Pacific Islander Initiative: Community-Based Program Planning

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Why We are Interested in the Pacific Islander Community

- Growing community in San Mateo County
- Disturbing health indicators
- Youth involvement in risky behaviors
- Academic performance improvement needed
- Workforce development
- Health Equity
Pacific Islander Community in San Mateo County

- Estimated to be over 13,000
- Majority are Tongans
- Concentration in East Palo Alto, San Mateo, and San Bruno
- Many parents born in the Pacific Islands, many children born/raised in the US
- Large extended families
- Major religious affiliations: Catholic, Mormon, Methodist, other Christian
Proportion of Births Receiving Late Or No Prenatal Care by Maternal Race/Ethnicity

5-Year Moving Averages, San Mateo County, 1990-2004

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<tr>
<th>Year</th>
<th>Asian*</th>
<th>Filipina</th>
<th>Pacific Islander</th>
<th>Black</th>
<th>Hispanic</th>
<th>White</th>
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*Non Filipina/Pacific Islander Asians
Late prenatal care defined as first prenatal care visit occurring during the second or third trimester of pregnancy
Source Data: California Department of Health Services, Center for Health Statistics, Birth Records 1990-2004

Healthy People 2010 Target
Reduce to 10% of Live Births
Overweight

Figure 1. Overweight students in San Mateo County, California Physical Fitness Test, 2003-2004 school year

Source: California Center for Public Health Advocacy. Email Communication, October 2005.
Overweight

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Source: California Center for Public Health Advocacy. Email Communication, October 2005.
Physical Fitness

Figure 3. Students Passing all 6 of the Physical Fitness Standards by Race and Grade, San Mateo County 5th, 7th, and 9th graders, 2003-2004 school year

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Race/Ethnicity

- American Indian/Alaskan Native: 22
- Asian: 46
- Pacific Islander: 18
- Filipino: 32
- Hispanic: 22
- Black/African American: 20
- White: 40
- All Students: 32

Proportion (%)

The Big Picture: Youth Asset Survey of Tongan Youth

- 0-10 Assets: 48%
- 11-20 Assets: 32%
- 21-30 Assets: 12%
- 31-40 Assets: 8%
In Comparison (11th graders)...

- 50% of San Mateo County reported having **High Level** of assets
- 45% have **Medium Level** of Assets
- Only 4.2% have **Low Level** of Assets
Average Number Out of 40 Assets

Bar chart showing the average number of assets for each grade from 6 to 12. The grades are labeled on the x-axis, and the average number of assets is labeled on the y-axis. The values for each grade are as follows:

- Grade 6: 20.7
- Grade 7: 20.5
- Grade 8: 20.5
- Grade 9: 20.5
- Grade 10: 20.5
- Grade 11: 20.1
- Grade 12: 20.1

The chart indicates that the average number of assets decreases slightly from Grade 6 to Grade 12.
Focus Group Learnings

• Raising children in the US has led the Tongan family into a culture clash

  “I too notice the difference having grown up in this country where the individual is taught how to survive on an individual basis. We as Tongans survive as a group or family. So, naturally, we are in opposition.”

  “In Tonga, you don’t have a choice. You do as you’re told or you’re on the floor. You do get punished for answering back.”
• Parent definition of “success” for children are different than children’s definition for themselves

Parents: high education, good job, good role models

Youth: graduating high school
Absentee Parenting

• Many parents have to hold two jobs or work in live-in situations that keep them away from their families for extended amounts of time.

“I had two jobs. I usually start my job at 2pm then start my other job at 11pm. I would not come home until 8am. When I leave for work, the children are not back from school. By the time I come back from work, they have left for school already. I never got to see them until Saturday and Sunday. (When asked if this is enough) No. It is not enough… It was reflected in their grades at school which were not good because they miss out on my support.”
Youth Reporting 5 Deficits

- Alone at home ≥2 hours per school day: 47%
- Watches TV/videos ≥3 hours per school day: 39%
- Reports ≥1 incidents, “have you been ever physically harmed by someone in your family or someone living with you?”: 36%
- Reports ≥1 incidents, “how many times in the last 12 months have you been a victim of physical violence where someone caused you physical pain or injury?”: 24%
- Reports attending ≥1 parties in the last year “where other kids your age were drinking.”: 57%
Alcohol

