



Strengthening community-based suicide prevention initiatives for Pacific Islands people in Aotearoa New Zealand

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Abstract

This paper describes 17 community-based suicide prevention initiatives for Pacific Islands people living in Aotearoa New Zealand, and a brief summary of their extensive reach and results. The initiatives underwent a one-off contestable fund administered by Le Va as part of the Waka Hourua: National Māori and Pasifika Suicide Prevention Programme. The purpose of the fund was to support community-based initiatives that would build the capacity and capability of Pasifika families and communities to prevent suicide. Assessment guidelines were developed, and an expert panel was established to evaluate applications, consisting of a cross-section of the

community, government, cultural knowledge holders, and technical expertise.

The 17 initiatives were analysed for common themes and categorised into three approaches that Pacific Islands communities utilised for suicide prevention. The three approaches were (1) increasing awareness of suicide prevention in a culturally appropriate way, particularly for reducing stigma and enhancing help-seeking behaviour; (2) suicide prevention education on how to recognise and respond to warning signs unique to Pacific Islands communities; and (3) skills-based development to strengthen supportive relationships. The diverse approaches, reflecting the interpretations of suicide prevention within a Pacific cultural context, led to novel and creative initiatives not seen before in Aotearoa New Zealand.

Keywords: Suicide, suicide prevention, Pacific, Pacific Islanders, strength-based, Indigenous, community, culture, community-based, mental health.

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within the initiatives. Thank you for your ongoing commitment and ‘Ofa for our Pasifika communities.

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Introduction

E fofo e le alamea le alamea

The solutions for our issues lie within our own communities. [Samoan]

In Aotearoa New Zealand, Pacific peoples experience higher rates of mental illness, substance abuse, and suicide attempts with more severe and complex needs compared to the general population (reference). The World Health Organisation posits that with timely and effective evidence-based interventions, treatment, and support, both suicides and suicide attempts are preventable. As such, interventions at a community level are integral in preventing suicide (World Health Organisation, 2014). However, establishing the effectiveness of suicide prevention initiatives is challenging, and the evidence for effective suicide prevention initiatives for Indigenous and Pacific Islands people continues to be limited (Mann et al., 2005; Tiatia-Seath et al., 2017).

This paper contributes to the body of knowledge that supports community-based interventions aiming to prevent suicide, particularly for Indigenous and ethnic-specific populations. It seeks to present community-based suicide prevention initiatives that are led by and for Pacific Islands communities in Aotearoa New Zealand, highlighting innovative Indigenous approaches.

FLO: Pasifika for Life (FLO) is Aotearoa New Zealand’s first national suicide prevention programme for Pacific Islands people. FLO is designed and delivered by Le Va, a not-for-profit national organisation. Le Va’s work takes a strengths-based and holistic approach to mental health and wellbeing, where positive wellbeing is based on relationships and when the dimensions

of physical, mental, emotional, spiritual, and environmental wellbeing are in harmony (Kingi-Uluave et al., 2016). FLO is part of the Waka Hourua: National Māori and Pasifika Suicide Prevention Programme led by Te Rau Ora, and Le Va. Waka Hourua aims to build capacity and capability of Māori whānau, hapū, iwi, Pasifika families and communities to develop solutions to suicide (Ministry of Health, 2013).

Community engagement is key to the implementation of *FLO*. This programme aims to empower Pacific communities to develop and lead their own solutions to preventing suicide within their own communities, further, from their specific cultural worldviews (Le Va, 2014). One component of *FLO* is funding and supporting 17 grassroots community-based initiatives.

Community-Based Suicide Prevention

Globally, it is widely accepted that cultural, religious, legal, and historical factors have shaped our understanding of suicide. Ethnocultural worldviews can therefore, directly, and indirectly, influence risk and protective factors for suicide (Teevale et al., 2016).

Communities can provide social support such as connectedness. Such benefits can protect people from vulnerability to suicide and enhance resiliency. More specifically, communities can meaningfully engage with local families to reduce stigma around suicide, provide access to the right help, and natural supports following a suicide or suicide attempt (World Health Organisation, 2014).

