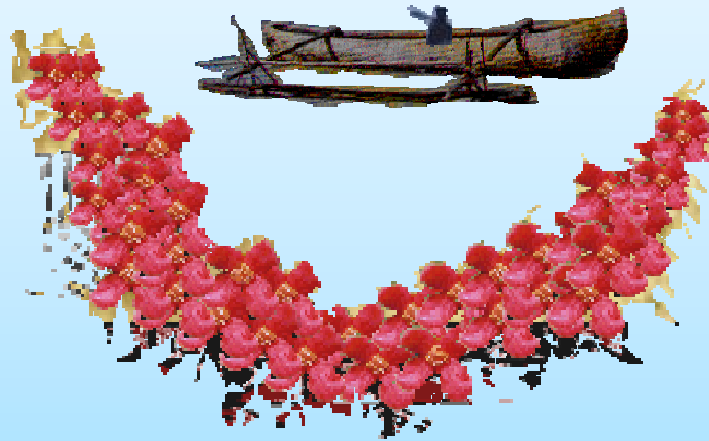


POPAO MODEL

FOLAU KI HE MO'UI LELEI - JOURNEY TO WELLNESS

A Pacific Recovery and Strength Concept in Mental Health



POPAO TONGAN GROUP
AUCKLAND, NEW ZEALAND

COVER DESIGN:

The cover was designed by Taitoko Tafa. The design on the left is of a *ngatu* (*tapa cloth*). *Ngatu* was used primarily for clothing and for blankets. It is made from the stripped and beaten bark of the paper mulberry tree. The *ngatu* represents the warmth and safety of being at home with family and the *kainga* (kinship). The *kupesi* (design motifs or patterns) of the *ngatu* alludes to the beauty and symmetry of relationships. These also symbolise the connections to *kainga* or family and the *kolo tupu'anga* or village one hails from. The blue and white background is representative of the lagoon and the sky. The *popao* is the Tongan name for the outrigger canoe. The *popao* is set to journey in the lagoon with a *kahoa heilala* (garland of fragrant *heilala* flowers). The *kahoa heilala* symbolises triumph, celebration and hope. The journey describes a person living through illness and into wellness.

ACKNOWLEDGEMENTS:

The authors would like to acknowledge the help and support of:

Isa Lei, Takanga 'A Fohe. Pacific Mental Health and Addiction Services,
Waitemata District Health Board
Le Va - Pasifika within Te Pou
Vaka Tautua.
Pacificare.
West Fono.
ATHWA
Tauhi Sipi Lelei Tongan men's club.
Popao group and families.

List of past and present members of the Popao Tongan Group:

Taitoko Tafa, Manu Fotu, Rev. Viliami Finau, Paula Taufua, Petoni Lomu,
Daniel Sio, Tevita Hingano, Paea To'oa, Viliami Tupou, Jacinta Apelu, Sifa
Tupou, Semisi Pule, Daa 'Aholelei, 'Ofa Filisonu'u, Melesisi 'Aholelei,
'Emanita 'Aholelei, Tupou Tatafu, Saviana Vaiaku, Liku Talau, Tenisia Vaka,
Viliami Taufua, Taulanga Kupu, 'Elisapeti Tevi, Kilikiti Koloamatangi, Keleni
Talau, Manase Lua, Tu'itofa Mafi, Anthony Foua, Havea Tonga'uiha

POPAO MODEL

FOLAU KI HE MO'UI LELEI - JOURNEY TO WELLNESS

A Pacific Recovery and Strength Concept in Mental Health

© 2009

Taitoko Tafa

Manu Fotu

Popao Tongan group

Contact: Taitoko Tafa (021) 0266 0899
Manu Fotu (027) 244 4419



TABLE OF CONTENTS

SECTION ONE: INTRODUCTION	6
SECTION TWO: A PACIFIC RECOVERY STRENGTH CONCEPT IN MENTAL HEALTH.	7
<i>The Recovery Concept</i>	7
<i>The Strength Concept</i>	7
<i>Aim of the Popao Model</i>	8
<i>Popao Cultural and Collaborative Assessment Scale (PCCA)</i>	8
<i>Cue and Response Interview (C&R)</i>	10
SECTION THREE: THE STRUCTURE OF THE POPAO	12
<i>The Popao Model</i>	12
<i>Representations</i>	13
SECTION FOUR: THE JOURNEY OF THE POPAO	15
<i>Representations</i>	15
<i>Popao Journey in the lagoon song and dance</i>	17
SECTION FIVE: ARRIVING AT THE BEACH(Goal)	20
<i>Call for Celebration</i>	20
<i>Popao Recovery Plan</i>	21
<i>Statements from Popao Group</i>	32

SECTION SIX: WELCOME HOME ('API).	34
<i>Ma'u Kava Model</i>	34
<i>Going Home</i>	37
<i>Popao Tongan Group 2009 Planning Day</i>	37
<i>Popao Tongan Group 2008 Programme</i>	40
<i>Fofola e Fala kae fai e Talanga Model</i>	45
<i>Living life in the community – Fofola e Fala kae fai e Talanga Model</i>	46
<i>Popao Tongan Group 2009 Programme</i>	47
<i>Popao 2009 Tongan Song and Dance</i>	56
SECTION SEVEN: POPAO GROUP AND LIFE STORIES OF MEMBERS WITH EXPERIENCE OF MENTAL ILLNESS	57
<i>Popao History</i>	57
<i>Popao Model brief history</i>	57
<i>Outcome for the Popao group members</i>	59
<i>Where to from here</i>	60
<i>Life stories of Consumers</i>	61
CONCLUSION	68
REFERENCES	69

SECTION ONE: INTRODUCTION

The Popao or outrigger canoe has been used as a metaphorical model for mental health service users and professionals shared understanding of the treatment process as a 'journey' towards recovery and strength within a Pacific paradigm.

The popao model was developed collaboratively by the 'Popao Group' involving a number of key stakeholders in the Pacific mental health sector including service users, community support workers, Matua, clinicians and service providers, particularly Isa Lei - Pacific Mental Health and Addictions Services (based in West Auckland under the umbrella of the Waitemata District Health Board). The popao model began its development in 2005 and was officially launched in August, 2007.

The popao is primarily designed for use within the lagoon, not for open sea. Traditionally, the popao was a means of travel and used for fishing and harvesting of shellfish. In the lagoon there are obstacles that may disrupt a journey. Thus, the need to be well prepared for the journey and being familiar with both the lagoon and the use of the popao will ensure a desired destination is reached. A developed awareness of the lagoon will assist the negotiation through, with and around obstacles that may arise in one's journey. Equally, it is important that one is aware of how each part of the popao is connected and understanding the strengths and weaknesses of the vessel. Ignorance of the popao may result in the popao sinking. Knowing the popao develops a relationship of identification and relatedness.

Consumers utilise parts of the popao as a tool to help them identify support structures in a framework they can understand. Each consumer paddles their own popao towards their desired destination, mapping and personalising their journeys and identifying any obstacles in the lagoon.

The popao group meet weekly to share experiences of mental illness alongside community support workers, clinicians and service providers. It is not exclusive to Tongan consumers of Isa Lei but is also a part of a wider Auckland network (Auckland District Health Board and Counties Manukau District Health Board). Various skills and knowledge that have been lost through mental illness may be rediscovered with the support of the appropriate professionals and support.

SECTION TWO: A PACIFIC RECOVERY AND STRENGTH CONCEPT IN MENTAL HEALTH.

THE RECOVERY CONCEPT

Recovery can be both a destination and a journey. As a journey, recovery is the process of facing and living through the challenges that life brings, be it periods of the distress and confusion of mental illness or the ups and downs of the human condition. It is the process of building one's confidence and developing the ability to move on, and to work through or reclaiming the life one desires.

As a destination, recovery is a life worth living or, as described in the Mental Health Commission Blueprint, "living well in the presence or absence of one's mental illness" (Mental Health Commission 1998:1). The hallmarks of such a life may include a job, a home, good relationships with family//aiga/ fanau and friends, strong links with one's culture, community and a sustaining faith in a higher power. Whatever it may be, a life worth living is different for each individual; it cannot be prescribed. It must be of one's own choosing.

THE STRENGTH CONCEPT

Collaborative communication between support networks with regards to: goals, tasks and roles would develop a shared understanding of the treatment process. There is particular and explicit emphasis on consumer strengths (which include family) and the cultural aspects.

The strengths model as Charles Rapp conceptualises it is not simply an "*add strengths and stir*" attachment to existing pathology- or problem-focused paradigms (Rapp & Goscha, 2006). Rather, it is a paradigm shift to a strengths and resilience focus that "*allows for new and creative ways to work with consumers that honour their skills, competencies, and talents as opposed to their deficits.*" (Rapp & Goscha, 2006:35). Highlighting the positive aspects of consumers would enhance their resilience that result in developing or reclaiming the capacity to have good life – whatever that may be. This capacity can be described as self determination, having governance over one's life or autonomy.

AIM OF THE POPAO MODEL

The intended outcome of this recovery and strength model is for consumers to ultimately become independent and able to charter their own journey, with the reassurance that professionals can reembarc the Popao if and when the need arises. The objectives of the popao model are:

- to reconnect and strengthen consumers' Tongan cultural heritage and identity by participating in Tongan specific activities and encouraging communication in the vernacular;
- to provide an encouraging environment where consumers may develop confidence, effective communication and acceptance within their identified roles, family unit and their wider Tongan community;
- to provide a safe environment to allow consumers to increase their self esteem and develop or acquire skills when participating with others in the group through a variety of activities; and it is hoped that the popao model provides a consistent, reproducible approach to assessing the key components of recovery and strength concepts highlighted by the Mental Health Commission (1998) which include:
 - improve the partnership between the consumer and support networks
 - collaboratively identifies problems and improves targets, interventions and support
 - is a motivational process for consumers and their families and leads to sustained positive Outcomes
 - allows measurement over time and monitors change
 - has a predictive ability, i.e. improvements in self-management behaviour as measured by the Popao Cultural and Collaborative Assessment (PCCA) scale and leads to improved outcomes
 - has a predictive ability, i.e. improvements in self-management behaviour as measured by the Popao Cultural and Collaborative Assessment (PCCA) scale and leads to improved outcomes.

