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Pacific–Indigenous[1] Eldercare in Aotearoa[2] New Zealand: A Culturally Responsive Research Protocol

Siautu Alefaio-Tugia[1] · Tracie Mafile'o[2] · Sione Vaka[3] · Christine Stephens[4] · Fiona Alpass[4] · Kotalo Leau[5] · Petra Satele[5]

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Abstract

Family-based eldercare is a vital contributor to the wellbeing of older people and the economy of Aotearoa New Zealand. Yet, little is known about how cultural shifts have impacted traditional caregiving practices among Pacific peoples, particularly the needs of *aiga* (families) to sustain care for *mātua* (Mātua and Elder are terms used interchangeably in reference to Pacific Mātua (Elders)). This article presents a Pacific–Indigenous research protocol that is intrinsically co-designed and participatory, enabling a deep investigation into family, community, and church perspectives on eldercare. Grounded in the methodologies of *fa'afaletui* (collective wisdom gathering) and *talanoa* (relational dialogue), the protocol provides a culturally grounded lens to: (a) identify eldercare practices that contribute to the health and wellbeing of Pacific *mātua* and their carers; (b) examine the impact of cultural and contextual change on caregiving practices; and (c) detail the socio-cultural and material supports needed to sustain Pacific caregiving. Churches, functioning as cultural villages in the diaspora, serve as key sites for engagement and validation. This protocol affirms Pacific values and relational ethics, offering a transformative framework for co-creating community-led solutions that support ageing in place and inform inclusive eldercare policy and practice. It contributes to the development of culturally responsive strategies that honour Indigenous knowledge systems and strengthen intergenerational wellbeing across Pacific communities.

[1]The term Pacific-Indigenous decolonizes the description Pacific Islanders, which was used during colonial times to describe the diverse cultures indigenous to Oceania. Pacific-Indigenous refers to peoples born in Island homelands or in diasporic communities who descend from Indigenous populations of Pacific nations in Oceania. It should not be misunderstood as a singular culture or ethnic group.

[2]Aotearoa is the Indigenous Māori name for New Zealand and is used interchangeably within this article.

Extended author information available on the last page of the article

Introduction

The proportion of the New Zealand population aged 65 + years is rapidly increasing. In 2022, 1 in every 6 people in Aotearoa New Zealand were in these older age groups. In 2028, 1 in 5 people in the population will be 65 + years. By the 2050s, this group could make up one-quarter of the population (Statistics New Zealand [SNZ], 2022). This increase in the proportion of older people, which is expected to continue into the future, means that increasing numbers of older people will require some form of care as they age. This article focuses on a culturally responsive research protocol developed to shed light on caring for Pacific *mātua* (elders) of this increasing population. As a Pacific-led and *mātua*-informed study, this research protocol affirms the *tuākana–tēina* (older-younger sibling) relationship of Pacific peoples with Māori as the Indigenous peoples of Aotearoa New Zealand, recognising shared ancestral ties as *Tangata o te moana-nui a kiwa* (Peoples of the great Pacific Ocean). While Pacific peoples are genealogically connected to Māori as *tangata o te moana-nui a kiwa*, in Aotearoa they are positioned as *tēina* (younger siblings) in relation to Māori as *Tangata Whenua* (Indigenous Māori peoples of Aotearoa New Zealand). This relational ethic affirms Pacific peoples' responsibility to uphold *Te Tiriti o Waitangi* (The Treaty of Waitangi, foundational to Māori-Crown relations in Aotearoa New Zealand) and support Māori sovereignty through solidarity and cultural respect (Abbott, 2022). In doing so, it upholds the principles of *Te Tiriti o Waitangi* and *Tino rangatiratanga* (Māori concept of self-determination and sovereignty) by advancing Pacific-Indigenous knowledge through culturally grounded, community-led eldercare practices. This approach also acknowledges the historical contribution of the first generation of Pacific migrants who formed the labour backbone of New Zealand's post-war economy and now represent a growing ageing population whose voices are central to Indigenous innovation and wellbeing.

Note. A glossary of Pacific and Indigenous language terms is provided at the end of this manuscript to support clarity and cultural understanding. These terms are central to Pacific-Indigenous methodologies and relational ethics.

Pacific Communities of Aotearoa New Zealand

As a result of the largest wave of Pacific migration along empirical lines in the 1940s, Aotearoa New Zealand has become home for Pacific peoples of *Moana nui-a-kiwa* (Oceania). They are comprised of diverse ethnic groups mainly from the Island nations of Samoa, Cook Islands, Tonga, Niue, Fiji, Tokelau, Tuvalu. The homogeneous term 'Pacific' is often used to describe this group of Island nations across Melanesia, Polynesia, and Micronesia that collectively represent *Tangata o te moana-nui a kiwa* (people of Oceania – the largest ocean in the world). While there isn't a singular 'Pacific community' as such; Pacific peoples organise themselves in different ways and at different times along ethnic, geographic, religious, family, age, gender, and occupational lines, or a combination of these (Anae, 2001; Thomsen et al., 2023). These communities of Pacific peoples exhibit strong cultural values and traditions that prioritize faith, family and community care. Recognizing and honoring the differences of each Pacific nation is vital, especially as language,