A review of suicide prevention interventions targeting Indigenous peoples in Australia, the United States, Canada, and Aotearoa New Zealand found that community-based suicide prevention initiatives can be effective. The literature indicates that culturally tailored suicide prevention interventions designed and implemented in collaboration with Indigenous communities were effective in reducing vulnerability to suicide (Dudgeon et al., 2016).

Supporting Pacific Island communities to lead and implement their own solutions to preventing suicide is an empowering medium to ensure culturally relevant interventions that resonate with Pacific Island communities.

Aim

This paper aims to describe an overview of 17 community-based suicide-prevention initiatives for Pacific Islands people living in Aotearoa New Zealand, that were assessed and funded by Le Va between 2014-2017. A second paper focussed on analysing the results and identifying critical success factors for implementing the initiatives is published separately (Faleafa et al., 2021).

The fund was part of the *Waka Hourua: National Suicide Prevention Programme for Māori and Pasifika Communities* on behalf the Ministry of Health, led by Le Va and Te Rau Ora (McClintock et al., 2017). It was established to support community-based suicide intervention initiatives that will build and enhance the capacity of Māori whānau, hapū, iwi, Pasifika families and communities to prevent suicide and respond effectively if and when a suicide occurs.

Method

Le Va established a one-off contestable fund to support community-based suicide prevention initiatives. The initiatives were required to build and enhance the capacity and capability of Pasifika families and communities, to prevent suicide, and respond effectively if suicide occurs. All suicide prevention initiatives were expected to focus on enhancing protective factors and reducing risk factors unique to Pacific Islands communities.

The potential participants were required to be a registered organisation with a demonstrable focus on working within Pacific Island families and communities. Applicants were required to complete an online application and could access support via a freephone number, which was well utilised. Following the two funding rounds over four months, a total of 27 organisations applied for Le Va's Pacific Island suicide prevention community fund.

An assessment panel was established consisting of representatives from Pacific Islands communities, with a cross-section of relevant technical expertise as clinicians, healthcare workers, faith leaders, cultural knowledge holders, researchers, and two government departments. Assessment guidelines were developed, and applications were scored against

this evaluation criteria and subsequently ranked. Panel discussions further contributed to fundable applicant's based on culturally appropriate approaches and other issues, such as geographical need.

During the design and development of these initiatives, it became apparent that many applicants required significant clinical support from Le Va to ensure the safety of both the programme organisers and their targeted audiences. The support provided by Le Va included suicide prevention resources, gatekeeper training and education, as well as supervision and oversight, provided in a culturally appropriate way by Pacific Islands registered clinical psychologists.

Results

A total of 17 initiatives were successful and fully funded. The funding amounts varied contingent on the size and resources required for the suicide prevention initiative. The infographic in Figure 1 displays summarised demographic information of all of the initiatives.

The 17 initiatives reflected Pacific ethnic heterogeneity. Ten initiatives focussed on pan-Pacific populations, while the remaining seven initiatives had ethnic-specific approaches (e.g., delivered in their language), consisting of two Samoan, one Cook Islands, one Niuean and one Tokelauan initiative.

Geographically, nine initiatives were based in the Auckland region (where three-quarters of the Pasifika population reside), two in the Wellington region, one based in the Hawkes Bay, one in Christchurch, and four were national.

It was clear that populations deemed at higher risk of suicide were targeted with tailored initiatives. Seven initiatives targeted Pacific youth, four targeted Pacific men, and two initiatives were explicitly tailored for Pacific Islands *Matua* or *Matai*, meaning elders. The group targeted was reflected in the type of provider delivering the initiative; for instance, two initiatives were provided by rugby league sports clubs, targeting Pacific young men and their families.



Figure 1. Summarised demographic information across all 17 community-based Pasifika suicide prevention initiatives.