POPAO CULTURAL AND COLLABORATIVE ASSESSMENT (PCCA) SCALE

The PCCA is a twelve part questionnaire was developed by Manu Fotu and the Popao group. The consumer completes the questionnaire by scoring their response against each question on a nine point scale with zero being the best response and eight being the worst. Table 1 illustrates questions which cover 12 areas:

Table 1: PCCA Scale

<p>Knowledge of condition. <i>Mahino'i/ 'Ilo'i hoto tukunga.</i> Understanding of your situation (eg. Sickness, loneliness, isolation)</p>
<p>Knowledge of treatment. <i>Mahino'i/'Ilo'i 'a e ngaahi tokoni / tauhi 'oku lolotonga fai kia au 'i he 'eku folau ki he Mo'ui Lelei.</i> Understanding my "Journey to Wellness" (clinically, culturally, spiritually, socially, personally)</p>
<p>Ability to engage support. <i>Malava ke tali e ngaahi tokoni/poupou.</i> (e.g. lotolelei ki he ngaahi faito'o, tali e ngaahi 'ofa e kainga - taking medication, accepting family support)</p>
<p>Ability to share in decisions. <i>Fofola e Fala ka e fai e Talanga.</i> Able to be part of your Journey's decision making.</p>
<p>Ability to arrange and attend appointments. <i>Malava ke fakakaukau'i mo fakahoko ngaue</i> Able to initiate (decide, organize) and implement (take action).</p>
<p>Understanding of monitoring and recording. <i>Mahino'i e founa tokanga'i(monita'i) mo hono tanaki 'o tauhi maa (lekooti)</i></p>
<p>Ability to monitor and record. <i>Malava ke ke tokanga'i(monita) mo tanaki 'o tauhi maa (lekooti).</i> Able to look after yourself</p>
<p>Understanding of symptom management. <i>Mahino'i e founa ke tokanga'i 'aki koe.</i> (e.g. ngaahi faka'ilonga 'o e mahaki - How do you look after yourself? eg. What are the symptoms of illness)</p>
<p>Ability to manage symptoms. <i>Malava pe 'o tokanga'i koe?</i></p>
<p>Ability to manage the physical impact. <i>Malava ke matu'uaki 'a e ha'aha'a 'o natula</i> (sino, famili, sosaieti, natula - Body, family, environment, society's impact).</p>
<p>Ability to manage the social, spiritual and emotional impact. <i>Malava ke matu'uaki e peau fakasosiale, fakalaumalie, mo e ongo.</i></p>
<p>Journey towards a healthy lifestyle. <i>Fakalalaka ho'o mo'ui kakato. Fononga ki he Mo'ui Lelei.</i></p>

CUE AND RESPONSE INTERVIEW (C&R)

The Cue and Response (C&R) interview is an adjunct to the PCA scale and is based on the Flinders Model. The C&R process is a series of open-ended questions or cues to explore the consumer's responses to the PCA Scale in more depth. It enables the barriers or issues to be examined and helps clarify assumptions that either the clinician/support networks or the consumer may have. The clinician/support networks score their responses and compare this score with the scores of the consumer.

The C&R interview is a motivational process for the consumer and a prompt for behavioural change. It allows the individual the opportunity to look at the impact of their condition on their life, some time to reflect on cause and effect. The cue questions are not prescriptive and serve as examples of the types of questions that may be asked. Some examples of cue questions are to be found in Table 1.

Table 1: Examples of Cue Questions

<p style="text-align: center;">Knowledge of Treatment</p> <p style="text-align: center;">Tell me about the treatment you are having What can you tell me about your medication? What do you know about alternative treatment? Tell me about any other treatment that has helped you What are the things that stop you having, (or following) your treatment?</p> <p style="text-align: center;">Sharing in Decisions</p> <p style="text-align: center;">How comfortable are you talking to your doctor or other support professionals? What are the problems? How are you included in decisions about your health?</p> <p style="text-align: center;">Family Dynamics</p> <p style="text-align: center;">What kind of support you receive from your family? What support do you receive from the extended family?</p> <p style="text-align: center;">Spirituality</p> <p style="text-align: center;">Do you attend church? What part does religion play in your life, is it important to you?</p> <p style="text-align: center;">Healthy Lifestyle</p> <p style="text-align: center;">What are you doing to keep yourself healthy? What are the things that you are doing that don't help? What are the things you would like to change?</p>

Scores rated on the higher end of the scale, by either consumer and/or clinicians/support networks expose issues for further discussion. This allows for clarification of issues and a common set of problems to be identified by consumer and support networks. It also allows the clinician/support networks to recognise areas where the consumer is managing well.

Collaborative problem identification has been found to be a key indicator in successful self-management programs (Wagner et al, 1996). Identification of issues allows relevant strategies and interventions to be discussed and agreed upon. This information is easily incorporated into a Recovery plan that involves support networks and the consumer.

The PCA scale and C&R assessment tools may be used concurrently or on their own. Both identify issues and help towards forming a recovery plan for the service user and also allows for consistent monitoring and reviewing.

SECTION THREE: THE STRUCTURE OF THE POPAO

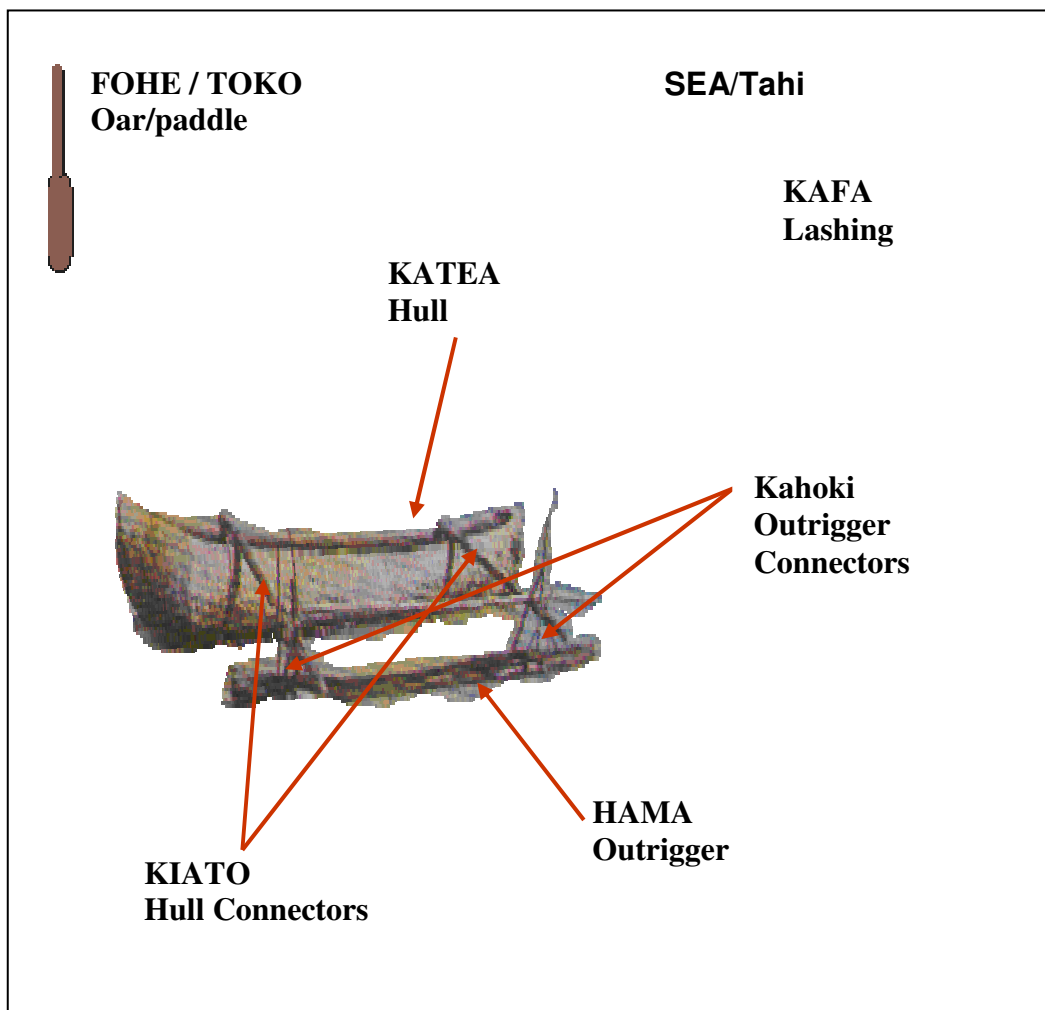
THE POPAO MODEL

The Popao or Outrigger Canoe is called by various names throughout the Pacific:

- Tonga - Popao
- Samoa - Va'a alo
- Tuvalu/Tokelau - Paopao
- Tahiti - Va'a
- Hawaii - Va'a Kaukahi
- Maori/Cook Islands - Waka Ama/Waka Noa

Although the name for the canoe differs throughout the Pacific, they all have a similar basic structure as illustrated in Figure 1.

Figure 1: The Popao



REPRESENTATIONS:

Katea (hull):

This is the main body of the Popao where people can sit and where equipment and sustenance for the trip are kept. It is important that the right type of wood is used to make the hull, as it needs to be light but strong. This component represents the Cultural aspects.

Hama (outrigger):

Although this structure appears relatively small in comparison to the hull, it functions to balance the whole structure. This component represents the Clinical aspects.

Kahoki (connectors):

These are important in linking the outrigger to the hull. There is an 'ideal' distance between the hull and the outrigger that need to be maintained so as to gain maximum effectiveness when the canoe travels through the water. The connectors assist in maintaining this ideal distance, and these connectors need to be strong. This component represents all Service Providers that attempt to bring the Cultural and Clinical aspects into a workable partnership. These Service Providers include: Isa Lei, Lotofale, Faleola, Vaka Tautua, District Health Boards, Non-Government Organisations, Public Health Organisations and any other service providers that would seek to include culturally appropriate services within their structures.

The space between the Hull and the Outrigger is known as "the negotiation space" where issues relevant/critical to cultural and clinical components are continually negotiated. Dialogue and discussions are carried out with the knowledge that the "negotiation space" is a safe and culturally appropriate environment to facilitate these activities.