culture, status, authority, tradition, obligations, and power structures are different for each. Variations of the term Pacific have proliferated over time, starting with "Pacific Islanders" which is still commonly used in the Global North, and continuing with "Pasefika," "Pasifika," and "Pacific peoples" used mostly in the Global South. The latter terms will be used interchangeably throughout this article. The profile of Pacific families in Aotearoa New Zealand has evolved significantly, as reflected in the 2023 Census. Pacific peoples now comprise 8.9% of the total population, with 442,632 individuals identifying with a Pacific ethnicity - an increase of 16.0% since 2018 (Stats 2023a). This positions Pacific peoples as the fourth largest ethnic group, following NZ-European, Māori, and Asian populations. The median age of Pacific peoples is 24.9 years, which is 13.2 years younger than the national median age of 38.1 years (Stats 2023b). With this youthful demographic and sustained growth, the Pacific population is projected to reach approximately 518,400 by 2028 and 743,400 by 2048 (Stats 2023c). Pacific peoples are the fastest growing and most youthful population group in Aotearoa, with 50.1% under the age of 25 (Stats 2023a). Ethnic breakdowns show that Samoans make up the largest subgroup at 48.1% (213,069), followed by Tongans (22.1%), Cook Islands Māori (21.3%), Niueans (7.9%), and Fijians (5.7%) (Stats 2023a). Pacific families continue to have more children than any other ethnic group in New Zealand and maintain the highest proportion of children under 14 years of age. Although the Pacific population remains youthful, the 65 years and over age group has seen the largest percentage increase, now comprising 5.9% of the Pacific population (Stats 2023a). The majority of Pasefika live in Auckland (also known by its indigenous name, Tamaki Makaurau). It is New Zealand's greatest metropolis and often referred to as the Polynesian capital of the world. Auckland is home to about two thirds of the Pacific population. The remaining population is primarily concentrated in New Zealand's other major cities i.e. Wellington and Christchurch (Alefaio-Tugia, 2021). Pacific peoples view culture and wellbeing as interdependent, therefore, to achieve overall wellbeing, cultural practices and protocols must be continuously nurtured and valued. The main principles, practices, and beliefs that influence how well-being is experienced by Pacific communities include a strong emphasis on cultural identity and the importance of families and communities, the centrality of spirituality and religion in communal and family life, a focus on collective consensus, practices, needs, and outcomes, and clear expectations about respect, reciprocity, and love as well as a sense of responsibility to oneself, others, the environment, and cultural protocols (Thomsen et al., 2023). With almost half of the Pacific population being more than one ethnicity, there is a stark rise in multi-ethnic Pacific youth (Stats NZ, 2023).

Churches as Cultural Villages in the Pacific Diaspora

In the context of Pacific migration to Aotearoa New Zealand, churches have emerged as central community hubs that replicate the village structures of Island nations. These spaces are not only places of worship but also serve as vital cultural sanctuaries where language, traditions, values, and intergenerational relationships are maintained, practiced and preserved. With nearly three-quarters of Pacific peoples in New Zealand identifying as Christian, churches play a pivotal role in sustaining cultural identity

and social cohesion across the diaspora (Ministry for Pacific Peoples, 2021). They function as extensions of the homeland, enabling Pacific communities to recreate familiar social environments in new settings. This replication of village life through church communities reflects the enduring importance of faith, family, and collective belonging in Pacific worldviews. For example, Samoan *Ekalesia* (churches) often mirror the *nu'u* (village) structure, with elders (*toeaina* and *olomatua*) holding leadership roles akin to *matai* (chiefs), and youth participating in *tautua* (service) as a rite of passage. Tongan churches similarly reflect the *kainga* (family) system, where collective responsibility and hierarchical respect are central. Samoan churches host *fono* (community gatherings), language classes, cultural celebrations, and family events that reinforce values of *vā fealoa'i* (relational space), *alofa* (love), and *fa'aaloalo* (respect) (Faaleava & Alefaio, 2021). With nearly three-quarters of Pacific peoples in New Zealand identifying as Christian, churches continue to play a pivotal role in sustaining cultural identity, social cohesion, and wellbeing across generations (Ministry for Pacific Peoples, 2021; Macpherson et al. 2001; Alefaio-Tugia, 2022). In this study, churches are not only viewed as cultural replicas of Pacific Island villages but also as foundational sites for research engagement. Their centrality in Pacific communities makes them vital for conducting *talanoa* and *fa'afaletui* (Pacific-Indigenous methods grounded in relational dialogue and collective wisdom). These church-based settings provide culturally safe environments where intergenerational knowledge is shared, and where elders (*mātua*), youth, and families can participate in co-created processes akin to but different from co-design and participatory research. As such, churches serve as both the context and conduit for the research, enabling authentic, community-led inquiry that aligns with Pacific values.

Due to the majority population of Samoan and Tongan making up Pacific peoples, families were selected from these communities who live across the large urban sprawl of Auckland city and the regional/ rural area of Palmerston North. These places were selected to explore experiences across urban city and regional/ rural areas. Furthermore, as churches are more than religious or faith-based organisations and vital hubs for intergenerational knowledge transfer these were selected as sites for this research to engage with Pacific Mātua (Elders) and their carers. As such, the culturally responsive research protocol brings to the fore engaging communities in their heart of their lived experiences. Pacific carers face numerous challenges that are often distinct from those encountered by other groups. The Pacific community also faces various socio- economic disparities, including lower educational attainment, higher unemployment rates, and increased health issues compared to the general population. Recognizing and addressing these disparities is crucial for ensuring the well-being of Pacific peoples and their ability to provide care for their loved ones.

