying and it's just because of the love and the respect that we have for our parents because we know that they raised us the best way they could and now. We know now that we are older, it's our turn. So we do our best." (Samoan Tupulaga - youth)

"aua o le mea na e fai faalelei e tausi ia ou matua aua pe a maliu loa ia ou matua e te fiu a laia e fai mea o lou olaga faigaluega, kolegiga pe, ao le mea taua a na o le tausi muamua ia matua aua pe a leai ni ou matua e te tausi faafea na e ola, e taua le tausiga o matua". That is why you need to look after your parents well. Once they pass on, you can do anything with your life - work, training, or whatever you want- but at least you cared for your parents first because without doing that, what was your purpose? It is important to care for your elders. (Samoan Tupulaga - youth)

It is a blessing for families to care for their elders

"Kamata ke taufetongi e ongo mātu'a ki falemahaki. Tau 'alu pongipongi mo e fine'eiki ki falemahaki, peau 'alu efi'afi mo e tangata'eiki. Lolotonga ko eni, na'a ku ako taimi kakato mo e fānau 'e toko nima. Na'e fale'i au 'e he toketā, 'oku ke 'ilo 'oku mahu'inga ange ho'o mo'ui ki ho'o fānau 'i ho'o ongo mātu'a? Na'e kau eni ia he lea na'e 'ikai keu lava au ke tali. Ko e 'uhi ko 'eku 'ilo 'oku 'iai hoku fatongia ki he'eku ongo mātu'a. Na'e mālohi ange 'eku tokanga ke fakapapau'i 'oku mo'ui lelei 'eku ongo mātu'a"

"My parents started to keep going to the hospital. I would take my mother in the morning then my father in the evening. During this, I was a full-time student and had five children. The doctor advised me, that my health is more important to my children than my parents. I did not accept this as I know I had responsibilities and duties to my parents. I was more concerned about the health of my parents". (Tongan carer in their 50s).

"ia pe sili atu o le tausi muamua o o'u matua toe a uma atu loa lea o laua ona ou te fiu a ou te faigaluega maua isi kupe. E iai se tala faapea e le toe maua ou matua, ae maua tupe i aso uma. It's better to first care for my parents because when they pass away I can work all I want to get money. There is a saying you will never have another set of parents, but money you can get every day" (Samoan Tupulaga - youth)

"Ia, ia a'u la ia, ou te iloa na pa'ū a i luga o le aiga ia ma latou va foi na le i totonu ... auā. I la'u ia iloa, pe sa ave a le faatuatuaga, tai pei foi la o lo'u tamā, auā o lea na iinei, isi o matou aunty lea na nofo i lo matou aiga i Vaiala. I le tausiga o lona Tinā, e iai foi isi vaega i Samoa, ae a maua a le avanoa e o ifo iai e o ifo a. Ae pei sa ma'oti a le tagata lea e tausia ia ... e leai foi la se agaga foi lea sa iai e complain foi na le i le lē tausilēlei o le loomatua. Ae pei o le agaga foi na le o le faafetai, ona o le galuega o lea e faia e lea tagata toatasi. Ona matou o atu loa la ia i le maliu o lo matou loomatua, o la'u ia a tala na fai i o'u kaseni ia ... ia amuia latou ua iai so latou tausiga foi a na le i matua o matou matua, auā e lei faia e matou. To me, I think it falls on each family and their va within... because to my knowledge, its like the trust (faatuatuaga), for example like my Dad because hes here [NZ], to my Aunty who stayed with our family in Vaiala [Samoa]. In the care of their Mother, there were others in Samoa, if they were free to go over they would. But there was a specific person that cared for her.. there was no sense/spirit of complaint then of her not caring for our Grandmother well. It was more a spirit of deep gratitude/thanks/appreciation, for the work/service of this one person. Then when we all went to our Grandmothers funeral, what I said to my cousins was, they are so blessed that they were able to care for our Grandparents, because we didn't do it. (Samoan Tupulaga - youth)

Everyone has a role in the aiga/kaiga-care dynamic. Youth and parents action the care for their elders who are the Wisdom-Bearers and leaders of their families.

"The kids they're amazing... it is what it is like you just get on board...they are at the age of 14 and 13. He gets up he makes her breakfast. And then he takes her plate before he leaves and he gives her medicine ... They still need to be mothered. And yet, they are already looking after her... it's hard to explain to them, but you'll be so blessed when you're older, like you already have the compassion... the life skills." (Pilot family)

"E tāua tele mātua auā faapea la o tamaiti ia o loo ola iinei ua le iloa fa'aSamoa, e o mai e a'o uma e lata toeaina. E tausilēlei latou ae tausilēlei mai foi latou, e tele lo latou sao. Elders are so vital because for instance our families children that grew up here that can't speak Samoan, they'd all come to learn from my old man. We care for our elders but they also care for us, they have an invaluable contribution [to our lives]. (Samoan Tupulaga - youth)



WHAT ARE THE IMPACTS OF CHANGE ON CARER PRACTICES?