Kafa (Lashings):

The Lashings are made from fibres of coconut husks interwoven into strong robust lashings which are then use to bind all the components of the Popao together. The lashings represent communications. If the lashing (communication) is weak then it will lead to the whole structure being weak. It is imperative that communication between the cultural and clinical components is strong.

Fohe/Toko (Paddle/Oar):

The paddles/oars need to be light but strong and functions to row, direct and determine the speed of the canoe. There is only one place on the canoe that one can steer, and that's at the back of the vessel. This can only be occupied by one person. This component represents the Strength of individuals, whatever makes that individual a strong person. It could be: family/aiga/fanau, community, friends, spiritual aspects, and so forth.

SECTION FOUR: THE JOURNEY OF THE POPAO

REPRESENTATIONS:

The Sea:

It can be changeable and un-predictable. This component represents the sea of Life.

The Consumer:

When consumers board the canoe they bring their paddle/oar, which symbolises their strength. They would occupy the place where they can both row and steer the canoe, and therefore direct the journey. They are in control of their destination.

The professionals:

When professionals come on board, they bring their strength (oars) – which would include; knowledge, skills and experiences, so that they can contribute to the journey. To ensure that professionals contribute to the journey they must participate in outcome plans with the consumers. In the past professionals assume a paternalistic mentality when working with consumers. This created high level of dependencies on the services by consumers, which then makes it very difficult to empower them and be autonomous.

The partnership:

It is important that professionals work in partnership with consumers to formulate goals and focusing on outcomes. When outcomes are established from the onset of the journey, there is an understanding that once these are achieved, professionals can then disembark the canoe with confidence and knowing that consumers have acquired knowledge, skills and information to continue and navigate their own journey through the challenges that the environment poses.

When professionals disembark the canoe, the weight in the popao is lightened and subsequently making for a quicker journey. This means goals can be achieved quicker and decreases the risk of the popao sinking from an overload.

The environment:

The environment consists of the physical nature of a lagoon, which may include potential hazards or obstacles such as:

- Reefs
- Sea weed
- Sand bars
- Fish traps
- Waves
- Wind
- Sun
- Sea current

Popao were purpose-built to handle tough and challenging environments, handling the lagoon as if out in the high seas. However, the principle of engaging in a rehabilitation process by navigating around the lagoon is very much relevant to the Popao Model as illustrated in figures 2.

Figure 2: The Popao Journey in the Lagoon toward the beach (goal).



POPAO JOURNEY IN THE LAGOON SONG AND DANCE.

The Popao group has used cultural songs, singing and dance as a way to learn from this journey in the lagoon and apply it to individual's own journey. We have composed a song particularly for this journey. It tells of what could happen if one is not careful when encountering any of the obstacles within the lagoon. At the same time we added Tongan actions to the songs to perform in a Tongan dance that tells of the journey to wellness in the lagoon.

By using this cultural format, not only are we using the journey of the Popao Model as our journey in life, but also using our culture, singing and dancing which is very therapeutic in our journey towards wellness. Figure 3 and 4 illustrates the Popao song and the Popao performances.

Figure 3. The Popao journey in the lagoon Tongan song.

Popao Journey to Wellness in the Lagoon to the beach (goal)	
(Chorus)HEI E HE (X2)	
'Alomai 'Alomai	c'mon, row, row, row your Popao(canoe)
Ketau tuli ki 'Onevai	hurry this is the time to get to 'Onevai
He kuo Tonga `a e Matangi	the wind is blowing from the south
Kohono Tahi kohono Tahi (x3)	This is the best time to paddle our Popao
HEI E HE (X2)	
1. PUNGA (Rock)	
Ko au `eni kuou movete	
Ko e tukia he pungamaka'	
(Help! My popao have struck the rocks and I am in pieces.)	
(Chorus)	
2. LIMU (Seaweed)	
Ko au `eni kuou fihia	
Limu tu'u `au vete ange au	
(Help! My popao is caught in the seaweeds, Please help me.)	
(Chorus)	
3. PEAU (Waves)	
Koau `eni kuou tekina	
Fasitanunu `a e peau taa'	
(Help! This dangerous wave is taking me away.)	
(Chorus)	

Figure 4. Performance photos.



Anecdotally, for those working with consumers, it is believed that the popao model has been positive and produced profound results for consumers' individual journeys towards strength and recovery.

Results include consumers' re-connection with, celebration of and strengthening of their Tongan identity, an increase in their confidence and a de-stigmatisation of mental illness within their circles (family, church, community).

Consumers identified the importance of using their culture as a terms of reference to frame their journeys, facilitating a renaissance with their journey of self discovery, enabling growth, awakening a sense of belonging, coming out from isolation and the solitudes of their homes and venturing out into the 'open sea', the community and further support.

SECTION FIVE: ARRIVING AT THE BEACH (GOAL).

CALL FOR CELEBRATION

When a person reaches their goal, we call that 'Arriving at the Beach'. Once they arrive at the beach, we celebrate the achievement with family, friends, support workers and the whole community. Again cultural dancing is one of the social connections that we are using to tell the consumer's journey. More so, that our group has adapted a song (figure 5) to describe the arriving at the beach.

Figure 5. Celebrating the Achievement.

FANGA: (beach) call for celebration. We have reached our goal safely

“FAIVA E POPAO – SONG OF WELLNESS”

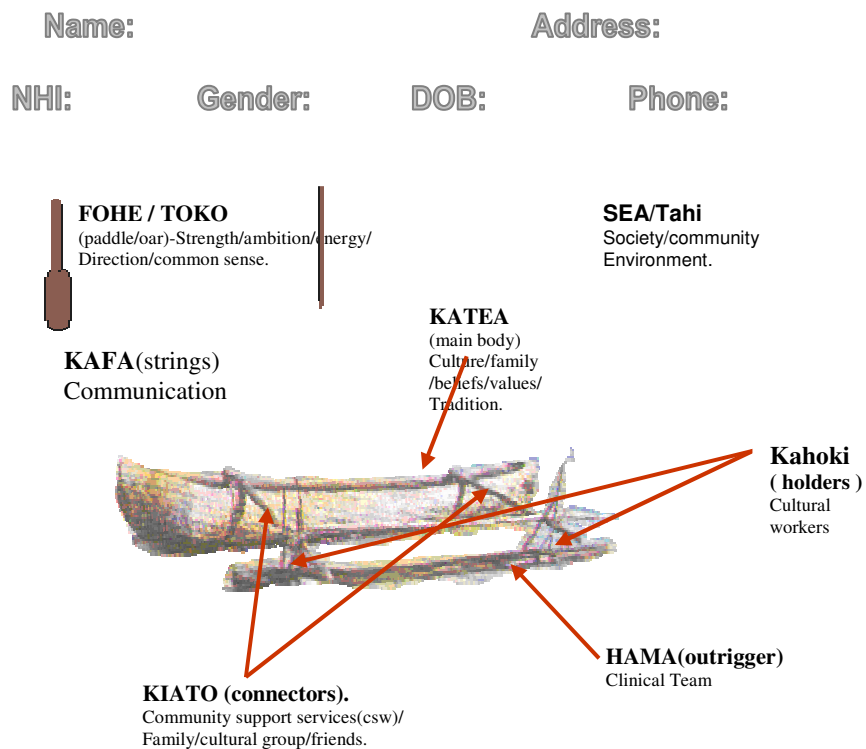
'Alomai 'Alomai Ketau tuli ki 'Onevai He kuo Tonga 'a e Matangi Kohono Tahi kohono Tahi (x3)	c'mon, row, row, row your Popao(canoe) hurry this is the time to get to 'Onevai the wind is blowing from the south this is the best time to paddle our Popao
Talaange ki he Kolokakala Moha fine toli 'i 'Utulifuka Ke tuia hano sisi Funga Niua Pea 'omi ki he matangi Tonga Na'a ma teunga ki Nuku'alofa 'Oka osooso e taulanga	Tell the Kolokakala people(garden city) the lady who picks fragrant flowers at 'Utulifuka make well known garland sisi funga niua and send it through the southern wind for us to wear to Nuku'alofa (capital) especially when the harbour is busy.
Fangatapu mo e Makamaile Kuou fanongo ki he vake' Ko e hiku le'o 'o e laione Kene tataki he Hala Salote He Hala Puopoa hala'o vave Veiongo ko ho Polata'ane Tukunga 'o 'eku talave	Fangatapu(Palace beach front) I hear noises A roaring lion from afar control Salote road, Puopua and Vave roads. Veiongo your metropolitan that where the talk is all about
'E Lupepau'u teu hivehiva He kuo'ke tauetele kia kita Ka ke fua keta 'eva fiefia Ki mui fonua ki he 'Otusia 'Ulukaulupe koe mo'onia He ko e fungani ia 'e vikia Kei tu'u ko e Fetu'ungingila Taha kae afe 'i Polinisia(x2)	Lupepau'u(princess) I will keep singing 'cause you tempt me to I will carry you, we'll go for a walk To 'Otusia the old battle ground 'Ulukaulupe a hero sing his praises still a shining star Unique in Polynesia

POPAO MODEL

POPAO RECOVERY PLAN

2008 Isa Lei – Pacific Mental Health Service adopted the Popao Recovery Model as its service recovery plan and made it available for other services to use. Illustrated in figure 6 is the complete Popao Recovery Plan template.

Figure 6. Popao Recovery Plan.



