

Mental Health Foundation of New Zealnd PO Box 10051, Dominion Road, Auckland 1003 81 New North Road, Eden Terrace, Auckland Phone 09 300 7010 Fax 09 300 7020 www.mentalhealth.org.nz

Graphics: Sam Ikenasio
Design: EthnicWord Publications

All rights reserved. No part of this resource may be reproduced without written permission of the publisher, except as provided under New Zealand Copyright law.

© 2007 Mental Health Foundation of New Zealand

Faleafa, M., Lui, D., Afaaso, B., Tuipulotu, M. & Skipps-Patterson, S. (2007). Paolo "O o'u Paolo ou te malu ai" "It is my people that give me shelter": Embracing our Samoan communities: Suicide prevention information for people working with Samoans in Niu Sila. Auckland: Mental Health Foundation of New Zealand

ISBN: 9781877318511 (Paperback)

ISBN: 9781877318528 (PDF)

Acknowledgements

The process of compiling this booklet has been a collaborative experience involving the support, efforts and assistance of many people including Dr Monique Faleafa (Clinical Psychologist), David Lui (Cultural Consultant), Magnum Tuipulotu (SPINZ Community Liaison), Reverend Barry Afaaso (Cultural Advisor), Seilosa Patterson (Psychotherapist), Dr Jemaima Tiatia (Consultant) and Ifopo So'o (Cultural Advisor, Community Leader).

We would like to acknowledge the Samoan people that gave their time, effort, support and good will to partake in focus groups in Dunedin (Pacific Island's Centre, University of Otago), Christchurch (Pacific Trust Canterbury), Wellington (Taeaomanino Trust), and Auckland (Pacificare Trust). In particular we would like to express our gratitude to Tofilau Nina Kirifi-Alai, Anna Ah Kuoi, Gerardine Clifford, Dorothy Kennach, Paepae Purcell, Fou Etuale and Nonumalo Taufao Lurch.

We would also like to acknowledge Bettina Ikenasio-Thorpe and Sam Ikenasio of EthnicWord Publications for the design work and publication of this resource.

This booklet has been developed by Suicide Prevention Information New Zealand (SPINZ) a service of the Mental Health Foundation and funded by the Ministry of Health.





About this booklet

The purpose of this booklet is to provide information that will contribute to prevention of suicide for Samoans living in New Zealand (NZ). Given that there is little documented information on Samoan suicide prevention, this booklet is also intended to initiate dialogue and discussion on the issue of preventing suicide in our Samoan communities. We hope that it may pave the way for more in-depth research for Samoan suicide prevention and also for other Pacific ethnicities, to have resources in their own languages.

The information was gathered via current published literature and by four focus groups held at Pacific community organisations conducted in Dunedin, Christchurch, Wellington and Auckland. The focus groups consisted of a range of NZ-born and Samoan-born males and females, young and old, many of whom work or have an interest in helping to prevent suicide. This information contributes to documenting risk and protective factors that have been identified as uniquely Samoan experiences. However it is important to note that this booklet may not apply to the experiences of all Samoans in New Zealand.

Who is it for?

Anyone working with Samoans in New Zealand such as General Practitioners, teachers, school guidance counsellors, church ministers, social workers, community leaders, psychologists and mental health workers. It should be used together with other available suicide prevention resources and guidelines (available from SPINZ–refer to page 20 for contact details).

A note from the authors

A Talanoa or Soalaupule process was used to collect information in the focus groups by ensuring a collective and collaborative approach and by providing a respectful environment for participants to openly discuss and explore issues. David Lui and Magnum Tuipulotu ensured their facilitation was based on the fa'asamoa principles of inclusion, honesty and respect, and in particular a safe environment to discuss sensitive topics. The facilitators are grateful and felt humbled and privileged for the contribution of personal experiences that people shared during this process.



Fa'asamoa (Samoan way/Samoan Culture) and Fa'amatai (Chiefly way) underpin social, economic and political organisations in Samoa. It determines people's status, roles and relational arrangements, and governs family and village. It also underpins beliefs, values and attitudes.