Initiative 1: *The Tautai of Digital Winds Performing Arts. Kinetic Wayfinding, South Auckland*

Kinetic Wayfinding designed and delivered a stage performance, *The Tautai of Digital Winds*, focussing on safe messaging for preventing suicide in a culturally appropriate way for Pacific Island young people and their families. Topics explored within the show covered cultural alienation, disconnections, and identity.

Results. The creative arts were utilised as a vehicle to engage with Pacific Island youth and their families effectively. A total of 11 shows were performed to an audience of over 800 people by 42 community members involved in the initiative. Social media engagement reached over 12,000 people, and a new creative wellbeing methodology was developed for future performing arts approaches to Pacific Island suicide prevention.

Initiative 2: *Surviving the Storm Tool. Pasifikology, National*

Pasifikology is a national network group of Pacific Island psychologists. Pasifikology, executive member Dr Evangelene Daniela-Wong, led the development of clinically safe suicide prevention and postvention resource to help people to conceptualise, understand, and respond appropriately to suicide in a culturally appropriate way.

Results. A web-based resource that is clinically safe, culturally robust, links to access support and services, and provides tools to talk about suicide, grief, and postvention.

Initiative 3: *Matua and Youth Programme (PULSE). Pacific Trust Canterbury, Christchurch*

The PULSE initiative is centred around effective community engagement targeting Pacific Island young people and Matua within the Canterbury region and providing suicide prevention information and resources.

Results. Culturally appropriate community *fono* (meetings) were conducted via five ethnic-specific Matua groups, focussed on *talamoa* (talking) about strong cultural connection, suicide prevention education, and the importance of spirituality. A total of 36 Pacific Island young people attended the youth fono representing over five religious groups and seven Pacific Island ethnic groups.

Initiative 4: *Samoan Matua Programme. Vaka Tautua, Auckland, Wellington, Christchurch*

The Samoan Matua Programme focuses on specific suicide prevention approaches adopted by Samoan elders and leaders through the development of community education workshops and video, all in the Samoan language.

Results. Two workshops were delivered in Auckland and Wellington (Porirua) with 80 Samoan Matua in attendance, aided by the development and utilisation of six videos in the Samoan language (LeVaPasifika, 2016a; LeVaPasifika, 2016b)

Initiative 5: *League of Heroes*. South Seas Healthcare, South Auckland

The *League of Legends* initiative focussed on fostering suicide prevention leadership through the Otago Scorpions Rugby League Club by developing culturally appropriate resources and information to enhance help-seeking behaviour, particularly for males.

Results. Ten information workshops were designed and delivered to a total of 2015 participants connected to the sports club. A video was developed with an estimated reach of over 10,000 views (LeVaPasifika, 2016c).

Initiative 6: *Richmond Rovers*. Richmond Rovers Rugby League and Sports Club, Central Auckland

The Richmond Rovers initiative aimed to increase awareness of how to prevent suicide within their specific rugby league community. Tailored suicide prevention information and health promotion workshops targeting players, coaches, families, and neighbouring sports clubs were developed and delivered.

Results. Two workshops structured within the framework of Le Va's *Preventing suicide for Pasifika – Top 5 Tactics* resource was delivered to over 95 club members and their families.

Initiative 7: *Under 18 National Camp*. New Zealand Rugby League, National

The New Zealand Rugby League initiative developed and delivered a suicide prevention education session. The deliveries were specifically tailored to high profile national league representatives, under 18 years, alongside their coaches and trainers. The sessions focused on raising awareness around risk and protective factors to suicide for elite rugby league players.

Results. Three suicide prevention workshops were developed and delivered to over 80 rugby league players between the ages of 15–18 years and 18 coaches, trainers, and managers. A television interview via TVNZ's Breakfast show

increased the initiative reach to an estimated 133,800 viewers.