Importance of Aiga (Family-Based) Carers for Older People

Informal family-based care is an essential part of the health care system and provides many benefits including improved patient outcomes, reduced unnecessary re-hospitalisations and residential care placements, along with considerable savings in health care expenditure (Elliott & Parker, 2012; Miller & Weissert, 2000; Spillman, 2009). In Aotearoa New Zealand, the estimated economic value of informal caregiving to soci-

ety was 10.8 billion dollars or 5% of GDP in 2013 (Grimmond, 2014). As the population ages and life expectancy increases, there is an increasing need for the provision of care. In an effort to minimise the expense associated with residential care, Governments are focused on policies of ageing in place (Means, 2007). With this shift in care burden comes an increase in demand for informal and unpaid family caregiving. Polices in Aotearoa New Zealand to promote ageing in place (or in the right place), have been central to the government's response to population ageing (Dalziel, 2001; Ministry of Health, 2016). With greater numbers of older people with disabilities and/or high dependency remaining in private dwellings, comes an increase in the reliance on family caregivers (Wiles, 2005). Over recent decades, a considerable literature has accumulated to support the burdensome and stressful nature of providing care and its impact on health and wellbeing. For instance, caregivers have been shown to be at risk of increased rates of depression, stress and anxiety compared to non-caregivers (Fortinsky et al. 2007; Ory et al. 2000; Pinquart and Sörensen 2003a, b) and there is evidence for the impact of the level of burden and type of caregiving on reports of life satisfaction and mental health (Alpass et al., 2013; Dahlrup et al., 2015; Fekete et al., 2017; Kruithof et al., 2015). Caregivers have also been shown to have poorer physical health than non-caregivers (Pinquart and Sörensen 2003a, b; Ho et al. 2009; Vitaliano et al. 2003) with higher mortality risk reported for caregivers compared to non-caregivers (Schulz & Beach, 1999). Recent New Zealand research has shown that women and Māori in particular are more likely to be caregivers and that those in poorer mental health are more likely to take up caring (Alpass et al. 2013, 2017a, b; Alpass et al. 2017a, b). Pacific peoples, however, are missing from this evidence base. Pacific people comprise 8.1% of NZ's population (381,642) and are the fourth largest ethnic group in New Zealand (Stats NZ, 2023). In 2011, Wiles et al. (2011) identified the need for policies, practices, and strategies that affected ageing well to be developed in partnership with diverse ethnic groups of older people. There has been very little research since, however, on caregiving for older Pacific people with healthcare needs. In general, the evidence suggests the importance of caregivers' health to the wellbeing of the ageing population and to the economy, and the need to enquire further into the ways New Zealand society can support caregivers. A very important gap in the evidence to date is the lack of any information on the situation for Pacific caregivers of older people. Although the population of Pasifika mātua (elders) is increasing and numbers are likely to grow rapidly in the next few decades (Davey et al., 2004), very little is known about the needs of Pasifika caregivers.

Understanding the Intricacies of Caring for Pacific Mātua (Elders)

In Pacific societies, the older person has an important role within the traditional practice of intergenerational kinship care and multiple systemic living (Vakalahi et al., 2007). New Zealand research shows the value and importance of Pacific *mātua* (Elders) wisdom in families, churches, and communities (Tamasese et al., 2014). Research also highlights that Pacific families are more likely to be living in extended family households consisting of three or more generations (Poland et al., 2007). The most recent data shows that Pacific peoples households were the most likely to be multiple-family households, with 18.2% of Pacific households classified as extended

or multi-family arrangements. This marks an increase from 15.8% in 2018 and reflects the enduring cultural emphasis on intergenerational living and collective care within Pacific communities (Stats NZ, 2024). Mātua are not considered separate to one's family and are the most respected individuals within the *aiga* (family) given their valuable roles as advisors, holders of wisdom and traditional knowledge, healers of social issues, and protectors of family genealogy (Kiata & Kerse, 2004). The traditional belief and practice of respect and care is accorded to mātua in order to receive spiritual rewards and blessings (Apulu, 2010). In Samoan society, *'matua tausi'* refers to the practice of honouring and caring for one's elders (parents/grandparents). Beyond the literal meaning of looking after or caring for elders, *matua tausi* is part of a cultural context in which depth of learning and sharing takes place, and an aspect of cultural phenomena that sits at the core of being Samoan as it is the "*heart and soul of nurturing*" (Efi, 2007). Mātua themselves provide cultural sustenance as described in the words of Tui Atua Tupua Tamasese Efi: "*They give love and stability and provide the basis for consensus in the family context. They bring wisdom and serve as arbitrators in moments of family upheaval…The place of matua tausi in the hearts and souls of Samoans are found in the everyday experiences of ensuring they received the best food the family could offer"* (Efi, 2007). This Samoan cultural concept illustrates the depth of importance of elder care to Pacific families and to the mobilisation of family members to ensure care is achieved. Pacific perspectives on health are holistic and bring together body, mind and soul/spirit contextualised within family, extended family, village/community/church and culture. Being an elder is the most important stage of life, due to having the most responsibility within the collective. Elders also receive the most respect, and at the same time carry the highest-level of responsibilities especially the relational wellbeing of their families and communities, helping to heal rifts that arise (Tamasese et al., 2014). There are different layers to who is considered an elder, with being an elder determined not only by age and leadership, but also as maturity or the ability to judge with wisdom (Tamasese et al., 2014). Samoan elders hold different roles in Samoan society: *Olomatua* (defence post), is a name given to elder women of the *aiga* (family) and *Toeaina* (elder man) is used to refer to men (Tamasese et al., 2014). This group differ to the group who are *Matua Tausi* (elders being cared for by their families) as *Olomatua* and *Toeaina* are still actively involved in the operations of their communities as engaged leaders. Comparatively *Matua Tausi* are in the life stage where they are involved in higher-level decision-making processes, while other family members carry out the instructions they provide. Each group continues to contribute to their families, church and villages by imparting wisdom and navigating younger generations through life, and this does not end with retirement. Throughout the diaspora, as the elders move more into an advisory role of directing their children, the children will resource their elders' contributions for family and community matters (Ledoux-Taua'aletoa, 2013). These contributions of finances and other resources are commitments across the diaspora and within Island nations themselves such as Samoa, Tonga and across the region. They include remittances helping to fund family, church and village commitments where children also financially assist elders in everyday living throughout the diaspora (Fa'aea & Enari, 2021). As such, the intricacies of Pacific *mātua* care reflects core values of spirituality, culture, family, relationships. These values embedded in