Suicide in Samoa

From the late 1970s to early 1990s Samoa suffered a tragic epidemic of suicide, with suicide rates very high compared to other countries in the world, particularly amongst people 15-24 years of age. A significant number of completed suicides were due to the ingestion of a common agricultural chemical. In response, various community groups came together with government agencies to develop a plan to restrict access to this lethal method. As a result, government introduced a range of measures for safe use of the chemical, including education about the use and storage and limiting easy access to it. This in turn saw a drop in the suicide rates.

Suicide in Niu Sila

Statistics in NZ show that Pacific people have lower rates of suicide compared to Maori and European (refer to NZ Suicide Trends, 2006).

However, *Te Rau Hinengaro: The New Zealand Mental Health Survey* shows that Pacific people report higher rates of making a plan for suicide and higher rates of previous attempts than other ethnicities. Pacific people had higher rates of thinking seriously about suicide than other ethnicities apart from Maori who had the highest rate. The survey also reported that NZ-born Pacific people had higher rates of previous attempts and suicidal thoughts than Pacific people who migrated at the age of 18 and over.



Pule i le ola' is the Samoan term for suicide which means to "control the right to life". Samoans being God-fearing people believe that only God has the right to give and take away life. Suicide is viewed as not only a selfish act but someone taking on a role that is not theirs to take - hence the stigma associated with suicide.



Vulnerability to suicide

Common risk factors identified through Samoan focus groups and from existing literature were:

- being mentally unwell
- social and demographic disadvantage
- the changing structure and function of the family
- communication breakdown
- shame and stigma
- negative personal coping strategies
- issues relating to cultural identity
- stressful life events

Ma'i Aitu – or spiritual illness is when a person is affected by (saua) or possessed by a spirit (fasia). The symptoms of such conditions are similar to psychosis and other psychiatric illnesses and therefore often mistaken for mental illness resulting in misdiagnosis and mistreatment.



Being mentally unwell

One of the most significant risk factors contributing to suicide is mental illness, including alcohol and/or drug abuse. Mood disorders such as depression are particularly significant.

In New Zealand the Samoan population has a higher rate of mental illness than the general population with a 12-month prevalence of 25.0% compared with 20.7% of the total New Zealand population. However, it is concerning that Samoan people are much less likely to access mental health services than other New Zealanders.

Traditional Samoan approaches to health and well-being are founded on a belief that a balance of mental, physical, spiritual, familial and environmental domains are important for good mental health and well being. Mental illness may occur when one or more of these factors are out of balance.

Traditional Samoan beliefs may explain disturbed behaviour as being a manifestation of an external spiritual force, especially ancestral spirits who have taken possession of the person because the person or the person's family have broken tapu, such as offending family or spirits.

Musu – not wanting to be part of something/switching off. Withdrawal from social interaction as a coping strategy for stressful situations.



Social and demographic disadvantage

Socio-economic disadvantage (poverty) contributes to risk for suicide and suicide attempts. Samoan people living in New Zealand generally feature in the lower median income levels, have poor academic achievement (related to poor education) and are over-represented in unemployment statistics.

Poverty also contributes to a weakening of the extended family structure. Often both parents have to work long hours and are absent from the home. This diminishes opportunity for cultural experiences and knowledge transfer.

Fa alavelave translates literally in English to "accident". It is also a term used to describe Samoan cultural practice usually as a result of significant occasions such as funerals, weddings, birthdays, or bestoval of titles. In traditional Samoa, such major occasions would see extended family, friends and relatives rally around bringing gifts in the form of money, fine mats food or other offers of support to demonstrate their love and concern. This is part of the fa'asamoa called "osi aiga" (acknowledging family ties). Today fa'alavelave is also practiced in New Zealand and may be more associated with burden and hardship for many Samoan families due to the changing nature of the culture and how it is currently interpreted.