- Used alcohol once or more in the last 30 days: 31%
- Got drunk once or more in the last two weeks: 25%
- Drove after drinking once or more in the last 12 months: 18%
- Rode (once or more in the last 12 months) with a driver who had been drinking: 46%
Other Risk-Taking Behavior

• Shoplifted once or more in the last 12 months: 56%
• Committed vandalism once or more in the last 12 months: 35%
• Got into trouble with police once or more in the last 12 months: 40%
• Skipped school once or more in the last four weeks: 45%
Violence

• Hit someone once or more in the last 12 months: 58%
• Used a weapon to get something from a person: 20%
• Been in a group fight: 42%
• Carried a weapon for protection: 11%
• Threatened physical harm to someone: 29%
Other Risk-Taking Behavior

• Has engaged in bulimic or anorexic behavior: 27% (34% males, 24% females)
• Felt sad or depressed most or all of the time in the last month: 19%
• Attempted suicide once or more times: 19%
What We’ve Done with the Information: Fa’a Pasifika Project

• Supported organization to:
  – Conduct youth council meetings
  – Implement social and educational events
  – Support rugby team
  – Hold a workshop on mental health for young women

• Certain youth assets improved over grant period
What We’ve Done with the Information:
Tongan Tobacco Use Intervention
Project Beginnings

• Taulama for Tongans is a small local non-profit
• History of collaboration with the American Cancer Society on a cancer education project
• Tobacco Prevention Program was looking for new partners working in underserved communities who wanted to build capacity for tobacco education and policy work
Project Goals

• Develop a collaboration between the Health System and Taulama for Tongans
• Develop a survey tool to assess smoking behaviors, attitudes, and beliefs of Tongans
• Conduct appropriate education to reduce tobacco use in the community
• Enact smoke-free policies at Tongan events to institute a non-smoking norm
Survey Design and Implementation

- Partners worked with local evaluator to develop a culturally-appropriate survey focusing on tobacco use
- Translated the survey to be administered in Tongan
- Developed a distribution plan through churches and community events- reached goal of survey completion by approximately 200 Tongan adults
Survey Findings: Tobacco Use

- Over 32% of respondents report they smoke - this compares to a local County smoking rate of only 10.9% and a national rate of about 20%
- 52% of respondents say they live with a smoker
- When asked where family smokes, only 14% say they smoke indoors
Survey Findings: Tobacco Knowledge and Secondhand Smoke

• 86% of respondents report knowing that secondhand smoke is harmful
• Fairly high knowledge that smoking links to cancer (86%), some understanding of risk of other diseases
Survey Findings: Secondhand Smoke Exposure

How much time per day are you around...

...friends who smoke?
- 35% 0 hours
- 15% 1-2 hrs
- 34% 3-4 hrs
- 6% 5 hrs +

...co-workers who smoke?
- 11% 0 hours
- 72% 1-2 hrs
- 16% 3-4 hrs
- 11% 5 hrs +

...family who smoke?
- 11% 0 hours
- 51% 1-2 hrs
- 16% 3-4 hrs
- 11% 5 hrs +
Survey Findings: Smoke-free Events Support

• 62% of people reported they had been bothered by smoking at a Tongan event before
• 73% of respondents would be in support of a smoke-free policy for Tongan National Day and other Tongan events
Survey Findings: Smoker-Specific Questions

- Question about how much smokers pay per week for cigarettes indicates respondents are likely to underestimate costs.
- Only 52% of smokers reflect that other people are affected by their smoking.
- 64% of smokers state that their doctor has advised them to quit in the past.
  - Likely that of the 36% who have not received guidance, many have no regular doctor.
  - Limited access to health care also raises concern about the health impacts of tobacco among Tongans.
- 67% would like to quit smoking.
Survey Limitations

• Design had some glitches- respondents didn’t always know that they were to pick one or the other answer
• Some limits to analysis due to our purposeful or unintentional omission of questions (age/sex)
• Some non-responses on questions make the total n<200
• Concern about Tongan familiarity with surveys and willingness to “go along”
Unpacking Survey Results