Pacific languages shape a unique understanding of health and care models. The Fonofale model (Pulotu-Endemann & Tu'itahi, 2009) provides a clear illustration of the holistic nature of health that Pacific peoples uphold and practice. Whilst there have been developments in models of care for Pacific mental health and health in general (Suaalii-Sauni et al., 2009), research remains sparse regarding community care and wellbeing. There has been some work on family relationships, but this is mainly oriented toward the wellbeing of children and younger people (Poland et al., 2007; Apulu, 2010). One study focuses on the quality of health for Pacific grandparents (Tautolo et al., 2017), however, exploring the impact of caring for mātua on carers and families is a gap in literature that remains. Deepening an understanding of the broader social, cultural and economic determinants of community care and wellbeing for Pacific elders, carers, and their families in New Zealand is the focus of this article's research protocol.

The Impact of Changing Times

Traditionally, Pacific households mobilise around caring for Pacific mātua who hold pride of place as wisdom bearers within Pacific society. With migration to Aotearoa-New Zealand, change inevitably impacts the care Pacific families have traditionally provided, however, very little is known about the extent to which caring for Pacific mātua impacts the health and wellbeing of Pacific carers and families. Traditionally, older Pacific people have lived with their families, providing an interface between the generations. But the changing nature of Pacific families and role expectations are placing some Elders under a good deal of stress (Davey et al., 2004; Tamasese et al., 2014). Pacific families' obligation to care for mātua and develop meaningful relationships stem from beliefs that place great value on the passing of wisdom and blessings (equated to health and wellbeing) on to generations that follow. However, new housing, work and living arrangements have created many difficulties for maintaining these traditional sources of wellbeing. This 'nexus of change' (Alefaio-Tugia, 2015) within new lands describes the point where colliding values effect change at a socio-cultural level for the diaspora of Pacific peoples. For example, the colliding values of Tu ma Aga Fa'aSamoa (ways of knowing, being and doing Samoan) based on communal economy, inter-connectedness and collective responsibility, collide with new-land cultural values based on a cash economy, independence, and individual pursuits (Alefaio-Tugia, 2015). The *nexus of change* that has occurred in New Zealand post-migration creates an opportunity to build a platform of research that can develop understandings of the issues and support needed in order to enhance resilience and wellbeing (Wiles, 2011) of Pacific mātua and families. This is vital given the rapid increases in the elder population. For example, the population of Samoan Elders (65+years) increased from 3.5% (2006) to 4.5% (Statistics NZ, 2013) and numbers are likely to grow rapidly in the next few decades. This has created multiple challenges in maintaining care and wellbeing of Elders and families. Although it has been shown in the US that kin networks positively affect chronic disease-related health behaviors (Levy-Storms & Lubben, 2006), published work largely focuses on descriptions of disparities in Pacific populations compared to others (Sundborn et al., 2007; Chan et al., 2008; Jatrana & Blakely, 2008; Jeffreys et al., 2005). The

proposed research is an essential starting point for uncovering how intergenerational relationships support both older people and whole families in a new and dynamic cultural context. As a holistic approach to understanding the health and wellbeing of Pacific mātua in New Zealand, this research focuses on intergenerational relations, specifically intergenerational kinship care and Pacific-indigenous mātua (elder) care practices.

Developing a Culturally-Responsive Protocol

The use of research methodologies grounded within foreign cultural epistemologies and their application within the Pacific has been problematised by various Pacific researchers who advocate for the recognition and utilisation of Pacific methodologies (Suaalii-Sauni & Fulu-Aiolupotea, 2014; Vaioleti, 2016; Suaalii-Sauni et al., 2009). The qualitative design of this study draws on Pacific methodologies that are comparable to 'participatory action-oriented' research methods but are Pacific-designed utilising Pacific languages, metaphors and frames of reference (ways of knowing, being and doing). The overarching research process of our study employs *fa'afaletui* (Tamasese et al., 2014; Efi, 2007; Alefaio-Tugia, 2022), a Samoan metaphorical concept of searching for wisdom, and utilises *talanoa* (Suaalii-Sauni & Fulu-Aiolupotea, 2014; Vaioleti, 2016; Vaka et al., 2016) to share and gather (cultural-dialogues/ information) with Pacific families, communities and churches. The process of *fa'afaletui* as a meeting of minds/ collectives/ hearts, is a consultative, educational and mentoring experience (Efi, 2007). It captures reflective, reciprocal discussion that is uninhibited in which new information and the inspiration of collective wisdom organically arise. *Talanoa* as a Pacific methodology describes a process of cultural dialogue that differentiates from individual or group interviews as it focuses on relational engagement as opposed to questions. It commits to ensuring the concerns of research participants are captured through a research process of relational engagement, storying conversations and confirmation of stories. Each *talanoa*, because of the different participants, arrives at a different consensus (Vaka et al., 2016). They are recognised as methods of research, processes of engagement, and transformative designs (Alefaio-Tugia, 2015; Vaka et al., 2016). *Fa'afaletui* (a Samoan process of knowledge gathering through collective houses of wisdom) and *Talanoa* (process of relational engagement through dialogue within appropriate cultural protocols) are Pacific-Indigenous concepts that are applied as a culturally-responsive protocol of research. As such, churches are not only cultural institutions but also serve as *methodological anchors* through this culturally-responsive research protocol. As extensions of the village in the diaspora, churches provide culturally safe, familiar, and relationally rich environments where *talanoa* (relational dialogue) and *fa'afaletui* (collective wisdom gathering) can take place authentically. These methods rely on trust, reciprocity, and communal engagement - values that are deeply embedded in the church life of Pacific diaspora. As such, churches function as:

- *Research partners*: Trusted church leaders and elders (Pacific advisory of the study) help identify and invite churches where Pacific *Mātua* and families are situated to participate, ensuring community legitimacy and relational access.