Fa'anoanoa — sorrowful, mournful, regretful. It can occur if there is disharmony within the aiga or a breakdown in a relationship with a person outside of the aiga. When a person suffers fa'anoanoa they may feel that no-one loves them, they may feel compelled to isolate themselves and seldom speak — become musu (withdraw). In its extreme form fa'anoanoa results in bad thoughts which may be manifested in suicidal behaviours.



The changing structure and function of the Aiga

For Samoans living in NZ there may be a breakdown of the traditional extended family structure with the disintegration of aiga potopoto and more recently the increasing emergence of the Samoan single-parent family. The changing structure of the family and general loss of community cohesiveness may bring about a lack of support and family conflict.

Young NZ-born Samoans may not experience the allencompassing aiga potopoto, communal relationships and social norms characteristic of fa'asamoa that their parents experienced. These different experiences of parent and child often result in intergenerational conflict.

Furthermore, the NZ-born Samoan may often have life-long experiences of feeling misunderstood or misinterpreted – a characteristic also contributing to them not seeking help.

Family (Aiga) forms the foundation of Samoan society. Family and community are not distinct entities. Kinship is one of the most important underlying values of Samoan social relations. In Samoa everyone belongs to a family.

Fa'aaloalo (respect) is the foundation of good relationship. Relationships bind everything together. The protocols and etiquettes that define the respectful behaviour (tu ma aga) are known by Samoans as va fealoaloai or ava fatafata. These protocols and etiquettes are needed to maintain good relationships (relational arrangement). Samoans have a deep sense of respect especially for women, elders, visitors and those in authority. A person who does not show respect will find his or herself outside of the correct relational arrangement and will be isolated from their family and community. "Aua ete se'e i le mālū o le tai taeao" (Don't be fooled by calmness of the morning tide)



Communication breakdown

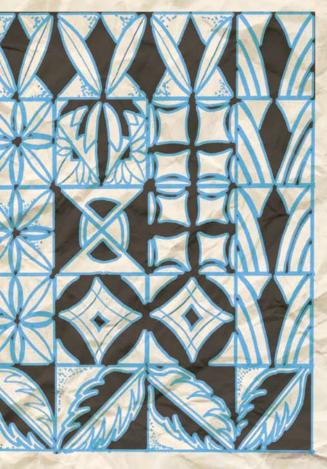
Reluctance to discuss private experiences is not uncommon in the fa'asamoa, particularly between parents and children. Western paradigms would identify this as a communication breakdown – as do many Samoans.

A major contributing factor is language barriers where some NZ-born or NZ-raised Samoans may have limited knowledge of Samoan language and conversely the Samoan born has a limited knowledge of English.

Another barrier is the notion of 'masking' emotions where some Samoans perceive they are taught to hide their true feelings from a young age. For some, emotions are masked in order to comply with cultural norms and fa'aaloalo.

Thus suicidal behaviour may not be discussed among aiga. Some young NZ-born Samoans may feel they are caught in a world of privacy and secrecy. Suicidal behaviours could be seen as an overt way of expressing and communicating pain and frustration.

It is important to note that because of this communication breakdown, some of the warning signs and symptoms preceding suicidal behaviour may not be easily identified.



Shame & stigma

If aiga expectations are not met, if moral norms are violated, or if a person's conduct reflects badly on the family name, a person can feel intense guilt and shame. There is also concern about the consequences of their acts. In these situations it appears that suicidal thoughts and behaviours are common.

There is negative stigma associated with a suicidal act committed by a family member – the family feel ashamed that they failed to adequately care for and support the individual who attempted suicide. Because of this stigma, people having thoughts about suicide may hide their thoughts.

There is also shame and stigma associated with mental illness which is a major barrier to recovery. The fear of disgrace prevents people from seeking support from their families and also prevents families from seeking help to care for their loved one.

'Pule i le ola' is the Samoan term for suicide which means to "control the right to life". Samoans being God-fearing people believe that only God has the right to give and take away life. Suicide is viewed as not only a selfish act but someone taking on a role that is not theirs to take - hence the stigma associated with suicide.