• Possibly more smokers than self-report, based on high number of social connections to other smokers
• Smoking indoors is not as much an issue - respect for family is a protective factor
• Lots of secondhand smoke exposure - family, friends, and even co-workers (despite CA smoke-free workplace protections)
Unpacking Survey Results

• Strong support for smoke-free events - opportunity to educate at these events
• Among smokers, limited knowledge of health harms to others due to secondhand smoke exposure
• Smokers seem to be minimizing the financial cost of smoking
• 2/3rds of smokers want to quit!
Educational Material Development

• We aimed to develop a culturally-appealing brochure that included data from our surveys and was tailored to what we have learned about tobacco in the community
  • Highlights the costs of smoking, information about diseases caused by smoking, local data, and how quitting protects one’s family
  • Limited text in the document based on feedback about Tongan information preferences
Tobacco and the Tongan Community

KOE TAPAKA PEA MOE KOMIUNITY TONGA

Ngaahi Mo’oni Fekau’aki moe Tapaka

- Ooku lahi hake 'he faeneke leho'hake 'e 4000
  'oku ma’ua keleke 'a ma’ama ke leho 60 ao
  'oku nau fakatupe nanua.

- Kei naekei 'o ku ma’ua keleke ‘a lehe leho di tapaka ma’ua pa pe, peu maniaki
  fanapua ‘a ka tuho ao di.

Ngaahi mo’e toloa fakatupe 'e he ihe ihe
Tapaka:

- Minokeke
- Minokeke ‘a leho ’o va
- Namuka e maneua
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- Namuka e man...
Smoke-Free Policy Adoption

• Have adopted 5 smoke-free policies at Tongan gatherings to date
  – Announce the event is smoke-free
  – Place signs indicating where folks can smoke
  – Previously distributed surveys, now will distribute educational materials
  – Hope to encourage smokers to call a cessation resource
  – Trying to change the norm in the community so folks know tobacco is harmful to loved ones and thus do not smoke when at a gathering
With Gratitude

- We thank the many people who have contributed so much to this project and continue to support the health of the local Tongan community:
  - Brightstar Ohlson, Gibson and Associates
  - Edith Cabuslay, Jaslin Yu, Kristi Skjerdal and Gabriela Lemus, San Mateo County Health System
  - Susitina Latu, Lisa Tatola-Joachim, and Melieni Talakai, Taulama for Tongans
PACIFIC ISLANDERS AND MENTAL ILLNESS
(Fiji, Samoa, Tonga)

Who are Pacific Islanders?

The “Pacific Islands” is how we are described because of our geographic location, “Islands, geographically located in the Pacific Ocean”.
Main Pacific Islander communities in San Mateo County are Tongans, Samoans, and Fijians.

There are similarities, and yet quite unique in language, culture and tradition.
When you talk about the Pacific Islands, you are talking about different Island Nations, made up of 3 different races: Melanesians, Polynesians, and Micronesians.

Different heads of countries, from kings to presidents, etc., even different forms of government.

Some are independent countries, yet some are under the rule of a foreign power.
PACIFIC ISLAND NATIONS

- Each Island Nation has their own language.
- There is not one language that is used or understood by all Pacific Islanders.
- One of our main Challenges is in grouping the islands as just one group, “Pacific Islanders”.
PEOPLE OF FIJI

- Indigenous people are Fijians who are a mixture of Polynesian and Melanesian.
- Indo-Fijians are laborers brought from India between 1879 and 1916.
- Native Fijians live throughout the country while Indo-Fijians reside primarily near the urban centers and cane-producing areas.
PEOPLE OF FIJI

• Population (2007 est.) 918, 675.
• Languages: English (official), Fijian, Hindustani.
• The indigenous people of Fiji are Melanesians by race.
Mental Health/Illness-Fiji

- Mental Illness is believed to be caused by a family curse. Traditionally “Vaka Draudrau” witchcraft, happens to you or your family when you overstep your boundaries, by not keeping the respect for your chief and members of the clergy. Not observing the taboos during pregnancy and childbirth.

- Stigma against mental illness can prevent one from offering time, support or friendship to someone you know who is experiencing mental illness.