Caring across borders, Moving with the seasons (literal and figurative)

Tausi Mātua has changed over *TIME* (history of Pacific peoples in Aotearoa) and *PLACE* (migration to Aotearoa and across the globe). These changes have impacted the way *Tausi Mātua* is practiced.

Major changes impacting *Tausi Mātua* are the lived-realities of an ageing Pacific-diaspora of Aotearoa, who are **living longer** and **ageing in place**. This means Pacific migrants of the 50s-60s have aged in Aotearoa (outside of their Island home-lands), raising children (generations after) on principles embedded in Island-cultural values, beliefs and worldview.

“

I think living expenses its different.. its more expensive here than Sa, but i think mo le tupulaga (youth), if they need to stay and tausī their parents they have to stop everything like they don't go to school they don't work so apparently la ua kaofi uma lou olaga kalu ai le kausi o ou makua [your whole life is now put on hold to fulfil your duty to care for your parents] but no one is complaining. (Samoan Youth Faafaletui)

Impact of these changes

Tausi Mātua as a shared, collective practice based on family life-cycle, functions well in an environment of village-supports where multiple carers are available. **Major impacts** on *Tausi Mātua* as practiced in Aotearoa are:

Transnational mobility – as Pacific families migrate to other lands outside of Aotearoa, Mātua caring is shared amongst family members living in other countries i.e. Australia, USA, Tonga, Samoa (across borders). **Mobility** is fundamental for Mātua as it allows them to visit children, grandchildren and provides respite for families.

Financing these arrangements rely heavily on dependants in employment who fund health-care and treatment sought for illnesses (often across transnational borders/ countries).

An unintended consequence of the COVID-19 pandemic was the direct impact on Pacific families, especially when respite was no longer available through other family members. Families expressed guilt of needing respite and placing Mātua (Elders) in care.

Same cultural principles, different expectations of practice - being cared for in Aotearoa limits the village-support of multiple carers, significantly impacting the ability to care within smaller family units.

“

Na ou ola 'ae a'u ia, sa faamalamalama e o'u Mātua i le tulaga lea i le matou aiga, na o le to'aluā tama, ia ae lea o loo iai le ma tinā, e iai le ma tamā, o le tulaga la le na. My whole life in growing up my parents explained clearly to me the situation of our family as there are only two of us boys (sons) and we have a mother, and a father.. but this is the situation in relation to caring for our mother. (Samoan Youth Faafaletui)

Vā tapuia as a sacred principle in Samoa that defines boundaries between fathers, daughters, mothers, sons. Cultural expectations of caring for mothers physically is placed on daughters, and vice-versa with fathers and sons. While parents expressed having no expectation their sons would provide this care, the sons anticipate their reality given the situation.

For Tongan participants d fatongia (duties and responsibilities) was a central cultural value underpinning Mātua care. But also the concept of halafononga referring to pathways both old and new, represent new and emerging care practices necessitated by the New Zealand context. i.e. elder care homes. As described through the following Tongan carer experience.

'Ikai ko ha halafononga faingofua na'a ku fononga ai mo 'eku fa'ē. Halafononga fo'ou ia ke feinga'i 'eku fa'e ke 'ave ki ha rest home, lolotonga 'oku ou 'ilo ko hoku fatongia ia ke fai. Ka na'e maama ki hoku loto mo hoku 'atamai, 'a e fale'i 'a e toketa. 'Oku fiema'u lahi ange ko e 'e ho'o fānau he 'oku nau kei iiki. Ka ke ka hokohoko atu pe, te ke pā kalava ko e.

It was not an easy pathway with my mother. It was a new pathway, to take my mother to a rest home while it was my duty and responsibility to look after her. The doctors advise made it clearer to me. My children are still young, and they need me. If I continue with this, I will have a heart attack.

Na'e a'u 'o lea mai 'eku fa'e, pea he'ikai ngalo 'iate au, "kuo ke fo'i ko e hono tokanga'i au, kuo 'ave ai au ki he fale kau vaivai?" Pea ko 'eku tali, neu palōmesi ki hoku loto, teu fai hoku lelei taha kia moua he fonua ko eni.

It came to one time that my mother asked me, and I will never forget that "you do not want to care for me anymore? Is that why you want to take me to the rest home?" I replied, I made a promise to my heart, I will do my me best to you in this country.