KATEA

Main body of canoe

- Cultural context that the consumer lives within

Culture <i>'ulunganga fakafonua</i>	
Family structures *names and contacts <i>Famili</i>	
Beliefs <i>Tefito'itui</i>	
Values <i>Ngaahi mahu'inga</i>	
Traditions <i>Talatuku fakaholo</i>	

HAMA

Outrigger

- Health

- names and contacts of the mental health clinical team, clinicians and other health professionals

Mental health - * contact details <i>Timi kilinikolo</i>	
Physical Health - *contact details <i>mo'ui lelei fakasino. *Toketa *Suka *mo ha toe tafa'aki pe 'a e sino.</i>	
Traditional healers <i>Tokotaha faito'o FakaTonga</i>	

FOHE/TOKO**Paddle/ oar/ pole**

Knowledge/insights/common sense/motivators:

Knowledge <i>'ilo/ poto</i>	
Insights <i>Mahino'i</i>	
Common Sense <i>'atamai lelei</i>	
Motivators <i>Ngaahi Faka'amu</i>	
Experience <i>Taukei</i>	

KIATO**Connectors between outrigger and main body of canoe**

- Other services/outside supports

Allied Support Services (eg. Csw) <i>Timi Tokoni – komiuniti</i>	
Community groups <i>Ngaahi Kulupu komiuniti</i>	
Family group <i>famili</i>	

KAHOKI**Connector levellers**

– Cultural assessors/ advisors

Cultural Advisors <i>Kaungaue 'Ulungaanga Fakafonua</i>	
---	--

KAFA**Rope/ ties**

- communication between all

Communication. How team communications with each other and with the consumer <i>Fetu'utaki</i>	
Understanding. Insight into mental health. <i>Femahino'aki</i>	
Relationship <i>Va</i>	
Connection Rapport between consumer and team <i>Fe'ilongaki</i>	
Friendship <i>Maheni</i>	
Trust <i>Falala</i>	

LANGIMALIE

Wellness Snapshot

The consumer describes how they would be if they were to be likened to the following metaphors, (usually good versus bad.)

Wellness:

'AHO (day) / LA'A (sun) / 'UHA (rain) / HAVILI (wind) / 'Ao'aofia (cloudy)

Good day / fineday <i>langilelei</i> <i>Taitonga</i>	
Windy <i>Havili</i>	
Calm <i>Nonga</i>	
Warm <i>Mafana</i>	
Rainy <i>'Uha</i>	
Cloudy/ dull <i>'Ao'aofia</i>	

Unwellness:

PO'ULI (night) / **MAHINA** (moon) / **FETU'U** (stars) / **'UHA** (rain) / **HAVILI** (wind) /

AO' AOFIA(cloudy)

Dark <i>Fakapo'uli</i>	
scary <i>Fakailifia</i>	
Lonely <i>Ta'elata</i>	
Dangerous <i>Fakatu'utamaki</i>	
Unsure <i>Ta'epau</i>	
Hopeless <i>Taumu'avalea</i>	
Lost <i>Hee</i>	
Drown <i>Ngoto</i>	
Signs of night <i>Faka'ilonga po'uli</i>	
Hope <i>'amanaki lelei</i>	
Light <i>Maama</i>	
Leading <i>Tataki</i>	
Windy <i>Havili</i>	
Calm <i>Nonga</i>	
Warm <i>Mafana</i>	
Rainy <i>'Uha</i>	
Cloudy/ dull <i>'Ao'aofia</i>	

TUKIA'ANGA

(Triggers/ Early warning signs)

Those events/ situations which may prevent consumers from staying well.

PEAU (waves)

Waves are of various sizes and strengths and can arrive without warning.

These are sudden, unexpected events or situations

Restless <i>Hoha'a</i>	
surf <i>Akefua</i>	
Waves Breaking <i>fisihina</i>	
Rough <i>Kovikovi</i>	
Dangerous <i>Fakatu'u tamaki</i>	

PUNGA (coral)

Coral is rigid and always present. These are predictable events and situations.

Rocks <i>Makatu'u</i>	
Sand dune <i>Punga 'one'one</i>	
Damaging <i>Fakatupu maumau</i>	

LIMU (seaweed)

Seaweed slows down progress. These will slow down any progress to wellness e.g. Lack of Motivation and confidence

Group Together <i>fakapotanga</i>	
Entangle <i>Fihia</i>	
Frightening <i>Fakailifia</i>	
Scattered <i>Felekeu</i>	

PA (fish trap fence)

Fish trap fences will stop the popao. An action is required to begin to progress again.

Trap <i>Fihia</i>	
Fenced <i>āa'i</i>	

FAKA'UTO'UTA

Plan to prevent or remedy obstacles to progress to wellness

Obstacle/ Trigger	Action when encountered	By whom/ when

FANGA**Beach****Goals - Taumu'a /Hanganaki kiai e folau:**

Health <i>Mo'ui lelei</i>	
Activities – job, social, education, etc <i>Ngaahi me'a ke fai</i>	
Relationships – family, friends <i>Va</i> <i>-Famili</i> <i>Kaungame'a</i>	
Living circumstances <i>Tukunga e nofo</i>	
Legal issues <i>fakalao</i>	
Finances <i>Fakapa'anga</i>	

HALANGAVAKA**Safe Pathway****Goal Plan**

Date	Goals	Action	By whom	By when
(Review / Done)				
Date	Goals	Action	By whom	By when
(Review / Done)				
Date	Goals	Action	By whom	By when
(Review / Done)				
Date	Goals	Action	By whom	By when
(Review / Done)				

I have developed this document with the help and support of:

Consumer Signature:

Date:

Co-ordinator signature:

Date:

STATEMENTS FROM THE POPAO GROUP.

The following statements were recorded in a popao group session serving to reinforce the usefulness and effectiveness of this model for consumers, their families and professionals.

The Consumers

“The model has a holistic view with regards to spirituality, culture, counselling and taking medication. It slowly integrates the family into the process. The supernatural stuff is also taken into account in this model. The popao model educates our families and is Pacific focused. It is reassuring for me as a Pacific woman and the professional support around me are familiar ‘brown faces’. New Zealand born and traditional Tongan views link well in this model.”

As highlighted in the above views, the popao model is most relevant to Pacific as it adopts a holistic approach encompassing Pacific values, particularly with the inclusion of a spiritual component and is also inclusive of family. It is also reflective of the Tongan population in New Zealand catering to both the traditional and New Zealand born views.

The Families

“Families are taught to recognise symptoms and warning signs so we can better support our family members who have a mental illness. I’m aware of my husband’s illness and there is no more denial within our family now that we know what he is going through.”

Pertinent to working with Pacific communities is the importance of family involvement as is expressed in these excerpts. The popao model allows family inclusion in the process and is about educating families to help support their family member in his/her journey to recovery.

The Professionals

“From a clinical viewpoint historically we work with clients to formulate plans and sometimes consumers don’t feel like they’re a part of it. The clinical side takes over. With the popao model it is driven by the consumer, they are engaged, they have a

feeling of control and this demonstrates true partnership. The model gives one hope and a destination whether it be employment or finding a companion and so forth.

Group sessions are filled with fun, food and laughs, and all clients look forward to coming. We encourage them to believe in themselves, to believe in their journeys and that their illness should not be an excuse to hide their potential. It moves away from the traditional medical model – its Pacific focused.”

Again, as demonstrated in these statements the popao model is appropriate for Pacific. It is consumer driven and enables consumers a sense of ownership in and amongst other Pacific processes which are equally important such as fun, food and laughter.

SECTION SIX: WELCOME HOME ('API).

"MA'U KAVA MODEL"



Background:

Kava plant

The kava plant is well known in the Pacific for its social and ceremonial use as a drink. Many Pacific nations have a tale or story about the origin of the kava plant.

The legend of the kava plant in Tonga

One story is of an unexpected visit by the King to an isolated Island in Tonga, where he rested on the beach. The only couple who lived on the island had nothing to prepare for the King. The only food plant on the Island, was at the beach where the King was resting. The couple sacrificed their only daughter and cooked her in an umu (earth oven) to show utmost respect. When the King found out, he felt so sorry for the couple and he left the island. The umu was never opened instead they kept it as the grave of their daughter. It is said that the kava plant grew from the foot of the grave and the sugar cane from the head. Since then kava has been used as a ceremonial and social drink. Its consumption is a sign of peace, friendship, pardon, reconnection, and union.

Ma'u Kava

The 'Ma'u Kava' is the traditional concept of welcome and relates to the complex rituals of encounter which is an ongoing tradition within the Tongan culture. The 'ouau' or protocol of the 'Ma'u Kava' is based on the concept of 'Tauhi 'Eiki' (responsibility towards those of royal blood) and tapu (sacred relationships). This is how peace, harmony and power are preserved in Tongan society. The kava plant is used in the 'Ma'u Kava' presentation and can be in the form of a green plant, dried plant or pieces of dried kava bundled together.

The ‘Ma’u Kava’ protocol.

Fakatu’uta e Ma’u Kava:

Presentation

One of the visitors will carry the ‘ma’u kava’ into the meeting place and put it in front of their matapule (hereafter referred to as the spokesperson/s). This gesture guarantees protection and acceptance from the home party where everyone is safe to carry on with the formalities. What ever the outcome might be, permission for the visitors is important so they can speak (or reply) to the receiving party. The visiting party’s spokesperson is allowed to talk after permission is granted to the visitors.

Fakatapu

The spokesperson for the visitors will start his speech and will usually follow the required following process:

Acknowledgements

Acknowledgements must include the Creator, the land, ancestors of the home party, the chiefs, spokespersons of the area and the home party in attendance.

Connections

The visiting spokesperson at the same time will try and find a connection with the home party, whether by blood, marriages, common legend or land, these spokespersons must know these connections and what to do. Once the connection is established then they can move on to tell the reason for the visit.

Tala e fononga:

The challenge

The visiting spokesperson will then put forward the reason for the visit with the hope that they will be accepted.

Fakatapu:

The home party spokesperson will then commence his reply and start his speech in a similar format and fashion as follows:

Acknowledgements

He too will acknowledge the Creator, the land, ancestors of the visiting party, their chiefs, spokespersons of the area and the visitors themselves whom they are welcoming.

Connections

The home party spokesperson at the same time will try and find a connection with the visiting party whether by blood, marriages, common legend or land these spokespersons must know these connections and what to do. Once the connection is established then they can move on to accepting the visitors.

Tali e fononga:

Accepting the challenge

The home spokesperson will accept the challenge from the visiting party and grant their wish.

Tauhi e kava

Agreement sealed

The home spokesperson will call one of his people to take the ma'u kava and this usually goes to the chief of the home party.

Fe'iloaki/fakahoko kainga

This is the time for everyone from both parties to introduce each other and make connections. The home party will also make the visiting party feel at home.

Acceptance

It is very important for the visiting party to feel accepted into the fale (house) of the home party.

Establishment and Development

This is the start of a new relationship, a connection has been created.