Initiative 8: *Sau Loto*. Off the Couch Trust, South Auckland

The Sau Loto initiative involved a 12-week wellness programme viewing suicide prevention and mental health from a holistic perspective. The initiative incorporated elements of exercise, life coaching, mentoring, and nurturing family relationships to *at-risk* Pacific people in Auckland. The key areas of focus included personal wellbeing plans, mentoring support, life coaching, education workshops, and group fitness.

Results. A total of 12 participants completed the 12-week programme that increased participant's balanced thinking about wellbeing, family support and participation, and the active use of cultural and community-based strategies.

Initiative 9: *Puna'oa ole Soifua Manuia*. Sinoti Samoa Methodist Mission, National

The Puna'oa ole Soifua Manuia initiative focussed on providing a safe platform for church members to talanoa in the Samoan language about cultural taboos around suicide, as well as provide information and resources for suicide prevention. The hierarchy and structure within the Samoan Methodist church enabled a safe platform for talanoa.

Results. The initiative exceeded its original target of 150 participants due to community demand. A total of 14 workshops (120 minutes each) were delivered to a total of 660 local parishioners and local community members across Aotearoa New Zealand connected to the Samoan Methodist church.

Initiative 10: *Hair 4 Life*. Youth TEAM Trust, Auckland

The Hair 4 Life initiative designed and developed a workshop tailored to the unique needs of hairdressers. The focus was to empower and enable hairdressers and barbers with core suicide prevention information and resources.

Results. Culturally appropriate suicide prevention resources and an information workshop was co-designed with and for hairdressers. Over 50 hair salon owners were

engaged, four workshops were delivered to 85 hairdressers, and the initiative had a print media reach of 154,250.

Initiative 11: *Leo O Tamaiti. Legacy Performing Arts, West Auckland*

The Leo O Tamaiti initiative provided education to Samoan church-based young people through the use of theatre. A workshop was designed based on Le Va's *Preventing suicide for Pasifika – Top 5 tactics* were delivered, providing an avenue for young people to express their perspectives on suicide prevention in a safe and supported way.

Results. A musical theatre performance was co-designed by youth and creative practitioners, and then performed over two nights. The performance reached over 900 audience members and a dedicated Facebook page promoting the event generated over 1,900 interactions.

Initiative 12: *A Suicide Prevention Digital Resource. The Fono, West Auckland*

The Fono co-designed a suicide prevention digital resource with and for West Auckland Pacific Island youth.

Results. Two youth fono were conducted and well attended by Pacific Island young people aged between 12–25 years of mixed gender and ethnicity. Two videos were developed following the fono with a digital reach of over 1300 views (The Fono, 2015).

Initiative 13: *Cook Islands Suicide Prevention Resources. Cook Islands Health Network Association New Zealand, Auckland, Waikato, Hawkes Bay*

The Cook Islands Health Network Association (CIHNA) initiative aimed to build awareness in suicide prevention through the development of an ethnic-specific resource specifically tailored to engage the Cook Islands community.

Results. Two ethnic-specific focus groups were delivered in Tokoroa and Auckland engaging 49 community members, mental health specialists, and a further 11 community members contributing to the discussions via informant interviews.

Over 20 people contributed to the development of three video resources available in both *Te Reo Māori o Te Kuki Airani* (Cook Island Māori language) and English and launched at the Turama 20/20 Cook Island Health Conference 2016 in Auckland.

Initiative 14: *Tokelauan and Niuean Suicide Prevention Resources. Vakaola Porirua, Wellington*

The Vakaola initiative worked toward empowering Tokelauan and Niuean families within the Porirua region to increase their knowledge and understanding of suicide prevention through the development of video resources, and through Tokelauan and Niuean community fono engaging them with safe and culturally appropriate discussions about preventing suicide in their respective communities.

Results. Tokelauan and Niuean resources were developed in Tokelauan and Niuean languages and shared via a digital platform, with an estimated reach of over 5,000 people (CIHNA, 2016a, 2016b, 2016c, 2016d, 2016e, 2016f).