Ne 'ave e fine'eiki ki he falevaivai, 'ikai lava e fine'eiki 'o mohe pea mo au. Mau 'a'ahi he 'aho kotoa pē mo 'ave 'ene me'akai Pasifiki. 'Osi māhina 'e taha pea 'eke atu, tali mai, hā e me'a ne tuai ai hono 'omai au ki heni. 'Oku ngaahi au heni hangē ha kuini heni.

We took her to the rest home; she was not sleeping well and me as well at home. We visited everyday with Pacific food. After one month, we checked with her, she replied, why did you bring me here so late. They treat me here like a queen.

(Tongan carer)

Tongan concepts that were reflected strongly in Talanoa with families were: FATONGIA – duties and responsibilities and HALAFONONGA – pathways, new and old as reflected in the above Tongan carer's experiences. FATONGIA and HALAFONONGA lie at the nexus of change for Tongan families that encounter carer duties and responsibilities (FATONGIA) with new pathways (HALAFONONGA).

Communal care through collective responsibility

"And I think, like, o tatou we don't just look at Mum and Dad. Like iinei i le tatou ekalesia (Like here in our church community) we look for, we look after all our parents, e le na o Mum and Dad, tatou te vaaia uma tagata matutua (not just Mum and Dad, we look after all the elders). You know, e mafai foi ona vili, fesoasoani foi na le (we can just ring, help out for instance), it just might not be just caring but maybe for like, for example, we can ring round to [elderly couples in the congregation] do you need help e moa le tou vao? Ia o, (Do you need help to mow your lawn? Ok go) you know things like that. (Samoan Tupulaga - youth)

Difficulties with placing elders in rest-homes

"O le mea le na na fai atu ai i le amataga, o le eseese le na o le tausiga a tatou ma le tausiga a palagi. You have to be realistic i le taimi e tupu ai le mea lea ia oe. Ona e le mafai ona e talia i le taimi nei, because you can say now, 'A'e, I'll never do that, it's in me to tausi my parents' but e le o iloa e oe le situation i le taimi e tupu ai. E iai la le taimi e tupu ai, ona, you have to put that pride aside foi na le, to give better care mo ou Mātua. This is why I said at the start, this is the difference in the way we care and the way palagi/ European/Pakeha care. You have to be realistic at the time this happens to you. Because you cant accept it right now, because you can say now, No, I'll never do that, it's in me to tausi my parents' but you don't know what will happen until you are in that situation. There could be a time that this happens, then you have to put that pride aside foi na le, to give better care for your parents." (Samoan Tupulaga - youth)

"Mahalo kau ka 'au 'o ta'u 75 kae fakakaukau'i he feitu'u ke 'ave au ki ai 'o tauhi ha taha ka nau 'atā nautolu 'o ngāue. 'Oku ou tui 'oku 'ikai ke manako e kakai Tonga he ngaahi talanoa pehe, ke 'ave 'enau kau vaivai ki ha feitu'u. Kapau 'e 'ave au ki ai he'eku fānau, teu tali pē 'e au mo e loto fiamālie"

If I get to 75 years old (in 4 years), I want to be cared for in a home and free my children so that they can work. I believe that this does not sound good in our Tongan community, to take our elderly people away. If my children want to do this to me, I will accept it with my whole heart.

(Tongan Mātua, 75 years)

"Ko au 'oku ou fokoutua pe hoku fale mo e foha 'e taha, 'ikai ha hoa. Taimi 'oku ou mo'ui lelei ai, 'oku tauhi au mo hoku foha mo e fangamokpuna. Taimi 'oku ou mahamahaki ai, pea toki tu'u mai e foha mo e fanga'ilamutu 'o fai hoku tauhi. 'Ikai ko ha ngāue si'i 'a e fai hoku tauhi ke tonu mo 'eku fiema'u".

I live by myself with one of my sons, I have no partner. When I am healthy, I look after my son and grandchildren. When I am sick, my son, nieces and nephews look after me. It is a difficult task and they do not always receive the care I need and up to the standard and quality I want.

"Kau ai e taimi 'oku ou fiema'u pe 'e au ha ki'i taimi fakalongolongo lahi."

There are times I also need peace and quiet.