- *Engagement hubs*: Church halls and meeting spaces are used for *fa'afaletui* or *talanoa*, enabling participants to engage in dialogue within a space that reflects their cultural values and social structures.
- *Cultural villages*: The hierarchical and relational dynamics within churches mirror traditional village systems, making them ideal for intergenerational engagement and co-created processes akin to co-design.
- *Knowledge validation spaces*: Through *fa'afaletui or talanoa*, churches host gatherings where findings are discussed, refined, and validated by elders, youth, mothers, fathers, families and community leaders, ensuring cultural integrity and collective ownership of the research outcomes.

Overall, *Fa'afaletui* and *Talanoa* function as methods of research, processes of engagement and transformation that are intuitively recognised by participants. They guide dialogue with multiple interdisciplinary research collaborators, including the Health and Ageing Research Team (HART), New Indigenous Unity of Pacific Humanitarianism (NIUPATCH), Pacific Mātua Advisory, Treasuring Older Adults (TOA) - Pacific elder care NGO (Non-Governmental Organisation), World Health Organisation (WHO) and Morgan State University (Washington); and the research participants (families, community and churches). *Fa'afaletui* and *Talanoa*, as Pacific-Indigenous methodologies, inherently incorporate elements of co-design which embody a participant-centric approach, involving those directly at the heart of the research. Important co-design elements such as: 'develop, decide and change' highlight the process of turning ideas into improvements, choosing what improvements to make and how to make them, and turning improvement ideas into action (Boyd et al., 2012). This type of research process is favoured for its ground-up approach and is well-suited for developing initiatives that are community-designed (The Southern Initiative, 2017). These co-design elements are innately embedded within fa'afaletui and *talanoa*, through the shared collective wisdom gathering based on cultural relationality. *Fa'afaletui* and *talanoa* enable people-centered real-time engagement that leads to collective-design with communal impact. In effect, *fa'afaletui* and *talanoa* are Pacific methods that are intrinsically co-design as they intuitively draw on the collective interactions between participants for culturally-led solutions that have immediate impact.

Our method is a dynamic integrated design captured in Fig. 1.

The collaborative project methodology as our study's research protocol ensures ethical practices, community engagement, and cultural responsiveness at each stage (with informed consent and anonymity of data being paramount). Overall, it showcases a relationally reciprocal process of working with family carers, Mātua, community and Pacific leaders with oversight from the study's own project advisers i.e. Health and Ageing Research Team (HART), Pacific Mātua Advisory group, Pacific community Elder- collectives (TOA-Pacific) and International collaborators. Researchers within the team have extensive experience in the utilisation and development of understanding through these Pacific research methods. The study draws on the strength of its team with their extensive experience in *Talanoa* (Vaka et al., 2016), to lead the development and guidance of Pacific postgraduate students of psychology employed as research assistants in the study. The multidisciplinary team



Fig. 1 Project methodology

includes experienced practitioners of psychology, social work and mental health who are actively involved in Samoan and Tongan church and/or wider community everyday life having been reared within these communities as children of Pacific church and community leaders. This depth of lived experience enables genuine connection to Pacific communities. Moreover, Pacific *mātua* (elder) advisors of the study are themselves Elder Reverend Ministers and Community leaders and pioneers of Pacific community development. Access and direct connections with Pacific communities is therefore strengthened and enhanced. International collaborators are involved through *fa'afaletui* (wisdom searching process) through sharing of collated data, and collective discussion with the research team through all phases (Year/Phases 1–3) of the study's development. Results from *fa'afaletui*-dialectical analysis will be shared with international collaborators and collective talanoa with the research team will be conducted utilising video conferences. International collaborators provide a broader platform for the study to link into and inform international contexts such as WHO and Pacific diaspora in the US.

Year (Phase) 1

Recruitment: Drawing on Pacific collaborators, participants representing Pacific families with caring responsibilities and experience will be invited to participate in the research. Families represent those living in intergenerational, extended family or immediate family households. We expect to recruit 45 families with over 3 members in each family, with a total number of participants in the study expected to be over 140. Families will be recruited from South Auckland where a majority of the Pacific population reside, and Palmerston North (regional city in the North Island). These areas provide representation of both urban and regional Pacific communities. South Auckland families will be recruited through two Samoan church communities whilst Palmerston North families will be drawn from the Tongan church community.