Initiative 15: *Bridge Back Men's Programme. Tuilaepa Youth Mentoring Service, West Auckland*

The Bridge Back Men's Programme focussed on enhancing protective factors and reducing risk factors for suicide specific to Pasifika young men via 12-week skills building, vocational guidance, life coaching, and cultural identity programme.

Results. A youth development approach to suicide prevention with the enrolment and completion by 12 young Pacific Island young men. The increase in leadership and confidence influenced an increase in family support.

Initiative 16: *"Self Esteem for Life Programme". Media Make-up, South Auckland*

The Self-Esteem for Life initiative focussed on enhancing self-esteem for Māori and Pacific Island young women between the ages of 12 – 19 years who identified as at risk of depression and suicide. Through the medium of beauty and artistry, the expressive make-up tutorials and workshops covered holistic wellbeing topics and

focussed on empowering young women to develop self-esteem.

Results. Eight fono were held to co-design workshops, resulting in four Self-Esteem for Life workshops delivered to 19 participants.

Initiative 17: *Spirit of Rangatahi*. Spirit of Rangatahi Charitable Trust, Porirua, Wellington

The Spirit of Rangatahi initiative was aimed at supporting Māori and Pacific young people through a school holiday programme in the Porirua region, increasing local suicide prevention activities across the community.

Results. Unable to determine results due to incomplete reporting.

Analysis

The approaches to suicide prevention that the 17 community-based groups proposed and applied were reviewed and analysed. Overall, the initiatives were categorised into three approaches to community-based suicide prevention:

1. **Increasing awareness** by providing relevant information and promotional messaging in a culturally appropriate way (often in Pacific Island languages), that aims to reduce stigma, improves societal attitudes and beliefs, and enhance help-seeking behaviour around mental illness and suicide.
2. **Suicide prevention education** to inform Pacific Island communities in a safe and culturally appropriate way on how to recognise and respond to warning signs and where to get the right help when they need it.
3. **Skills-based development for holistic wellbeing** to enhance resiliency and strengthen connected and supportive relationships.

The vehicles to reach Pacific Islands targeted populations were highly innovative. The initiatives collectively reached the right people through rugby league clubs, churches, performing arts, hairdressers, social media, and online websites, and already established Pacific community health and social service providers. Essentially the initiatives were largely re-oriented to the places and spaces that Pacific peoples occupy across the community. The combined

reach exceeded expectations, estimated at more than 310,000 people.

Conclusion

The opportunity to support 17 community-based suicide prevention initiatives uniquely tailored to and led by Pacific Islands groups over three years is unprecedented for Pacific Islands people in Aotearoa New Zealand, with a staggering reach of 310,000 people face-to-face and online. These results emphasise Pacific people's desire to find culturally appropriate solutions to preventing suicide.

The successful results from this diverse range of initiatives are reflective of the strong cultural values, close community connections and commitment demonstrated by all those involved in the oversight and execution of these programmes. Their understanding of how to dialogue about suicide in creative ways enabled key messages to be transmitted and sustained within and across their communities. The volunteers, goodwill, passion, and community mobilisation from Pacific communities was crucial to ensuring that initiatives were implemented effectively.

The significant amount of clinical (particularly safe messaging) and administrative resources required from Le Va, the funder, to support the initiatives were initially underestimated by all involved. This was perhaps not unexpected given that this was a first for Pacific Islands people to lead their own community-based initiatives at this national scale. Le Va's approach to walking alongside and empowering Pacific Islands groups to lead their own solutions for suicide within their own communities in a way that resonates for them was well received.

Whilst the assessment criteria included risk mitigation strategies to address the ongoing issue of sustainability, it was clear that more needs to be done to support community-based suicide prevention initiatives in an ongoing and sustainable way for Pacific Islands communities in Aotearoa New Zealand. The underutilised community knowledge and experience need to be recognised. Capturing the challenges, critical success factors, and amount of support required for the provision of safe and effective suicide

prevention initiatives in our Pacific Island communities will help facilitate improved targeted funding and effective policies for the prevention of suicide.

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