(Tongan Mātua, 71 years)

"Ae o la'u ia vaai iai i le taimi sa ou iai i Samoa, i totonu a ia o aiga, e ... o le faigofie ia, ona o le toatele. Pei e toatele foi na le, e seasea na o outou ma le tamā i se aiga, ou aunties, ou uncles. Ia fai faatasi a la le ... e oo foi i le au matutua e o e fai le maumaga, auā e tausia ai aiga. A o nei a ia i lo'u iloa, o le faigata o iinei, ona o le tupe a mea uma. E le faapea foi na le e mafai ona totō se mea, ae sei vagana ... auā e oo lava i le mea e te nofo ai, e tologi. Pei o le faafitauli le na o iinei, compare foi na le i Samoa. Ou te le o fai atu la e faigofie atu Samoa loo iinei, ae o lo'u ia na iloa, ona e lei telē se taimi na ta ola ai i Samoa ma tausia a ta Mātua. Ae, ia o le tulaga le na ae ia pei a o le mea na i nai tagata na ua o ave ia tagata i fale o tagata matutua. E iai le mafaufau o tatou tagata Samoa, 'Ou te ofo' Tausi, tausia ua ... ae o le faigata le na ona e te le iloa tele pe a faapea e te lei oo iai. Ona e te oo loa

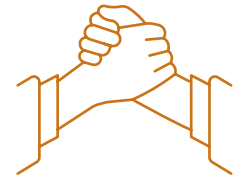
i se tulaga foi na le e manaomia ona e faigaluega, ae manaomia ona vaai ou Mātua, ia, ona faigata loa la ia o lau faaiuga e fai. . But my view of the time I was in Samoa, in my family, it was very easy because of the huge amount. Like it's very collective, you would hardly be with just your nuclear family, its your Aunties your Uncles. So things are done together .. even for the older members going to do the maumaga (plantation), because this provides for the family. But here in NZ to my knowledge, its really hard here, because money is everything. Its not like you can grow something, besides – even your house you pay for. This is the challenge of being here compared to Samoa. I'm not saying Samoa is easier than here but that's what I know, because I didn't have much time growing up in Samoa and caring for my elders. But like for example, people who have taken elders to rest-homes. There is a thinking for us as Samoans, I'm shocked, they cared for them and now... but this is the difficulty because you don't know if you aren't in this situation. Once you are in a type of situation like you need to work but also need to care for your elders, your decision then becomes very difficult." (Samoan Tupulaga - youth).

Having no siblings but needing to physically care for parents impacting vā tapuia (sacred relations between male and female)

"But I think for us growing up, o le natural feeling foi na le, like, ohh I'll just go and faataele my dad or I'll faataele my mum and I'm talking from my experience having, e leai ni ou brothers, e leai ni ou sisters, so you have that thinking, a o ai e faia? So, to us it's like, we'll just go and do it ourselves. But I think for us growing up, it's a natural feeling like I'll just go and shower my Dad or I'll shower my Mum and I'm talking from my experience having, no brothers or sisters, so you have that thinking, who then will do it?" (Samoan Tupulaga - youth)

"they're our parents they they're our responsibility to look after so when we're looking at like government agencies all I can think of is like caregivers or support workers rest homes and all that stuff, which I probably wouldn't put my parents- they probably wouldn't let me put them in anyways when they've got fully grown kids here at home to look after them so yeah, in terms of like physical care, I'd say we're okay" (Tongan youth)

WHAT SUPPORTS ARE NEEDED?



Listening for the Wisdom to speak: Ageing-Free = Ageing-well

Resourcing transnational mobilisation of Elders to extend super (pension) beyond the realm countries enabling freedom of mobility for Pacific Mātua to age-well. Currently only Pacific Mātua from Cook Islands and Niue can receive their super (pension) in their respective Island nations.

Space and Place-based care for Pacific Mātua such as Pacific aged-care facilities connected or even located on church properties. **Church families as carers** provide innovative opportunities to build **centers of care** where carers have same cultural principles, values, languages, and are based on family or kinship care-systems. Place these alongside ECE centres for multi-generational interaction and connection.

Provision of focused Pacific Mātua carer training: Carers expressed training for physical lifting, first-aid, and WINZ carer support. Currently WINZ carer support does not cover expenses or equipment to help families care in place.

Carer leave provision for Aotearoa: similar to other countries such as Australia, carer leave provision should be introduced. Further, definition of dependants to include extended family i.e. aunty, uncle so leave for caring is accessible for all, alleviating and helping to ease the financial strain of caring

Radio programmes to facilitate broader dialogue across generations: opportunity for programming that can bridge gaps between generations

Broadening available options for housing: New and current rental housing built to **accessible standards** for mobility purposes. For example, wider doorways, large lounge areas and kitchen for family gatherings.

Timing of house modification for home-owners: For severe caring needs such as strokes where Elders are immobile, home owners are offered modification support through health system. For example bathroom modifications to accommodate caring for Mātua. The application process is extensive and by the time it is in the final stages (2 years later) families feel the length of time waiting is intentional i.e. waiting for loved one to die, yet it is cheaper for family to care for Mātua than place them in a care-facility.