Tuki e kava pe mavae kava

Planning, implementation, formalisation

If the interaction between the two speakers is warm and connected they will end up having a *faikava* (kava will be mixed and served) to continue the talatalanoa (discussions) if not, they will have a *mavae kava* meaning they will end there and everyone will go home.

GOING HOME

Going home is a reconnecting back into the community. Metaphorically, the popao has travelled in the lagoon and reached the consumer's goal which is the beach, and from the beach back to the village/family/community. In reality, many consumers live in supported accommodation or at home with parents, and we have been supporting them to set goals in life and helping them to strive to attain those goals. Hence, they are well and achieving their goals using the popao model and its journey in the lagoon, the focus then is to go back home to the community and try to live the same life as everyone else in the community.

Using the '*Ma'u Kava Model*' the consumer is returning home to his people in a culturally appropriate manner. The consumer is less anxious about going home and the community are well informed and are prepared to receive him back.

POPAO TONGAN GROUP 2009 PLANNING DAY (4TH FEBRUARY) AND OUTCOME:

Present: Saviana Vaiaku, Tenisia Vaka, Taitoko Tafa, Paea To'oa, Liku Talau, Melesisi 'Aholelei, Daua 'Aholelei, Viliami Tupou, 'Ofa Filisonu'u, Falaviena Manuha'apai, Tupou Tatafu, Sifa Tupou, Manu Fotu, Sione Makaafi, Fale, Haniteli, Manase Lua, Nina Talau, Sione Vaka, Taulanga Kupu.

Agenda:

- Popao journey to the beach and from there to 'API / KOLO (home / village)
- TheMHs Conference 2009 - Perth Australia.
- Recovery Conference May 2009 - Popao group part of the opening ceremony/ making five popao.
- Popao model publishing

Discussions:

1) Popao journey to the beach and to 'API/ KOLO (home / village)

Structure of the Popao → lagoon → Beach (goal) → 'API / KOLO

Continuum

The discussions were very good, positive, and encouraging; here are some of the key points:

- This is like going back home to live life to the fullest with the family, the community, the village.....and whether there is a re-connecting back with them or a continuation of what is already going well.
- The idea of going back to your roots, identifying more as a Tongan.
- The connection between the Popao model and the Fonofale model when we reach the village.
- Group meets one day a month at Isa lei then to work out when and how many a month out at the community (regional).

All agreed with the next phase of the Popao journey - To the Kolo.

2) TheMHs Conference 2009 - Perth Australia.

All agreed for the Popao group should present at the next TheMHs Conference - September 2009, Perth, Australia.

3) Recovery Conference May 2009 - Popao group will be part of the opening ceremony/ involved in making five Popao replica models.

All agreed for the Popao group to participate at the May Recovery Conference - Waipuna lodge.

4) Popao model publishing

The 1st phase of the publication has been completed. Le Va funded Jemaima Tiatia to write up the Popao Model for the Pacific Medical Journal published and released in March 2009. The second phase is for Manu and Toko to prepare the Popao document to be published and downloaded via the Le Va Website.

Nina Talau and Sione Vaka from MIT asked for permission to use the Popao model with their student nurses. Everyone agreed because this is how the model will get widely known, the importance of the model is for people to use in their everyday lives. The group thanked Nina and Sione for acknowledging the Popao Model group.

It is important to form the Popao group out in the community and have it come under one umbrella service, especially for funding purposes. This was discussed further and Vakatautua and ATHWA were the two services suggested for the group to decide on in terms of options to consider.

Outcomes of the Popao Tongan Group planning day.

THE AIM FOR 2009 “ I AM GOING HOME – FOKI KI ‘API ”

Popao journey to the beach and to ‘API / KOLO (home / village)

Structure of the Popao → the lagoon → Beach(goal) → HOME

Continuum 

- Going home to live a full life with family, the community, the village..... whether this is a re-connecting back or a continuation of what is already going well.
- The idea of going back to your roots, identifying more with your family and friends in the community/village.
- The connection between the Popao model and the Fonofale model in the community/village.
- The group will be held twice monthly at Isa Lei for the west and hopefully the same for the other DHB’s regions in their own areas. The reason for is to maintain a connection with their local services and areas.
- The regional group be opened for all DHB groups and held out in the community twice a month; one during the day and the other in the evenings to fit in with those who are working or studying.

Popao Group Regional – Daytime	Popao Group West – Daytime - Isa lei	Popao Group Regional - Evening	Popao Group West – Daytime - Isa lei
1st Wednesday of the month	3rd Wednesday of the month	2rd Friday of the month	4nd Wednesday of the month

POPAO TONGAN GROUP 2008 PROGRAMME:

The 2008 programme illustrates the start of the journey back home. The highlight of the 2008 programme was the opportunity for consumers to meet with their families in preparation for the home coming phase in 2009.



Purpose of Group

The aim of the group is to support clients on the recovery journey. We have developed this group to not just include the Tongan clients of Isa Lei, but to also be part of a network group in the wider Auckland region. (ADHB and CMDHB).

We welcome all within Isa Lei!

Venue: 18 Lincoln Road
Henderson
Wednesday Mornings: [11 am]

Facilitators:

Isa Lei: Mr Taitoko Tafa, Mrs Saviana Vaiaku

Pacificare: Mr Tupou Tatafu , Ms Falaviena Cameron

West Fono: Mr Sifa Tupou

Vakatautua: Mr Manu Fotu

Contact Number: (09)838 2800

Transport: We are working together with Tongan CSW's transporting Consumers to and from the group.

GROUP GUIDELINES

- 1) Group for Popao Tongan Consumer Members Only
- 2) Respect each other
- 3) What's discussed in the group remains in the group
- 4) Let staff know of your whereabouts
- 5) One speaker at a time

- 6) Keep Room tidy
- 7) Keep kitchen tidy

PROGRAMME FOR THE YEAR 2008

February	07	PREPARATION FOR THE “BIG FUNDRAISING”
	08	<i>Fundraising nite - Tongan Style with Kava.</i>
	13	PRACTISING CULTURAL DANCE AND FINALISING THE TRIP ETC
	15	SOCIAL NITE BEFORE GOING TO SYDNEY
	20	POPAO GROUP TRAVEL TO SYDNEY FOR THE CONFERENCE
	26	ARRIVING AUCKLAND FROM SYDNEY
	29	COMBINE MEN’S GROUP - MALE CLIENTS FROM A+ AND CMDHB, NIGHT TIME AT THE COMMUNITY VENUE – START OF 2008
March X	05	Male and Female group – Venue: Isa Lei * handicrafts
X	12	Male and Female group – Venue: Isa Lei * handicrafts
	14	Combine men’s group - community
X	19	Male and Female group – Venue: Isa Lei * handicrafts
	26	Male and Female group – Venue: Isa Lei * handicrafts
	28	Combine men’s group- community
April √	02	Male and Female group – Venue: Isa Lei * warming them up for their stories
√	09	Male and Female group – Venue: Isa Lei * preparation for their writing
	11	Combine men’s group – community
√	14	WORKSHOP – “WRITING YOUR OWN JOURNEY”
√	16	Male and Female group – Venue: Isa Lei * writing their stories cont.
	23	HOLIDAYS

	25	Combine men's group - community
May X	07	Male and Female group – Venue: Isa Lei • prep. For their family discussions
	09	Combine men's group - community
X	12	Workshop: “Popao Journey with Families”
X	14	Male and Female group – Venue: Isa Lei * cont. journey with families
X	21	Male and Female group – Venue: Isa Lei * cont. Journey with families
X	23	Combine men's group - community
X	26	Workshop: “Popao Journey with Families”
X	28	Male and Female group – Venue: Isa Lei * cont. Journey with families
June X	04	Male and Female group – Venue: Isa Lei • cont. Journey with families
	06	Combine men's group - community
Discuss about with FAMILIES.	11	Male and Female group – Venue: Isa Lei • cont. Journey with families
X	16	Workshop: “Popao Journey with Families”
Cont. FAMILIES	18	Male and Female group – Venue: Isa Lei * cont. Journey with families
	20	Combine men's group - community
Cont. FAMILIES	25	Male and Female group – Venue: Isa Lei * cont. Journey with families
July	02	Male and Female group –

Cont. FAMILIES		Venue: Isa Lei * prep. For the Journey with Clinicians
	04	Combine men's group - community
	09	Holidays
	16	
	18	Combine men's group - community
Cont. FAMILIES	23	Male and Female group – Venue: Isa Lei * prep. For the Journey with Clinicians
Cont. FAMILIES	28	Workshop: “Popao Journey with the clinicians”
Cont. FAMILIES	30	Male and Female group – Venue: Isa Lei * follow up - workshops
August	01	Combine men's group - community
Plus Making of the Popao	06	Male and Female group – Venue: Isa Lei * Preparation for the THeMHs Auckland
Plus Making of the Popao	13	Male and Female group – Venue: Isa Lei * Preparation for the THeMHs Auckland
	15	Combine men's group - community
Plus Making of the Popao	20	Male and Female group – Venue: Isa Lei * Preparation for the THeMHs Auckland
Plus Making of the Popao	27	Male and Female group – Venue: Isa Lei * Preparation for the TheMHs Auckland
	29	Combine men's group – community
September	02	TheMHs Conference – Aotea Square
	05	
	10	Male and Female group – Venue: Isa Lei * debrief
	12	Combine men's group - community
	17	Male and Female group – Venue: Isa Lei * healthy eating
	24	Male and Female group – Venue: Isa Lei * healthy eating
	26	Combine men's group - community
October	01	

	08	HOLIDAYS
	10	Combine men's group - community
	15	Male and Female group – Venue: Isa Lei * prep. For the workshop
	22	Male and Female group – Venue: Isa Lei * prep. For the workshop
	24	Combine men's group - community
	27	Workshop: “Popao Journey in the Community”
	29	Male and Female group – Venue: Isa Lei • follow up
November	05	Male and Female group – Venue: Isa Lei * follow up
	07	Combine men's group - community
	12	Male and Female group – Venue: Isa Lei * Tongan Xmas cards
	19	Male and Female group – Venue: Isa Lei * Tongan Xmas cards
	21	Combine men's group - community
	26	Male and Female group – Venue: Isa Lei * Tongan Xmas cards
December	03	Male and Female group – Venue: Isa Lei * Selfcare during holidays
	05	Combine men's group - community
	10	Male and Female group – Venue: Isa Lei * Practice xmas carols
	17	Male and Female group – Venue: Isa Lei * PICNIC
	19	Combine men's group - community
	24	XMAS HOLIDAYS
	31	

*** Programme may change due to unforeseen circumstances.**

“FOFOLA E FALA KAE FAI E TALANGA MODEL”

Background:



The '*Fofola e Fala ka e fai e Talanga Model*' is based on the traditional concept of "*Ngafa*" (duty/responsibility) and "*Va*" (relationship/negotiation space).