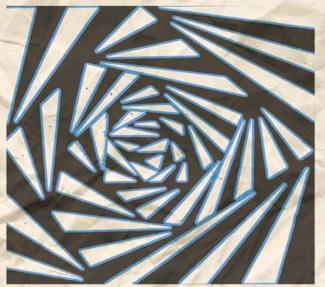
Tapu – defines and determines the boundary or relationships between people and between people and God or between people and the environment (land, sea, forest etc.). Tapu is about safety because it defines what a person can do (safe) and what a person should not do (unsafe).

A move away from the church

Traditionally Samoans have always believed in a superior being or Gods. Samoan legends handed down through generations speak of people being direct descendents of gods and have direct interaction with them. Hence spirituality is an important part of a Samoan person. It is where a person's identity and sense of connectedness comes from. This forms an important coping mechanism when a person is faced with challenges. Since the arrival of Christianity in Samoa in 1830, spirituality is most commonly linked to church and religion.

Historically in NZ, the church has been the cultural hub and 'village' for many Samoans and has continued to this day. However, there has been a weakening of the position of the church amongst some Samoans living in NZ. By not attending church some Samoans are cut-off from social support and the wider Samoan community, which in NZ is the church community.

Furthermore, if a family or individual have depended on God for support historically, disengagement from their spiritual source can have negative effects on self-esteem.



Fa'amagalo (forgiveness) enables a person to maintain respectful relationships. When a person breaches a tapu it finds him/herself outside of this relational arrangement. It is this value that allows a person after undergoing cultural protocols and etiquettes to return to a balanced relationship.

The individual can seek forgiveness by undergoing the process of fa'atoesega (formal apology) in order to rebuild relational bonds. The process of fa'atoesega is an appeal to a person's sense of forgiveness an important value in the fa'asamoa.

Personal coping strategies

Anger has been reported as a primary catalyst for Samoan suicide in NZ. Some purport that for Samoans cultural pressure and unrealistic expectations are a major source of anger and resentment.

Overt expression of anger in Samoans is often discouraged in order to maintain harmony, keep young people within cultural boundaries and to teach young people fa'aaloalo (respect). However, this perceived cultural expectation of emotional restraint may not be healthy as emotions are suppressed. This can make it difficult for some Samoans to cope while trying to bridge two or multiple world views. Consequently, for some, the emotions are masked, and anger is internalised manifesting itself in destructive and sometimes suicidal behaviour.

For many, depression is anger turned inwards. Suicidal behaviour is seen as a means of escape, relieving pressure and expressing anger.

E leai se aogā e tele ai au mea, ae leai ni ou aiga: "it is of no use of one to possess the riches or success of the world and have no family"



Cultural identity

In traditional Samoa, the aiga is the first place where a person is taught about identity, a sense of belonging, and knowledge of roles and responsibilities. Samoan's cultural identity resides within the individual, and is affirmed daily through ancestral and spiritual connections by the family, church and communities.

With the change in function and structure of the aiga and the move away from the church, there is a loss of cultural support and socialisation for some NZ Samoans. Many do not have the opportunity to experience important cultural knowledge and understanding such as the importance of one's service to the family and wider community.

For some Samoans there may be a feeling of being stranded between two cultures, raised with Samoan values but also adopting the values of the host culture. They are living a life in a western culture that promotes individualism, enquiry, personal wealth and academic or career success, but may also have strong beliefs and values of collectivity, obedience, service, and prioritising family and church obligations. Balancing and coping with these two value systems can easily lead to internal conflicts, a lack of a sense of belonging and identity, and confusion about what role they play and where they fit in.

Younger Samoan's in NZ are often from multiple ethnic ancestry, not just dual identities and this also needs to be taken into consideration when dealing with young people.



Stressful life events

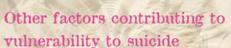
It is well documented that suicide is often a result of exposure to many stressors. It is reported that for Samoan people, a major stressor is interpersonal conflicts and losses.