- *Talanoa Procedures*
  Talanoa groups will be convened in Auckland and Palmerston North. Talanoa facilitated inclusivity will ensure participants feel comfortable and able to contribute to the dialogue/discussion in a culturally safe space and manner. Participants are accepted as having diverse views and ways of contributing which means they can talanoa freely. Talanoa discussions can be wide-ranging with no boundaries when talking about a chosen subject. There are no restrictions on contributing from any perspective and participants are free to choose how they wish to talanoa about the subject, for example they can consider the big picture, or focus on a part of the subject, or related histories, legends, functions, utilisations, and applications. A subject can be explored through multiple levels and layers due to the freedom that talanoa provides. Talanoa will be facilitated by Pacific mātua (elder) advisors and Pacific postgraduate researchers alongside Pacific church elders and youth-leaders. Pacific mātua advisors together with Pacific post-graduate students (employed as research officers) provide guidance for church Ministers/leaders and youth-leaders as talanoa co-facilitators, under the overall supervision of research team members. This process will involve informative introductory talanoa where dialogue/discussion is focused on talanoa protocols and the research aims/questions. Pacific mātua will advise on the development of the framework and engage in the recruitment of families for talanoa.
- *Talanoa (data) collection*
  Pacific research officers (postgraduate students) and Youth leaders will provide support and assistance in the collection of talanoa (data). All talanoa will be digitally recorded, transcribed and collated by the study's Pacific research officers (PROs). Preparation of data for analysis will be conducted by the PRO's in collaboration with the wider research team. PRO's will read over talanoa transcripts to ensure they are legible and consult with Youth leaders for clarification. Pacific Elder Mātua advisors will provide support for any language/ translation issues when Pacific languages/terms are used. Talanoa will be conducted by PRO's in collaboration with the team. This intergenerational Pacific research approach ensures that Pacific Elder-voice is a key driver of the research design and implementation. Furthermore, Pacific research capacity is grown and developed by utilising Pacific postgraduate students as research officers who co-facilitate and transcribe (gather data) talanoa group dialogues.

Year (Phase) 2

Process of *fa'afaletui*: Key findings from Year 1 of *talanoa* are discussed through the process of *fa'afaletui* with 'houses of wisdom bearers' i.e. Community leaders, Church Ministers, and Pacific *mātua*. The collective wisdom-searching process involves inter-active *talanoa* focused on the findings. This process of 'collective searching' builds on fa'afaletui-dialectical analysis (Alefaio-Tugia, 2022), by drawing on the wisdom of leaders within the wider community. *Fa'afaletui* (collective-

talanoa) discussions are digitally recorded and summarised by PROs. Summaries of these dialogues are presented for *fa'afaletui*-dialectical analysis together with Pacific mātua elder-advisors and the research team. This focuses dialogue between the problem and the new ideas generated in the study. This process of deepening the cultural-understanding of data gathered was employed in 2016 with an Auckland Samoan church community where the depth of engaged-talanoa resulted in culturally rich informative dialogue (Vaka et al., 2016).

- *Analysis of talanoa (dialogue)*
  fa'afaletui-dialectical analysis of talanoa dialogue is a Pacific-designed utilisation of content and thematic analysis that provides a Pacific-indigenous lens of inquiry. This means Pacific mātua (elder) are engaged within the dialectical exchange when analysing data. Thematic analysis of data is undertaken by the Pacific researchers in collaboration with the research team. The dialogue is analysed and summarised in relation to the research questions: Important practices of care, impacts of cultural and contextual change, and needs of families, carers and elders for support within this context. Summaries of dialogues grouped into research question themes are presented through fa'afaletui by the research team to Pacific Elder- mātua advisors. This enables clarification of themes for further discussion. Outcomes of fa'afaletui can result in altering/changing themes and/or developing whole new cultural understandings and/or concepts.
- *Community Fono Symposia*
  As a result of fa'afaletui, a Community Fono Symposia series will be developed to showcase the key ideas generated and provide ongoing feedback to families involved in the study. Community Fono will be hosted across Auckland and Palmerston North where findings within both regional areas will be shared. The purpose of Community Fono-Symposia series across Auckland and Palmerston North is two-fold: 1) Disseminate key findings in relation to Pacific family- care practices 2) Engage wider community and local government (Pacific and Elder care services, local council) in the development of family and community focused care initiatives. At each fono symposia the reflective findings of talanoa dialogue in Year 1 and fa'afaletui in Year 2 will inform and provide impetus for understanding Pacific caregiving practices and the needs of families, church and communities. In total a series of 3 symposia will be conducted. 2 symposia in Auckland and 1 in Palmerston North within the respective Pacific communities where participants are selected. An important initial result of the Community-Fono symposia series will be awareness-raising of the issues and needs facing Pacific mātua, carers and families, specifically for health organisations and local-government. Web based links will further enhance these objectives.

Year (Phase) 3

Fa'afaletui-Talanoa Co-design: To enhance the lives of those directly involved in the research, families involved in the study will be invited to engage in co-design fono where Youth-leaders, PRO's, Pacific *mātua* and research team members will guide

the development of initiatives that will enhance family, carer, and community wellbeing. The results will be presented to local and wider government agencies.

- *Distribution of findings*
  Key findings will be published in two key ways: As policy briefs or reports for distribution to targeted ministerial (government) agencies and shared with the research, elder care, and Pacific communities through nominated web sites and stake holder lists. Findings will also be shared through Pacific community fono, regional and national fono, and relevant conferences. In addition, Fa'afaletui-talanoa will be utilised to achieve broader dissemination of information based on our study findings to church communities, wider Pacific community forums, and documentation to Aotearoa-New Zealand Elder community networks through the team's established partnerships of research and community hubs: HART, NIU-PATCH and TOA-Pacific. Policy meetings will also discuss the meaning and implications of the findings with government officials. These approaches to sharing the findings are detailed below.