Transitional support for life after care: Youth carer pathways back to work or study when elders pass away, and pastoral/ grief support for widows left behind.



Space and Place-based care for Pasifika Mātua

'Oku ou kei lue pe au pea 'oku ou fanongo pe ha me'a e Pasifiki pea 'oku ou faka'amu au keu 'alu ki ai mo fiefia ai. He ko e me'a ia 'oku holo ai 'eku mo'ui ko e lahi e lonely, 'ete nofo tokotaha, 'oku fiema'u 'e kita ke te talanoa fevahevahe'aki mo e ngaahi kakai mo e friend. I still walk and always happy to hear when there are Pacific events. I want to attend as those events make me happy. You want to go and meet people, friends and share stories and experiences. (Tongan Matua in her 70s)

Lahi e me'a 'oku 'ikai ke ne manatu'i pea lahi mo 'ene hē he'ene lue. Mau ilifia na'a 'alu 'o hē pea tui'l ha me'alele ke lavea. Mau feinga pe mautolu 'a e famili ke 'oange 'ene independence he 'oku mahino kia mautolu 'oku malohi hono va'e ki he lue pea fiema'u 'e ia ke lue 'o 'oua 'e housebound. Pea na'a kole tokoni ki he Siasi ke nau tokoni, ka 'iai he taha 'e sio ki he fine'eiki pea fetu'utaki mai. Pea 'oku ou fakafeta'l 'oku ui pe he Siasi ko 'enau kui pea mau fetokoni'aki 'aupito.

There are lots that she cannot remember, and she usually get lost when she walks. We are concerned that she might get lost and got hit by a vehicle on the road. We try to promote her independence as she still has strong legs, loves walking, and did not want to be housebound. I ask the church community to help and if anyone sees her on the road to please contact us. I am thankful that the church has been helpful, and they treat her as their grandmother.

Fiema'u ke fokotu'u ha feitu'u ke 'ave 'etau kau vaivai ke toe fakamanatu 'enau culture mo 'enau lea. Mo talanoa kia kinautolu 'a e kuohili mo e feitu'u 'oku nau ha'u mei ai. 'Oku ou fakatokanga'i 'emau fine'eiki 'oku nofo pe ia 'o talanoa ki hono kolo tupu'anga mo e kakai 'oku 'ikai 'ilo au ki ai. 'Oku ha'u leva e fanga mokopuna 'o take her there on a journey 'o fakalele e ngaahi youtube e ngaahi lakalaka, himi fakalotu, ngaahi me'a faka-Tonga pea 'oku settle 'ene mind pea fiefia ai. The need for Tonga culture 'oku lack 'aupito 'i heni.

We need a place where we can take our elderly and remind them about their culture and language. Then talk to them about their past, their homes and places where they grew up. I noticed my mother that she keeps talking about her island and people she grew up

with. Her grandchildren come and play her YouTube videos of Tongan dances and Tongan hymns and that makes her happy. They take her on journey back to Tonga. Tongan culture is lacking in where we are at.

(Tongan carer in her 50s)

Carer leave provision for Aotearoa

"explaining that to work, in that when he's sick or when he has appointments and that my boss, luckily is very understanding. But I ended up using a lot of leave and stuff in because...they don't quite qualify as your dependents eh, according to their policies." (Tongan youth)

"Pei o leisi tulaga lea e tatau ona tilotilo iai le Malo NZ, ina ia mafai ona faalauaitele le latou tilotilo i le tatou aganuu foi na le, ona o tatou e le na o tatou, foi na le ... e iai taimi, ina tei ua faapea atu o lea e tausi le ... e seasea tilotilo latou i lea tulaga foi a na le ... o leisi mea taua e tatau ona iloa e le Malo. Tatou tagata Samoa e le na o tatou matua e tausi, e lavea i le mea lea. E iai foi o tatou aunties, uncles e manaomia le tausiga. E tatau a ona tausi, o le tofiga a ia o le tausi." So I just want to add to the point by A, in terms of her Aunty? This is another area the NZ govt should look at, to be able to look deeper into our culture, because we are not individuals, there are times that we will care for others e.g. Aunties – extended family, this is an important point the govt should know. Us Samoans don't only care for our parents, we also have Aunties, Uncles that need care. We should care for them, it is our calling to tausi. (Samoan Tupulaga -youth)

"you get charged for medical bills eh? Yeah, see so some of us can't ... work ... long hours to pay it off for them [elders]. Another way that government can change, if they can't afford medical bills it should be free to them [Mātua – elders]... It's ok for us kids to pay cos we can work but for them to come up with it from benefit money which is supposed to help them as they get older, it's basically giving money back to the government" (Samoan Tupulaga - youth)