Conflict with family members and the breakdown of relationships traditionally places a person outside of the aiga relational arrangement (see Fa'asamoa page 3) resulting in enormous emotional distress.

Unresolved grief can result from loss of a loved one and leave the individual vulnerable to suicide.

Suicide and suicidal behaviours are the result of a range of contributing stressors and an accumulation of adverse situations.





The previous risk factors have been identified by Samoans as distinctly Samoan experiences.

- Access to lethal methods
- Exposure to physical, emotional or sexual abuse
- Negative attitudes towards those with gay, lesbian or bisexual orientation
- Legal or disciplinary procedures
- Previous suicide ideation (thoughts) and attempts
- Having friends or a family member who has died by suicide or made a suicide attempt
- Low self-esteem

While each risk factor on its own can increase vulnerability to suicide, a person's vulnerability is greatly increased with the accumulation of multiple risk factors.





Protection from suicide

Aiga as a protective factor

While the structure and function of the family in NZ may be changing, aiga is still the central social organisation that provides social networks, close interpersonal relationships and a sense of belonging. Strong relational arrangements within the aiga are a source of support and protect against suicide.

For young NZ Samoans the sibling relationship or a close cousin has shown to be someone to confide in and a valuable source of support.

Feagaiga traditionally refers to the covenant associated with brothersister relationship. This is an especially sacred relationship guarded by tapu. The breach of this tapu can have very negative effects on the person





Connectedness with God and religious affiliation or activity appear to protect against suicide. For NZ Samoans it may be a significant coping mechanism to have God to turn to in a time of distress. Hopelessness is a key contributor to suicidal behaviour and it is perceived that connectedness or a relationship with God provides hope and reasons for living.

Attending church also provides participation in a key social organisation that enhances social support, cultural knowledge and experience, and meaningful personal relationships.

Cultural identity and spirituality were always strong for Samoans before the arrival of Christianity. Every Samoan is born with a fa'asinomaga (destiny). Knowing and understanding ones heritage (tupuaga), geographical, genealogical (faiā) and cosmological connections are what binds together aiga and community. These are factors that may protect against vulnerability to suicide.

NZ Samoans that achieve a sense of balance and harmony between fa'asamoa and the palagi way (and/or other ethnic affiliation) show strong resiliency and tend to cope better with stress.





Other protective factors

- A positive school experience and learning environments
- A close relationship with someone removed from the family that a person can trust and confide in
- Supportive friends



What can you do?

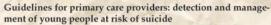
- If you know someone that is at immediate risk, stay with them and seek further assistance (see contact details on page 20)
- If you are in primary care, a clinical practice, emergency department, social work or in a secondary school, follow the appropriate guidelines, procedures and principles of the management of suicide risk (see page 19 for current guideline documents).
- Acknowledge spiritual beliefs and keep in mind the holistic perspective of well-being including the mental, physical, environmental and the spiritual domains.
- Do not assume that all Samoan people at risk of suicide have similar cultural values and beliefs - they are very diverse.
- At the time of referral, Samoan families may disengage. Be prepared to support and help navigate the individual and/or family throughout the process and follow-up.
- To engage the Samoan person and build a trusting relationship, it is vital to make a conscious effort to establish rapport from the start.
- Offer the input of specialist Samoan community or mental health workers or matua. This may mean referral to a specialist service. Samoan input is particularly critical where issues of breach of cultural protocol or spiritual issues are present.
- If language is a barrier and an interpreter is used, take care to ensure confidentiality.
- Recognise the value of aiga and the individual's preference for involving family or other support

Resources and Guidelines

The assessment and management of people at risk of suicide NZ Guidelines Group and Ministry of Health, May 2003, 72 pages

Best practice evidence-based guideline for emergency departments, mental health services and acute assessment settings.