Key Strengths of our Culturally Responsive Research Protocol

Drawing on *Fa'afaletui-Talanoa* as Pacific-Indigenous frameworks for research, our study employs this strength of collective-wisdom gathering throughout interactions and engagements with Pacific Elders, families, church leaders, practitioners and broader community networks. Our team captures lived experiences of *Tausi Mātua* (Samoan term for Elder care) within their own respective Pacific communities. As such, the breadth of our research team networks and international collaborations provide a collaborative strength for recommendations and dissemination of findings of the study to be shared widely. This includes relevant forums that directly impact and engage Pacific communities, such as: Pacific community *fono*, regional and national *fono*, together with invited conferences. This will help inform the development of policy and practice implications for Pacific *mātua*, caregivers, families and communities. A policy meeting with government leaders to engage the relevant agencies and officials will also be undertaken focusing on a preliminary report of the project's overall findings. This will provide a key opportunity to discuss the socio-cultural and material supports needed to enhance and sustain the health and wellbeing of Pacific *mātua* and families. The team have well-established relationships with leaders of government, community, and academia which will enable this platform to be achieved. This will be further enhanced through publications developed as a team in local and international peer-reviewed journals. Globally, our international collaborators in the US academic and Pacific community sphere, and World Health organization (WHO) ensure our study findings have a universal outreach. This is especially important as the impact of our findings recognizes on the international health and wellbeing of the Pacific and its diaspora as global citizens.

As a whole new way of understanding the wellbeing of elders and their families in Aotearoa- New Zealand, the research focus on intergenerational relations and the nexus of change following migration, provides a greater understanding of the issues

and support needed by Pacific *Mātua* from within their families, churches, and communities. The broad aim of the research (to explore family, community and church perspectives and experiences of caring for Pacific *mātua* in order to improve the health and wellbeing of Pacific families and communities) is underpinned by three interrelated questions:

1. Are there Pacific-indigenous elder care practices that contribute to the health and wellbeing of Pacific families and carers?

- What are Pacific-indigenous mātua care practices?
- How are these practices of care being carried out by Pacific families in New Zealand?

2. How have Pacific-indigenous mātua care practices been impacted by the nexus of change?

- Have Pacific intergenerational-kinship care and multi-systemic living been maintained?
- How have changes within families, community, and church contexts impacted intergenerational-kinship care?

3. What socio-cultural and material supports are needed to sustain Pacific-indigenous care?

- What are the socio-cultural, emotional, spiritual and material benefits/challenges facing Pacific families providing care for mātua?
- What socio-cultural and material supports are needed to enhance and sustain the health and wellbeing of Pacific mātua and families?

The culturally responsive Pacific-Indigenous research protocol outlined in this article provided the foundation for exploring these key questions about Pacific elder care practices in Aotearoa New Zealand, ensuring alignment with community-led approaches and Indigenous ways of knowing.

Discussion

Relationally-Engaged Research Outcomes

Based on Pacific-Indigenous methodologies, our study envisages a framework for research that brings a transformative approach to ageing research which captures the inter-generational impact of care within Pacific families and communities. The research team including the Pacific advisory are Pacific *mātua* (elders) themselves, children of the Pacific diaspora and academic experts in the field of ageing research. Altogether this dynamic collective provides a multi-layered approach that reflects the essence of *fa'afaletui* as a wisdom-searching aspiration. The development of a

culturally responsive research protocol deepens an understanding of family, community and church perspectives and experiences of caring for Pacific Mātua (Elders), in order to improve the overall health and wellbeing of Pacific families and communities. This directly contributes to a significant gap in research and literature on family based elder care for Pacific peoples of New Zealand. To effectively achieve a clear understanding of Pacific mātua elder care in New Zealand we utilise this Pacific-Indigenous research protocol that is culturally responsive and brings together Pacific mātua, carers, youth, families and church communities to define for themselves Pacific mātua care practices and how these are being borne by families. Changes that have impacted intergenerational-kinship care are identified, and together solutions are co-created to enhance and sustain overall health and wellbeing of Pacific mātua as wisdom bearers of our communities. This approach builds the capacity of those on the frontline of elder-care through Pacific-led research protocols that develop solutions together with participants as cultural collaborators of the change they envision. The protocol's strength lies in its holistic integration of Pacific values, intergenerational relationships, and church-based engagement. Churches, functioning as cultural villages within the diaspora, provide vital spaces for maintaining language, tradition, and wellbeing. Their centrality in the research process affirms their role as hubs for relational knowledge exchange and community cohesion. The inclusion of Pacific mātua, youth leaders, and church communities ensures that the research is deeply embedded in lived realities and cultural contexts.

Integrating the Protocol into Practice

The diagram (Fig. 2) visually represents how our culturally responsive research protocol operationalises Pacific-Indigenous methodologies to achieve transformative outcomes. By explicating *fa'afaletui* and *talanoa* as culturally responsive research that is akin to but goes beyond co-design through its foundation of Pacific Indigenous

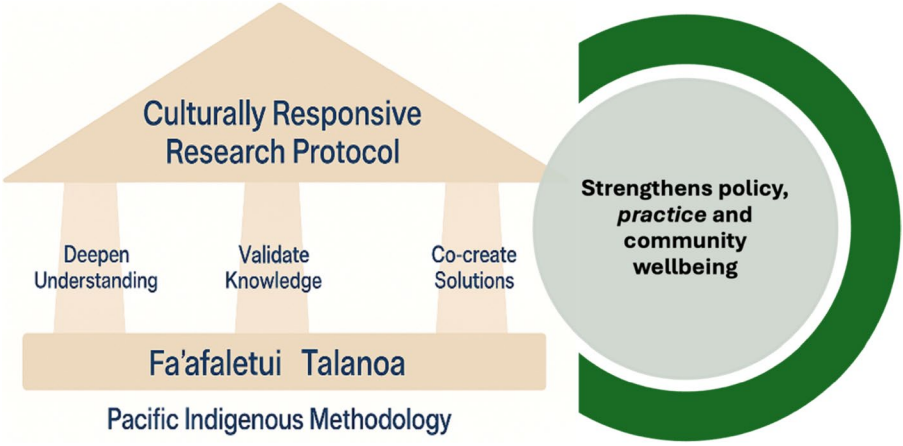


Fig. 2 Culturally responsive research protocol grounded in pacific indigenous methodology