Provision of focused Pacific Mātua carer training:

“we’ve tapped into the funding for a disability vehicle... and even then, again that was having to do the research yourself. No one comes and tells you... it was something where we had to do and find out.. I wish we... got discharged and here’s your package with everything you need to know” (Pilot family)

“Ae iai foi lo tatou popolega foi na le, e o mai carers e fai [But we also have a worry, for carers to come] I think to us, e iai lo tatou mentality foi na le e le ... it’s not the same love foi na le. It’s a job to them, but for us it’s not a job it’s a natural feeling foi na le ia tatou as kids taking care of our parents.” (Samoan Tupulaga - youth)

Housing

“we haven’t been given clearance to shower because they deemed it as too small and dangerous, but I still shower (reference to Elder mother) because she wants to shower, but that’s why the urgency for the bathroom, we got told well maybe you can take her to the local pools where they have disability, like really? Like that’s insulting!” (Pilot family)

6. POLICY IMPLICATIONS

POLICY IMPLICATIONS

Considering these high level findings, this study calls for innovative policies focused on Pacific Mātua as the core of Aiga/ Kāinga (family) wellbeing.

Such policies allow Pacific wayfinders of care focused on collective family wellbeing.

Pacific Mātua-care policies centered on Aiga/kāinga (family) wellbeing should consider:

- **Carer Leave** based on the unique Pacific Aiga/ kāinga (family) care practice which is a collective kinship-system of care centered on family life-cycle.
- **Broadening definitions of family beyond households** to accommodate multiple carers. For example: include parents, aunty, uncle, cousin as dependents enabling carers to be extended outside of immediate family.
- **Extend the provision of super (pension) beyond realm countries** to enable freedom of mobility to age-well
- **Support for Church and community-led Centers of care** located on church properties next to ECE centres providing innovative village-supports for access to culturally-embedded caring
- **Build and supply housing that is accessible** ensuring families are supported to care well, and be well.



7. CONCLUSION

This report shines a light on Pacific carer practices to reveal the realities of life for Pacific families in Aotearoa New Zealand. We now know Tausi Mātua a unique Pacific Aiga/ Kāinga (family) care practice is a collective system of care based on family life-cycle. It is more than just a care practice, it is a lifestyle underpinned by inherent cultural values and beliefs. It is part of our fa'asinomaga (divine designation/ cultural identity/ connectedness/ fatongia (duties and responsibilities) and halafononga (pathways and journey)) and brings meaning and life-purpose as a blessing and inspiration for life.

However, the endowed challenges within the blessing are clearly impacting the lives of carers who are multigenerational. Pacific families are not immune to the major changes that are part of the global phenomenon of an ageing population who are living longer and ageing in place. The initial Pacific migrant workforce of the 1950s-60s economic boom-era has aged in place, creating a first wave of an ageing Pacific population within Aotearoa NZ.

This has clear implications for the care of Pacific Mātua (elders) who require support to age-free and age-well. Our report highlights the supports required and policy implications that allow Pacific to be way finders of care focused on collective family wellbeing. Finally, it is clear intergenerational care is the cornerstone of Tausi Mātua and caring duties and responsibilities are inherent in the Pacific life-cycle. Whilst not a unique discovery for Pacific families, Tupulaga (youth) carers termed as a consequence of this study is a distinct experience in the global carer research. Pacific being the most youthful population in Aotearoa showcases the unique Youth carer phenomenon that is intrinsic to intergenerational care specific to Pacific families. As such, our study **strongly recommends the prioritisation of carer leave and church community-led centres of care** to enable the wellbeing of our Mātua and Aiga/Kāinga (families).