Ngafa:

This is the duty that one has been entrusted to do as one's contribution to the wellbeing of the kainga (extended family). This is a person life and purpose to serve the kainga. It is required that they fulfil their duty with passion and are proud of what they are doing for the benefit of the kainga.

Va:

This incorporates mo'ui (life) and fehokotaki (spiritual balance). Respect is the key value for the va concept. It makes a life meaningful and the spirit "alive" within the kainga.

The Model:

Definition:

- *Fofola e Fala* – this is the process of spreading out the fala (mats) on the floor of the fale (house), whether it be for receiving visitors, for eating, sleeping etc. the fala symbolises the common space that is the focus or centre of the kainga.
- *Talanga* – concepts include: the negotiation; story telling; reporting of duties and taking of orders; remembrance of ancestors and the passing on of traditions; promotion of peace and harmony amongst the kainga, and the correcting of mistakes; the sharing of strength and support for each other; and the preservation and enhancement of the individual and the family.

LIVING LIFE IN THE COMMUNITY - “FOFOLA E FALA KAE FAI E TALANGA MODEL”.

Part of our Workplan, for the last two years, was to slowly introduce consumers back into the community. We have been successful in many ways e.g. running men’s groups fortnightly in the community and inviting men from the community to join in the kava party and get to know our consumers. We have also run a series of family meetings with consumers and their families and this programme is known as the *‘Fofola e fala ka e fai e talanga’* (roll out the mat for the family to talk) this was introduced to this year’s theme of ‘Going Home’.

We have supported a few consumers who were willing to try flatting and have successfully placed three in flatting type accommodation with other people in the community. We have discharged some to their family doctors, some have gone back to continue their studies and some are working in ordinary job in the community.

This year, 2009, we began with a planning day and invited Tongan colleagues from services who have shown interest or have supported the Popao Model group in the past. The planning day discussions and outcomes are included in this document to show the importance of the ‘Going Home’ phase.

POPAO TONGAN GROUP 2009 PROGRAMME:

The programme has been designed by the group to suit the theme for this year, 2009, “*Foki ki ‘api – Going Home*” and live life to the fullest by using the ‘*Fofola e Fala kae fai e Talanga Model*’.

APRIL 2009 - Rehearsing of the Tongan item and making five Popao for the Recovery conference.

DATE	PROGRAMME	AIMS	ACTION BY	OUTCOME
WEEK	Community: <ul style="list-style-type: none"> ▪ men making popao ▪ both men and women practise the Tongan dance 	* using traditional dances for therapy works well with the group – reconnection with culture, fitness and enjoyment. *Men making the popao to give them the experience of how to make a Tongan canoe.	All support workers to make sure all consumers are picked up for the group	
WEEK 2	Men’s group with kava	Cultural socialising with other men in the community.	Toko/Tupou/sifa to facilitate	
WEEK 3	@ Isa lei: <ul style="list-style-type: none"> ▪ Practice item ▪ Fill evaluation – Popao wellness scale 	Doing the scale monthly - as assessment of their progress to wellness	Everyone in the group	
WEEK 4	@ Isa Lei			
WEEK 5				

MAY - Inaugural National Pacific Recovery Conference – Auckland.

DATE	PROGRAMME	AIMS	ACTION BY	OUTCOME
WEEK 1	Community: <ul style="list-style-type: none"> ▪ Final preparation for the conference – item and making costumes 	To perform well at the conference as part of the welcoming ceremony, and supporting our group to attend the two days conference	Staff to make sure transport organised and look after them during the conference.	
WEEK 2	Men’s group with kava			
WEEK 3	@ Isa lei: <ul style="list-style-type: none"> ▪ Debrief 	To help them come back to reality.		
WEEK 4	Community: <ul style="list-style-type: none"> ▪ Planning for the trip to the September conference in Perth 	Everyone to participate at planning fundraising for the trip.	Staff to facilitate	
WEEK 5				

JUNE - WHERE I AM LIVING KO HOKU ‘API.

DATE	PROGRAMME	AIMS	ACTION BY	OUTCOME
WEEK 1	Meeting to discuss the programme	Warm them up for the rest of the year programme		
WEEK 2	Men’s group with kava			
WEEK 3	My Place <ul style="list-style-type: none"> • Looking after • Paying rent/board • Safety • Manageable 	* To be able to call the place their own – whether in a flat or at home with family. * To be able to manage the place well		
WEEK 4	Budgetting <ul style="list-style-type: none"> • To help some sort out their benefits • Prioritise what they need and spending 	* To be responsible for their money and spending		
WEEK 5				

JULY - WHAT DO I DO IN THE COMMUNITY/VILLAGE

KO E 'EKU ME'A 'E FAI 'I HE KOLO.

DATE	PROGRAMME	AIMS	ACTION BY	OUTCOME
WEEK 1	Self development: <ul style="list-style-type: none"> • Work • study 	* to be able to do something for their self development * to gain confidence and to be responsible for their own life.		
WEEK 2	Men's group with kava			
WEEK 3	Family connection/reconnection: <ul style="list-style-type: none"> • connecting to family and relatives • what you have to do to keep the relationship going • maintaining 	to be able to re-experience that family warmth and what it does to their personal growth.		
WEEK 4	Community: <ul style="list-style-type: none"> • my contribution • my expectation • community expectation 	To have some sense of belonging to the community and an awareness that I have a responsibility to the community		
WEEK 5				

AUGUST - MY CULTURAL IDENTITY – GOOD FOR MY RECOVERY.

DATE	PROGRAMME	AIMS	ACTION BY	OUTCOME
WEEK 1	Tongan culture, customs, traditions: <ul style="list-style-type: none"> • Values • Beliefs 	To re affirm their confidence in their culture and identify that plays a big part in their journey to wellness	Group decision whether to get an outsider to do this.	
WEEK 2	Men’s group with kava			
WEEK 3	Tongan culture, customs, traditions: <ul style="list-style-type: none"> • Tongan dances as good therapy 	To help them to see that this one cultural therapy that they have been doing for years and with good outcome.	Staff to develop this presentation and deliver to them	
WEEK 4	Tongan culture, customs, traditions: <ul style="list-style-type: none"> • Organised a cultural day 	To celebrate with the community their lives and their culture	Group to organised	
WEEK 5				

SEPTEMBER - SHARING MY JOURNEY IN LIFE.

DATE	PROGRAMME	AIMS	ACTION BY	OUTCOME
WEEK 1	Conference: <ul style="list-style-type: none"> • Educational • Ambassadors • 	*Opportunity to learn from others. *Building their self confidence *Able to be with and in front of international audiences. * To tell the world of there recovery and how they have used these cultural tools.	All those attending the conference	
WEEK 2	Men's group with kava			
WEEK 3	Debriefing @ Isa Lei <ul style="list-style-type: none"> • Group debrief • Report from the conference 	Learning how to debrief and return to normal after attending an international gathering. To know how to present a report from attending a conference		
WEEK 4	Men's group with kava			
WEEK 5				

OCTOBER - CELEBRATING LIFE WITH THE COMMUNITY.

DATE	PROGRAMME	AIMS	ACTION BY	OUTCOME
WEEK 1	Planning for the social: <ul style="list-style-type: none"> • Organising the social • Allotment of tasks 	Getting them involve in the whole process of the social planning will give them confidence in living their life in the community.		
WEEK 2	Men's group with kava			
WEEK 3	Planning for the social: <ul style="list-style-type: none"> • Organising the social • Allotment of tasks 	* Getting them involved in the whole process of the social planning will give them confidence to live in the community.		
WEEK 4	Social gathering: <ul style="list-style-type: none"> • Social night with the community • Celebrating my life with my people 	To strengthen their Va and connection with the community.		
WEEK 5				

NOVEMBER – EVALUATION OF 2009

DATE	PROGRAMME	AIMS	ACTION BY	OUTCOME
WEEK 1	Data collating: <ul style="list-style-type: none"> ▪ Collating of data from the last few years and creating an outcome report. 	* Getting them involved in collating their own data for the last year is another step ahead for them.		
WEEK 2	Data collating: <ul style="list-style-type: none"> ▪ Collating of data from the last few years and creating an outcome report. 	Getting them involved in collating their own data for the last year is another step ahead for them.		
WEEK 3	Men’s group with kava			
WEEK 4	Data collating: <ul style="list-style-type: none"> ▪ Collating of data from the last few years and creating an outcome report. 	Getting them involved in collating their own data for the last year is another step ahead for them.		
WEEK 5				

DECEMBER - COMMUNITY AND SERVICES PRESENTATION AND XMAS

DATE	PROGRAMME	AIMS	ACTION BY	OUTCOME
WEEK 1	Public presenting of findings / outcomes: <ul style="list-style-type: none"> • Group to present the finding to public 	<ul style="list-style-type: none"> • Acknowledges their journey to wellness. 		
WEEK 2	Men's group with kava			
WEEK 3	Xmas get together: <ul style="list-style-type: none"> • Send them away for xmas 	<ul style="list-style-type: none"> • Opportunity for the group to thank each other for another successful year. 		
WEEK 4	MERRY XMAS AND A HAPPY NEW YEAR - SEE YOU FEBRUARY 2010....'ALU AA.			
WEEK 5				

POPAO 2009 CULTURAL SONG AND DANCE:

The second phase of the Popao Model is the returning home to the family and the community. We are taking our people back to the community using the Tongan process of returning home using the '*Ma'u Kava Model*' to introduce them back and the '*Fofola e Fala kae fai e Talanga Model*' to settle them in the community.

We are presenting this phase at the THeMHs Conference this year, 2009, in Perth Australia. What we are using is a combination of the two oldest traditional folksong and dance. These are the *Me'etupaki* - performed by men only and the '*Otuhaka* - performed by women only. We have lost the original meaning of the words for both folksongs however, we are fortunate to at least hold on to the tunes and the actions.