- It is common for Fiji-born people to tell good friends or family if they are sick; but not if a stranger is present.
INDO-FIJIANS

• Indo-Fijians were brought in from India, between 1879 and 1916, to work the sugarcane fields.
• After their five years of work as indentured laborers, they were given the options of whether to return to India or stay on in Fiji. Majority opted to stay.
• Name debate followed, Fiji Indian, Indian Fijian or Indo-Fijian.
Samoa and Mental Illness

- Most of the problems identified in the Samoan population relate to adjustment difficulties.
- Mental Health disorders are often secondary to environment concerns (Markoff & Bond, 1980).
- Mental Health is vaguely defined and even less so acknowledged in the Samoan social framework. (Markoff & Bond, 1980).
Samoa and Mental Illness

- Samoans call behavioral illnesses that are believed to be spiritual in origin, (ma’i aitu).
- They rely on treatment by spiritual priests, or Christian pastors. Last resort they will turn to Western practitioners for help.
AMERICAN SAMOA

- Persons born in American Samoa are American nationals; but not United States citizens.
- Spoken Language – Samoan, English.
- Their immigration status has allowed American Samoans to travel freely between American Samoa and the United States.
Known as the Independent State of Samoa. Samoans are Polynesians by race.
Total land area 1,137 square miles.
Population estimated in 2007 to be 176,615.
Constitutional monarchy under a native chief.
Polynesians, possibly from Tonga, settled in Samoa about 1000 B.C.
WHERE IS TONGA?

[Map showing the location of Tonga and other nearby islands.]

- Asia
- Japan
- Guam
- PNG
- Solomon
- Australia
- Fiji
- Tonga
- Samoa
- Hawaii
- USA
- South America
- Cook Is
- Tahiti
- Easter Is
- New Zealand

= go there

equator
KINGDOM OF TONGA

- Official Name: Kingdom of Tonga.
- Tongans are Polynesian by race.
- Geography: Area 288 square miles.
- Terrain: 171 islands, mainly raised coral but some volcanic, 48 islands are inhabited.
WHERE DID TONGANS ORIGINATE FROM?

• Tongans belong to the Polynesian Race, like the Hawaiians, Samoans, Maoris of New Zealand, Tahitians, and Cook Islanders.

• Their origin has been lost “in the midst of antiquity.” However, there are two popular beliefs:
  – that they originated from South East Asia.
  – that they originated from Peru in South America.
Kingdom of Tonga and Mental Health

• Connectedness between Tongans, their gods, and the spiritual world.
• Christianity replaced their gods and the allegiance that was accorded to the ancient gods was transferred to Christianity.
• Christianity however, did not dispel all beliefs of the ancient religion.
• People still believed in the institution of “mana” (supernatural power), and “tapu” or “tabu” (sacred, forbidden).
Mental Illness Dynamics

- Sickness is considered to be caused by break-down in the social relationships between inferior human beings and superior human beings, or between humans and supernaturals.
- Not feeling well is brought about by not knowing oneself and going beyond one’s capabilities.
- Breaking the “mana” or “tapu” is caused by ignorance which in turn, is caused by not “mohe ofi” (sleeping close). When one does not “mohe ofi” one does not receive the teachings and instructions one should receive from one’s mother or grandmother.
Pacific Islanders and Mental Illness

- Mental Illness is caused by witchcraft.
- Mental Illness is a stigma in society.
- Mental Illness is caused through offending of the dead or places that are taboo.
- Mental Illness is caused by offending, royalty, chiefs, members of the clergy, elders, respected members of the family.
- Mental Illness is caused by not doing what is right and just.
Pacific Islanders and Mental Illness

• Stress is something new to Pacific Islanders. However, the circumstances of life that they have encountered in their new home, has greatly affected their well being.

• Depression is increasing in these communities. Stigma and lack of knowledge are obstacles to the help and resources available to them.

• Stigma is a cultural aspect of our lives that we need to overcome in order to be able to move forward.
Pacific Islanders and Mental Illness

- Political unrest in the homeland, Immigration Issues, Language, Level of education and skills, have all contributed to Stress and Depression.
- Lack of professionals amongst their own people, who would understand and have an insight into the issues that they are confronted with.
- Fear of the illness itself.
Questions?

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Fa’afetai Lava, Vinaka Vaka Levu, Malo ‘Aupito

Thank You!