8. REFERENCES

1. Elliott, T. R., & Parker, M. (2012). Family caregivers and health care providers: Developing partnerships for a continuum of care and support *Multiple dimensions of caregiving and disability* (pp. 135-152): Springer.
2. Miller, E. A., & Weissert, W. G. (2000). Predicting elderly people's risk for nursing home placement, hospitalization, functional impairment, and mortality: a synthesis. *Medical care research and review*, 57(3), 259-297.
3. Spillman, B. C., & Long, S. K. (2009). Does high caregiver stress predict nursing home entry? *INQUIRY: The Journal of Health Care Organization, Provision, and Financing*, 46(2), 140-161.
4. Grimmond, D. (2014). *The economic value and impacts of informal care in New Zealand. Report for Carers NZ and NZ Carers Alliance*. Infometrics:Wellington
5. Means, R. (2007). Safe as houses? Ageing in place and vulnerable older people in the UK. *Social Policy & Administration*, 41(1), 65-85.
6. Wiles, J. (2005). Home as a new site of care provision and consumption. In G. J. Andrews, and David R. Phillips, eds. A (Ed.), *Ageing in place* (pp. 79-97): Routledge.
7. Dalziel, L. (2001). *The New Zealand positive ageing strategy: Towards a society for all ages*. Wellington. Wellington, New Zealand: Ministry of Social Policy.
8. Ministry of Health. (2016). *Health ageing strategy*. Wellington, NZ: Ministry of Health.
9. Fortinsky, R. H., Tennen, H., Frank, N., & Affleck, G. (2007). Health and psychological consequences of caregiving. *Handbook of health psychology and aging*, (pp. 227-249). Guilford Press: New York.
10. Ory, M., Lee, J., Tennstedt, S., & Schulz, R. (2000). The extent and impact of dementia care: Unique challenges experienced by family caregivers. In, R. Schulz (Ed.), *Handbook on dementia caregiving* (pp. 1-32). New York, USA: Springer Publishing Company.
11. Pinquart, M., & Sörensen, S. (2003). Associations of stressors and uplifts of caregiving with caregiver burden and depressive mood: a meta-analysis. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 58(2), P112-P128.
12. *Alpass, F., Pond, R., *Stephens, C., Stevenson, B., Keeling, S., & Towers, A. (2013). The Influence of Ethnicity and Gender on Caregiver Health in Older New Zealanders. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*. doi: doi: 10.1093/geronb/gbt060
13. Dahlrup, B., Ekström, H., Nordell, E., & Elmståhl, S. (2015). Coping as a caregiver: A question of strain and its consequences on life satisfaction and health-related quality of life. *Archives of gerontology and geriatrics*, 61(2), 261-270.
14. Fekete, M., Szabo, A., *Stephens, C., & *Alpass, F. (2017). Older New Zealanders in caregiving roles: Psychological functioning of caregivers of people living with dementia. *Dementia: The International Journal of Social Research and Practice*. doi: DOI: 10.1177/1471301217725897
15. Kruithof, W. J., Post, M. W., & Visser-Meily, J. M. (2015). Measuring negative and positive caregiving experiences: a psychometric analysis of the Caregiver Strain Index Expanded. *Clinical rehabilitation*, 29(12), 1224-1233.
16. Ho, S. C., Chan, A., Woo, J., Chong, P., & Sham, A. (2009). Impact of caregiving on health and quality of life: a comparative population-based study of caregivers for elderly persons and non-caregivers. *Journals of Gerontology Series A: Biomedical Sciences and Medical Sciences*, 64(8), 873-879.