knowledge. The protocol ensures that data collection, analysis, and solution development are relational, participatory, and culturally grounded. This approach moves beyond descriptive research to actionable change, enabling the co-creation of interventions that reflect Pacific values and address real-world eldercare challenges. In doing so, the protocol not only deepens understanding of Pacific caregiving practices but also strengthens policy and community responses to ageing in Aotearoa New Zealand. This diagram illustrates the structure and impact of the research protocol grounded in Pacific-Indigenous methodologies. The core contributions of *Talanoa* (relational dialogue), and *Fa'afaletui* (collective wisdom gathering) form the foundation of a culturally responsive research approach (symbolized by the *Fale* Samoa – Samoan house). *Fale* Samoa has no doors or walls representing the open and fluid nature of a research protocol whose methods ensure engagement is relational, participatory, and co-created with Pacific communities. The protocol (1) Deepens understanding by situating data within cultural contexts, (2) Gathers evidence validated through collective wisdom, and (3) Develops real-world solutions that are community-driven and culturally grounded. This approach not only addresses gaps in Pacific eldercare research but also strengthens policy, practice, and community wellbeing through actionable outcomes.

Conclusion

Real-World Impact and Solutions

This article presents a culturally responsive research protocol that reimagines eldercare through Pacific-Indigenous knowledge, offering a transformative lens for understanding and supporting Pacific mātua (elders) and their families in Aotearoa New Zealand. Grounded in the relational frameworks of *fa'afaletui* and *talanoa*, the protocol prioritizes community-led engagement, collective wisdom, and culturally safe spaces for dialogue. These methodologies not only validate Pacific ways of knowing and being but also illuminate co-design principles already inherent in Pacific Indigenous research design that empower participants as co-creators of solutions. By employing the protocol, it deepens the understanding of eldercare practices beyond conventional thematic coding. It enables the emergence of new cultural concepts and insights through interpretive dialogue with elders and community leaders. The demographic realities of a youthful yet rapidly ageing Pacific population, underscores the urgency and relevance of culturally responsive eldercare strategies. Importantly, the protocol moves beyond descriptive inquiry to real-world impact. It informs policy and practice through community fono symposia, policy briefs, and international collaborations, including engagement with WHO (World Health Organisation) and Pacific diaspora networks. The research also builds Pacific research capacity by training postgraduate students in culturally grounded methods and strengthening community-academic partnerships. The protocol will illuminate findings of the study to highlight the cultural centrality of eldercare, the impact of migration and cultural shifts, and the role of churches as community engagement and care hubs. In turn, this

reveals the need for targeted support for informal carers, culturally responsive workforce development, and youth engagement in intergenerational care. In conclusion, this culturally responsive research protocol offers a robust framework for understanding and enhancing Pacific eldercare practices.

Glossary of Pacific and Indigenous Language Terms

Aiga	Samoan term for family, encompassing extended kinship networks.
Alofa	Samoan term for holistic love i.e. love for family,village and nation
Ekalesia	Samoan term for church and the wider body of churches or congregations
Fa'aaloalo	Samoan term for the essence of relational respect and honour enacted through reciprocity
Fa'afaletui	A Samoan methodology of collective wisdom gathering through dialogue among different 'houses' that symbolise people.
Fale Samoa	Samoan house with no doors or window
Fonofale	A Pacific health model developed by Pulotu-Endemann (2009), representing a holistic view of wellbeing with the Samoan fale (house) as a metaphor.
Fono	A meeting or gathering, often used for community discussions or decision-making.
Kainga	Tongan term for family including extended family and extensions of family
Matai	Samoan term for the Chief (Head) who represents family and kinship ties across extended family
Matua Tausi	Samoan term referring to elders being cared for by their families.
Nu'u	Samoan term for village.
Olomatua	Samoan term for elder women who hold respected roles within the family and community.
Talanoa	A Pacific method of relational dialogue that emphasizes storytelling, trust, and cultural protocols.
Tangata o te Moana-nui-a-Kiwa	Peoples of the great Pacific Ocean; refers to shared ancestral ties among peoples across the largest ocean in the world – the Pacific, or more broadly Oceania.
Tangata Whenua	Indigenous Māori peoples of the land of Aotearoa New Zealand
Tausi Mātua	Samoan concept of elder care, emphasizing honouring and nurturing elders.

Tautua	Samoan term for the essence of service and responsibility i.e. serving village, family and nation.
Te Tiriti	The Treaty of Waitangi, foundational to Māori-Crown relations in Aotearoa New Zealand.
Tino rangatiratanga	Māori concept of self-determination and sovereignty.
Toeaina	Samoan term for elder men who hold leadership and advisory roles.
Tuākana - Tēina	Māori relational concept of older-younger sibling roles, adapted to describe Pacific-Māorirelationships in Aotearoa.
Vā fealoa'i	Samoan concept for upholding respect within relational space

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Declarations

Ethics Approval Ethical approval was obtained from the Human Ethics Committee at Massey University, Albany New Zealand (Application 4000023020).

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Authors and Affiliations

Siautu Alefaio-Tugia[1] · Tracie Mafile'o[2] · Sione Vaka[3] · Christine Stephens[4] · Fiona Alpass[4] · Kotalo Leau[5] · Petra Satele[5]

✉ Siautu Alefaio-Tugia
siautu.alefaio@otago.ac.nz

[1] University of Otago, Dunedin, New Zealand

[2] Avondale University, Cooranbong, NSW, Australia

[3] University of Waikato, Hamilton, New Zealand

[4] Massey University, Palmerston North, New Zealand

[5] Massey University, Albany Auckland, New Zealand