What we know is that both songs tell the story of ordinary Tongan people performing daily chores; men working the plantations during the day. Meanwhile, the women sing along whilst working together as a group either making tapa cloth, cooking or weaving or simply sitting around looking after the children and catching up with the local gossip. When evening comes around the whole village will come together in the meeting house and socialise around the kava bowl.

Men will have finished their task at the plantation and hurrying back to get ready for the evening, while the women will start to prepare the kava and ready themselves for the evening gathering.

KO LULU !!

KO LULU E, KO LULU E
KO LULU E SUA MAI MATE
FAKAPO SUA MAI SUA MAI (X2)
(TU'IUHU)

TUKAHOKI; 'O LATU !!

'O LATU LATU E PE'I TONGA MU'A
KAE TOKELAU 'IA, 'I 'IA, 'I 'IA(X2)
PALEKI PALAPUI LEVA
KAE LIUA MANU 'O LEVA
KAE TA KO IA 'ENE NGA'UTA
'IA 'I 'IA 'I 'IA(X2) (TU'IUHU)

TUKAHOKI: 'O TAPUTEA !

'O TAPUTEA TAPUTEA MAI
'E UIA MALA MA'ILETAI (x2)
'O SULU'IA LAU PENA TUIA
'E UIA MALA MA'ILEUIA (X2)
'O TAPUTEA TAPUTEA MAI
'E UIA MALA MA'ILETAI (x2) (TU'IUHU)

KO LULU !!

KO LULU E, KO LULU E
KO LULU E SUA MAI MATE

FAKAPO SUAMAI SUAMAI(TU'IUHU)

**ME'A MAI SI'I HAUATEA
KAMAU PALUA HOTAU KAVA**

'O NIU LEA VAE

**TAUFA SULU 'IA 'ILE ALOFA
OI SOI LENA SOI LENA MALA
TU'ITONGA TOKI SALA TAU MANU
A E**

ULO ULO OMAI TUSAVA

**LAVA LAVA TU SAVA LAUE
'ANAHULI 'A PALEI TIMALA
TUSALA LAVA LAVA TU
SAVA LAU E**

MANUOLE SIU E NU E

TOLOTOLO HE MANU FELAVE

SECTION SEVEN: POPAO HISTORY, POPAO GROUP AND LIFE STORIES OF MEMBERS WITH EXPERIENCE OF MENTAL ILLNESS.

POPAO HISTORY:

The popao model uses the popao structure, utility and how it is being used by our people on the sea for transport from one end of the lagoon to the other, and for fishing mainly for families' daily diet. It can only be used within the lagoon. The Popao is very much a part of the family.

Tongan people knew the best types of trees (that is light and mature enough) for the Popao. Building a Popao is a family affair where usually a father, with the help of his children, builds a safe and fine Popao. A lot of time is spent in shaping, carving and hollowing out the different components of the Popao before the final putting together of all its parts, to make a seaworthy, reliable and safe Popao.

It is the different components of the Popao that is of great significant to our working model. The different parts are tied together to form one strong body. Each part has a function and contributes to the well balanced and efficient use of the Popao at sea.

POPAO MODEL BRIEF HISTORY:

In 2005 a conference was organised by the Aotearoa Tongan Health Workers Association (ATHWA) and held in Tonga. Presentations of the different kinds of work the ATHWA members do were presented. The Popao (canoe) model came about as a result of members trying to find a Tongan model that best describes the work that they do for our Pacific people in the area of mental health and Addictions.

Popao is the Tongan name for the outrigger canoe. The Popao structure was thought of as best explaining the nature of the work we do, and the Popao journey in the lagoon suits the journey of our Pacific consumers to wellness.

What we do:

We started to use the Popao Model with our Tongan consumers as a pilot group, using the popao structure as a metaphoric framework to help them identify all the supports that are part of their journey in life. At the same time we put them into groups to give them all the supports they will need on the journey.

At the end of 2005, we also started a men's group where we use the Tongan cultural style of socialising i.e. gathering around a bowl of kava. This is where current and important issues are discussed and cultural knowledge is passed on from the elders to the younger members of the community.

By 2006 we invited Tongan mental health workers from the other two district health board regions of Auckland to bring their Tongan male consumers to join the kava group, and this kava support group has continued ever since. At the same time we started the men and women's group for Tongans in West Auckland, and this takes place during the day, once a week. To date, this group is still running well. For both groups,, the popao structure and its journey in the lagoon has become the key recovery framework.

They are familiar with the structure of the popao and by comparing it with their lives they have become more and more motivated to move forward in life. We continued our work by getting them to use the journey of the popao in the lagoon and compare it to their journey in life. To identify the obstacles the popao will encounter in the lagoon, one will be able to compare obstacles that they encounter in life.

Popao Recovery Journey - Journey to Wellness:

2006/2007 The Popao Model group had applied the journey of the popao in the lagoon to their own journey in life.

2008 Isa Lei – Pacific Mental Health Service adopted and developed the Popao Recovery Journey. Isa lei is now using the Popao Recovery Plan Template for all consumers.

Popao Model Public Launch:

August 2007 saw the public launch of the Popao Model. The Popao group used Tongan cultural dance to tell the story of the popao and its journey. Since that day the Popao Model is presented via the Tongan cultural dance form.

Popao Cultural and Collaborative Assessment Scale (PCCA)

(Kapasa Folau)

In 2008, a scale was developed to monitor the level of wellness of each individual as they journey on their canoe toward their destination.

Where has the Popao gone so far?

August 2007 - Public launch, West Auckland

September 2007 - Waitemata DHB Management group, Northshore

November 2007 - Like minds like mine conference, Pacificare South Auckland

February 2008 Tongan - community, Auckland

February 2008 - TheMHs Summer forum, Sydney

September 2008 - TheMHs Conference, Auckland

October 2008 - Waitemata DHB and Stakeholders Conference, Northshore

November 2008 - Pasifika Consulting Ltd Opening, West Auckland

November 2008 - 2nd Australasian MH Outcome Conference, Melbourne

May 2009 Inaugural - National Pacific Recovery Conference, Auckland

September 2009 - TheMHs Conference, Perth, Australia.

OUTCOME FOR THE POPAO MEMBERS:

The Popao Model group has kept records of all the monthly evaluation forms required to be collated. The Popao monitoring scale assessment forms are also completed monthly. But above all is our weekly face to face interaction, this is where we witness life changes, personal growth and sometimes our members

“picking up the pieces of their lives” and putting them back together again. Here are some of the outcomes that we have witnessed so far in our members:

- No hospital admission for any of our members
- Respite and time out has decreased
- Good insights into their illness
- Recognising early warning signs
- Discharge back to the Family Doctors
- Less isolation in their own rooms
- Compliance with medication
- Able to set goals and motivated to pursue those goals
- Not afraid of standing in front of people anymore
- Some have moved into their own flats after years in supported accommodation
- Taking responsibility for their own life choices
- Their sense of humour is well developed and here to stay
- Family members are more understanding of mental illness and very supportive

WHERE TO FROM HERE:

- The Popao group via Malologa Trust received funding from Le Va – Pacific workforce development service, to write up and publish the Popao model.
- The development of the Popao Recovery Plan.
- Popao Model and its journey to wellness to be introduced to other ethnic group within Isa Lei and other Pacific Mental Health Services in other regions.
- Planning and implementing the next phase of the Popao Model journey; to venture into the village and become part of the village and

the community, and to venture out to the open sea; sailing on a vaka (boat) and meeting the bigger challenges of the open sea.

- We have been talking about forming a peer support group in the community and for the consumers to run.
- Maintaining the levels of wellness they are enjoying now.

LIFE STORIES OF CONSUMERS:

The Popao group would like to share some of our member's stories of their journeys from illness to wellness.

Popao Tongan group member 1

"In the summer 2004, I remember enjoying smoking marijuana and getting stoned day and night. I didn't know that I had started to act strange and different to everyone else. My partner was the one who told me that I behaving different, at the same time to contact the mental health crisis team. This was the start of my journey to becoming well. Isa Lei – Pacific Mental health Service took over my care in the community. I joined the Popao Tongan group who were part of Isa Lei and they were supported me on my Journey to wellness.

The main barrier on my journey to wellness is my partner. Especially when we argue and she starts calling me names like " you are crazy" or "you mental". These phrases hurt me more than any other things. When I came to my senses and realised that I have a mental illness, I was shocked and confused. I said to myself, "I have this illness now and I will fight it". Suddenly I began to isolate my self from my friends and family; I found it hard to face them. I kept on saying to myself "I am ok, I am still myself and this illness won't take my identity away".

Well, in reality I started to feel that my life is not functioning properly. Sometimes I felt sad and unhappy, and the feeling of being incomplete sits on me all the time.

It was my first time overseas; I caught up with friends and started taking drugs and alcohol. It was a cool thing to do and started to enjoy it, saying to my self "wow this is a cool life". I carried on doing it and never walked away from my friends. I was taking drugs almost everyday and every night. Sometimes I was smoking five times a day and even more at night.

It took me a long time before I realised that it was a good thing to tell everything to my doctor and my nurse. I accepted the medication given by them and took it daily.

The most important thing that I did, and still am doing, is praying everyday. This has given me strength and happiness, and was a good start to my Journey towards Wellness. I placed God in the front on my Popao (canoe) before I started my journey.

I have people who support me on my journey. I know that God is at my side always, then my clinical/cultural team – Isa Lei and my Popao Tongan Group. They are all helping me to be able to find my place in the community again and continue to live a normal life. They are making me feel good about myself as if I don't have a mental problem. I have learned to accept myself and my illness and to keep going. I am aware of my weaknesses and the difficult moments in life but I am able to cope and avoid them from happening again. I have learned also how to go around, avoid, difficult moments when I see them coming. I am familiar with my popao and I can steer it better.

I am a father and a bread earner at home. I count myself lucky that in spite of all that has happened in my life, it hasn't broken up my family. I was able to use all the support to keep me on track and keep my family. I have also have learnt to journey forward and never to look back. I have given up alcohol and drugs and this is one of the best things that I have done for my life. The ability to work on my self in difficult times recognises the signs of unwellness and avoids them during my journey.