17. Vitaliano, P. P., Zhang, J., & Scanlan, J. M. (2003). Is caregiving hazardous to one's physical health? A meta-analysis. *Psychological bulletin*, 129(6), 946.
18. Schulz, R., & Beach, S. R. (1999). Caregiving as a risk factor for mortality: the Caregiver Health Effects Study. *Jama*, 282(23), 2215-2219.
19. *Alpass, F., Keeling, S., Allen, J., Stevenson, B., & *Stephens, C. (2017). Reconciling Work and Caregiving Responsibilities among Older Workers in New Zealand. *Journal of Cross-cultural Gerontology*, 1-15. doi: 10.1007/s10823-017-9327-3
20. *Alpass, F., Szabo, A., Allen, J., & *Stephens, C. (2017). Health effects of informal caring in New Zealand: longitudinal findings from the Health, Work and Retirement study. *International Journal of Care and Caring*, 1(3), 309-329.
21. Davey, J. A., de Joux, V., Nana, G., & Arcus, M. (2004). *Accommodation options for older people in Aotearoa/New Zealand*. Christchurch: Centre for Housing Research.
22. *Vakalahi, Halaevalu F. *Ofahengaue*; Heffernan, Keaohi'ilani; Johnson, Rachel Niu (2007). Pacific Island elderly: A model for bridging generations and systems. *The Journal of Baccalaureate Social Work*, 12(2), 26-41.
23. Tamasese, T.K., Parsons, T.L., & Waldegrave, C. (2014). Pacific Perspectives on Ageing in New Zealand. Report for the New Zealand Longitudinal Study of Ageing (NZLSA). Retrieved from http://www.massey.ac.nz/massey/learning/departments/school-of-psychology/research/hart/publications/project-reports_nzlsa.cfm
24. Poland, Michelle; Janis Paterson, Sarnia Carter, Wanzhen Gao, Lana Perese and Steven Stillman. 2007. "Pacific Islands Families Study: Factors Associated with Living in Extended Families One Year on from the Birth of a Child," *Kotuitui: New Zealand Journal of Social Sciences Online*, 2:1.
25. Kiata, L., & Kerse, N. (2004). Intercultural residential care in New Zealand. *Qualitative Health Research*, 14(3), 313-327.
26. Apulu, M. T. J. (2010). Tautua faatamalii: Servant hood with absolute integrity, engaging with Samoan young people. Unpublished master's thesis, Massey University, Auckland, New Zealand.
27. Tui Atua Tupua Tamasese Taisi Efi. (2007). Physician, heal thyself: Planning and "making right" (pono) for the next generation. Keynote Address The Big Island Liturgy and Arts Centre Conference Hilo, Hawaii.
28. Pulotu-Endemann, F. K., & Tu'itahi, S. (2009). *Fonofale: Model of health*.
29. Suaalii-Sauni, T., Wheeler, A., Saafi, E., Robinson, G., Agnew, F., Warren, H., . . . Hingano, T. (2009). Exploration of Pacific perspectives of Pacific models of mental health service delivery in New Zealand. *Pacific Health Dialog*, 15(1), 18-27.
30. Tautolo, E.-S., Wrapson, W., Paterson, J., Clair, V. W.-S., Neville, S., Dewes, O., & Iusitini, L. (2017). Healthy Pacific grandparents: a participatory action research project exploring ageing well among Pacific people in New Zealand. *Self & Society*, 45(2), 134-148.
32. *Alefaio-Tugia, S. T. (2015). Galuola: a NIU way for informing psychology from the cultural context of Fa'aSamoa (Doctoral dissertation, Monash University. Faculty of Education. Education Psychology).
33. Wiles, J. (2011). *Resilient ageing in place: Project recommendations and Report*. University of Auckland Faculty of Medical and Health Sciences. Retrieved from https://www.fmhs.auckland.ac.nz/soph/depts/sch/ageing/_docs/Resilient-Ageing-in-Place-Recommendations-and-Report.pdf
34. Statistics NZ 2013
35. Levy-Storms, L., & Lubben, J. E. (2006). Network composition and health behaviors among older Samoan women. *Journal of Aging and Health*, 18(6), 814-836.) n, J. E.

36. Sundborn, G., Metcalf, P., Scragg, R., Schaaf, D., Dyal, L., Gentles, D., ... & Jackson, R. (2007). Ethnic differences in the prevalence of new and known diabetes mellitus, impaired glucose tolerance and impaired fasting glucose. Diabetes Heart and Health Survey (DHAH) 2002-2003, Auckland New Zealand. *The New Zealand Medical Journal (Online)*, 120(1257).
37. Chan, W. C., Wright, C., Riddell, T., Wells, S., Kerr, A. J., Gala, G., & Jackson, R. (2008). Ethnic and socioeconomic disparities in the prevalence of cardiovascular disease in New Zealand. *The New Zealand Medical Journal (Online)*, 121(1285)
38. Jatrana, S., & Blakely, T. (2008). Ethnic inequalities in mortality among the elderly in New Zealand. *Australian and New Zealand Journal of Public Health*, 32(5), 437-443.
39. Jeffreys, M., Stevanovic, V., Tobias, M., Lewis, C., Ellison-Loschmann, L., Pearce, N., & Blakely, T. (2005). Ethnic inequalities in cancer survival in New Zealand: linkage study. *American Journal of Public Health*, 95(5), 834-837).
40. Suaalii-Sauni, T., & Fulu-Aiolupotea, S. M. (2014). Decolonising Pacific research, building Pacific research communities and developing Pacific research tools: The case of the talanoa and the faafaletui in Samoa. *Asia Pacific Viewpoint*, 55(3), 331-344.
41. Vaioleti, T. M. (2016). Talanoa research methodology: A developing position on Pacific research. *Waikato Journal of Education*, 12(1).
42. *Vaka, S., Brannelly, T., & Huntington, A. (2016). Getting to the Heart of the Story: Using Talanoa to Explore Pacific Mental Health. *Issues in Mental Health Nursing*, 37(8), 537-544. doi:10.1080/01612840.2016.1186253
43. *Alefaio-Tugia, S., & Palaamo, L. (2017). Pacific-ageing: Exploring the realities of Pacific indigenous Mātua (Elder) care, (forthcoming).
44. Boyd, H., McKernon, S., Mullin, B., & Old, A. (2012). Improving healthcare through the use of co- design. *The New Zealand Medical Journal (Online)*, 125(1357).
45. The Southern Initiative, Auckland Council – Auckland Co-design Lab the Early years Challenge. <http://www.aucklandco-lab.nz/early-years>