Popao Tongan group member 2

"I believe my journey began when I was a young girl moving into my teenage life. I wasn't aware or realised it until I later on when I was in my early twenties. A good friend that I was working with at that time helped me talk through my issues and problems that I was going through. He helped me make sense of questions I had and the ordeals I had to face, and arranged for me to see a counsellor and a psychologist for the first time. This groundbreaking turning point in my life has aided to my healing from depression and anxiety.

One of the barriers that slowed down my journey to wellness was not being aware that I had a mental illness at the time. My parents didn't seek professional help for me and the family. I didn't know what to do with my feelings. Alcohol and drugs are what I turned to in order to escape or numb the pain. I was afraid and was telling lies to the counsellor, I dwelt a lot on negative thoughts, feeling unworthy, putting myself in dangerous situations or harmful ways. I became a workaholic. I seem to have chosen jobs at places that seemed to have manifested how I was feeling or thinking at the time. Like at this work place I was approached by a work mate in the dark.

Life became a sequential pattern – work a lot, drank a lot, using drugs often. On my days off I slept a lot. I was more vulnerable to do things that are not good but thank goodness that nothing major happened. I started hearing voices, became extremely isolated, secluded and internalised everything. Felt like I was watching TV, where my life and was not part of it. I became more and more depressed, anxious, in deep sorrow, crying/tearful, felt unworthy that people didn't want to be around me. When I realised that I was not well mentally, I felt ashamed, crazy, worthless, hopeless, sorrowful/sad. I had died inside. I had feelings of being alone, scared, sensitive, vulnerable, disconnected, depressed, anxious, numb, heavy, lethargic, and dull. Looking back on my life, the factors that caused or contributed to my being unwell were; how we were raised with strict traditional religious Tongan upbringing, which resulted in violence and abuse.

It was my friend who got me help, which was the start of my journey to wellness. The things that supported or helped me through the difficult times; is my internal strength of character, faith and belief in God, self help books, friends that are like family, family (even though they sometimes made life more worse and difficult), family doctors (GPs), having a strong connection with nature like at the beach or just having a good sleep.

My relationship with my family was like hell most of the time. They didn't understand that I was going through depression and anxiety and that triggered a lot arguments, tensions, conflict and unnecessary confrontations. What keep me going on my journey is my spirituality, strength of character, love, friends and family, medication, and the hope for a better future. I believe that my journey is not over yet, its only over when I die, so till then I am doing my best to enjoy and live a good life.

And finally, the aspirations yet to accomplish during my journey are to lose weight, get a job, further study in the mental health field, meet a good man – fall in love – get married and have children.”

Popao Tongan group member 3

“I was about twenty years old when I first experienced mental illness. I think it started when i was stabbed in 1997. A fight with gang members who got back at me for something I did not do and i got hurt on my head. I managed to get away and hid from the gang. This was the time I started to get unwell. In 1999 i was diagnosed with a mental illness, I was referred from the Child/Youth Mental Health Team (EPI Team) in 2001 to Isa Lei and was given a diagnosis as schizophrenia.

Barriers or things that slowed me on my wellness journey were severe paranoid thoughts, scared and frightened of public places, drugs and alcohol, not taking my medication. I guess by doing these things gave me sleepless nights, suicidal thoughts, and the feeling of being very lonely.

Finding out that I have a mental problem affected me a lot, I couldn't do a lot of things that I use to do before and it's hard to deal with this sometimes. I sometimes feel ashamed of myself but with my trust in God and the gift he is giving me – Eternal Life – I have nothing to be ashamed of now.

I realised that there were so many things that contributed to me becoming unwell. I had a lot of stress from home, physical fights, alcohol and drugs. But when i started to take my medication, follow the plan that we made with my treatment team from Isa Lei, my belief in God, Popao Tongan group, and support from my family and friends; I realise that my journey to wellness is starting.

What supported me through difficult times were my friends, family, faith in Christ, mental health services, church, Isa Lei, Popao group, and prayers. I also learned that being together with people, sharing love with loved ones in God's Spirit is the best remedy in moments of mental confusion.

I have been living at home with mum and dad all my life and it can be difficult because you are still treated as a child sometimes. Having a mental illness doesn't help either. Most times were good times I was there supporting mum and dad and doing all the chores at home.

What keeps me going on my journey are my fellow Popao friends, family, Isa lei team, my support worker, my Christian faith, my church group, reading the Bible, positive outlook, my recovery plan and taking my medication.

Do I believe my journey is over? Not at all, my journey to wellness is for life. I am much better now, I still have a recovery plan and I am working on my short and long term goals to maintain my level of wellness which I am enjoying now. I am working on getting a full time job, full driver's licence."

Popao Tongan group member 4

"I was at a point in my life where the hospital became my second home. Being in and out of hospital I was unsure about the future and how to cope with my thoughts, until I was introduced to mental health support services.

At some point with the women's group we had to set goals and with the help of my Occupational Therapist (OT) at the time she helped me with my goals. From the goals I had set I felt I was moving somewhere in my life. When I achieved that goal, I kept setting more goals. Looking back I have achieved most of my goals even though there had been some rough patches, but I've managed to get back into it by taking off from where I started and trying again.

What barriers or things slowed me down on my journey from as long as I remember my thinking and my reaction to things that trigger my illness? I've been so used to dealing with my illness my own way which was OVERDOSING to get rid of it. A bad habit that I developed throughout the years had become a comfort zone for me. I believe it slowed things down because it would take time for me to get out of the negative space that would grow bigger and make me go backwards to past memories that were negative.

How did it affect my life when I knew I was unwell? My life stood still and I found it hard to focus. At the same time I wanted to be in isolation, left alone and no socialising at all. When I become unwell, every little thing became overwhelming and too much to handle. Not knowing how to control my anxiety, I would become very upset. By doing something seemed so hard to do and I become frustrated at the same time it took a lot of energy out of me.

Illness affected the way I think and stopped me from completing the things I enjoyed or wanted to do in life. When I knew that I had a mental illness, I had feelings of hate towards myself and also the feeling of being useless, that I can't even do simple things in life.

What caused or contributed to becoming unwell? I think by keeping a lot of negativity inside and not sharing with anybody. I carried a lot around for a very long time and it had built up until it exploded. Stress is a main contributing factor to my becoming unwell and I would carry it around, even to work. I would work long hours with the hope of forgetting these stresses but it ended up giving me sleepless nights. It also triggered more and more anxiousness and I become unwell again.

When I was setting goals for myself and my state of mind improved that when my journey to wellness really started. When I read books of success in life it has really inspired me and made me feel good. It motivates me to move forward and develop new positive habits for myself. Looking back at my life I was surprise to find that I achieved a lot of my goals that I have set for myself many years back.

I was trying to do things on my own and not asking for help knowingly there are services out there that could help. Sometimes I find that as a Tongan, I have too much pride to ask for help. I find it a lot within my family. Eventually I have to come out of my pride and ask. The counselling that was offered to me from Isa Lei service helped me by using different techniques to cope with my stressful life. Having distractions in life helps with the coping so does having friends in difficult times and support from family have really helped.

What I have learnt from these moments is to be patient knowing that there is always a way out from this dark tunnel. I have built up inner strength every time I have these moments and that's my main support for future moments."

Popao Tongan group member 5

"I had mental illness at the age of sixteen, diagnosed with bipolar disorder, but then re-diagnosed with schizophrenia disorder. What slowed down my journey to wellness was not taking my medication and when my family were not supportive of me.

When I found out that I have a mental illness I felt depressed and not happy at all. I felt that I have changed into a different person, and I didn't like taking medication.

I think I started to hear voices when I was twelve years old. That's when I started at Massey High School. Isa lei – Pacific Mental Health Service came to my help me since. I have learnt to become stronger as a person with the help of all the supporting services.

What keeps me going on my journey to wellness is taking my medication and being part of the Popao Tongan Group every week. I do believe that my journey is not over yet, but I am very positive that it will be in the future."

Popao Tongan group member 6

"I was still at college when I started taking drugs with guys, and they were not good friends at all. I got sick and was very scared of everything. I lost confidence in going to school, and just lost my whole life really. I ended up in a psychiatric hospital.

It was hard for me to get help from my family, to tell them that I was taking drugs and getting sick because no one cared. Getting sick stopped my thinking and my motivation to continue schooling and courses.

Taking medication stops the sickness; I haven't get sick and scared for a long time. By taking medications helped to stay well and keeps away from taking drugs and drinking alcohol. Becoming part of the Popao Tongan group at Isa Lei gave me

confident as a person and more so as a Tongan. I have learned to do my own shopping, had a part time job to get me a stereo, TV and a play station. They kept me going and I am enjoying life and keeping well.

I am flatting now and this is something very new in my life, after being in supported accommodation for many years. I am slowly picking up my Tongan language and the culture. I am happy and hoping to find a good job in the near future."

CONCLUSION

As outlined in this document, the popao model is a useful Tongan based recovery and strength framework. It could be part of any Pacific consumer's recovery plan because it is relevant to their cultural perspectives, needs and therefore useful in measuring their progress.

It is envisaged that in future, the popao model will be implemented in other mental health services throughout the country. It may also be used as the founding model for adaptation for use by other Pacific ethnic groups.

REFERENCES

Mental Health Commission (1998). Blueprint for Mental health Services in New Zealand. How things need to be. Mental Health commission. Wellington.

Rapp. C. & Gosch. R. (2006). The Strength Model. Case Management with people with Psychiatric Disabilities. Second Edition. University of Kansas.

Flinders Human Behaviour & Research Unit (2005). The Flinders Model of chronic condition self management. Information Paper. Flinders Behaviour & Research Unit, Adelaide, Australia [cited 2008]. Available from <http://som.flinders.edu.au/FUSA/CCTU/Home.html>

James, B. (2008). Understanding the conservation expectations of Aucklanders Department of Conservation, 2001 [cited 2008]. Available from <http://www.doc.govt.nz/upload/documents/science-and-technical/sfc172.pdf>.

Popao Tongan Group materials and experiences from the last five years.



"MA'U KAVA MODEL"



"FOFOLA E FALA KA E FAI E TALANGA MODEL"