Available online: http://www.moh.govt.nz/suicideprevention



Ministry of Youth Affairs; Royal New Zealand College of General Practitioners, 1999, revised June 2004, 79 pages

Written to assist recognition of young people at risk of suicide and appropriate management or well informed referral to secondary services, these guidelines are designed for GPs, practice nurses, public health nurses and school or educational institution nursing staff.

Available online: http://www.moh.govt.nz/suicideprevention

Youth Suicide Prevention in Schools: a practical guide

Ministry of Youth Affairs, Health and Education, 2003, 10 pages

- Examines the role of schools in suicide prevention
- Discusses criteria for schools to use in assessing external providers of suicide-related programmes

Available online: http://www.moh.govt.nz/suicideprevention

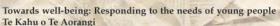
These resources are available from SPINZ: www.spinz.org.nz



Young people at risk of suicide: A guide for schools

Ministry of Education: Te Tahuhu o te Matauranga; National Health Committee, March 1998, 34 pages. Also available on the NZ Guidelines Group website.

Available online: http://www.moh.govt.nz/suicideprevention



Child Youth and Family: 2000, 95 pages. Available on website: http://www.cyf.govt.nz/reports.htm

This guide was extended to develop and implement a national monitoring, case audit and case management system for young people in contact with CYF who were assessed as being at risk of suicidal behaviour.



New Zealand Suicide Prevention Strategy 2006-2016

The strategy was launched in June 2006 to provide an all-ages approach to suicide prevention. It builds on the gains made by the New Zealand Youth Suicide Prevention Strategy which was released in 1998.

Available online: http://www.moh.govt.nz/suicideprevention



SPINZ Community Information Resource

The SPINZ community guide has been developed as a result of a national consultation with individuals, groups and organisation involved in **youth suicide prevention** activities. The content of the guide is based on the needs identified through the consultation process and therefore has a focus on community development.





Contacts

National:

Mental Health Foundation of New Zealand National Office 09 300 7010 Website www.mentalhealth.org.nz

Suicide Prevention Information New Zealand (SPINZ) Phone 09 300 7035 Website www.spinz.org.nz

Youthline 0800 376 633 Lifeline 0800 543 544 Healthline 0800 611 116 for referral to your nearest mental health service

Auckland:

Isa Lei 09 838 0085 Lotofale 09 623 4689 Faleola 09 270 9994 West Fono Trust 09 837 1780 Malologa Trust 09 849 7760 Pacificare Trust 09 279 8030

Waikato:

Kaute Pasefika 07 846 2280 Pacific People's Addiction Services Inc. (PPASI) 07 834 2964 Rotorua: Pacific Development Charitable Trust 07 348 4390

Wellington:

Taeaomanino Trust 04 237 4216 Vakaola 04 237 7751 Health Pasefika Mental Health Service 04 918 2855

Christchurch:

Pacific Trust Canterbury 03 363 0742

Dunedin:

North Community Mental Health Service 03 474 7739 South Community Mental Health Service 03 471 8475

National Depression Initiative (NDI):

Website www.depression.org.nz

References

Associate Minister of Health. 2006. New Zealand Suicide Prevention Strategy 2006-2016. Wellington: New Zealand

Bathgate, M., & Pulotu-Endemann, F.K. (1997). Pacific People in New Zealand. In Pete M. Ellis & Sunny C.D. Collings (Eds.), Mental Health from a Public Health Perspective. Wellington: Ministry of Health.

Booth, H. (1999). Pacific Island Suicide in Comparative Perspective. Journal of Biosocial Science, 31, pp 433-448.

Bowles (1995). Bowles JR. 1995. Suicide in Western Samoa: an example of a suicide prevention programme in a developing country. In: R Diekstra, W Gulbinat, I Kienhorst, et al (eds). Preventive Strategies on Suicide. Leiden: EJ Brill.

Collings, S., & Beautrais, A. (2005) Suicide Prevention in New Zealand: A contemporary Perspective. Wellington: Ministry of Health.

Ferguson, S., Blakely, T., Allan, B, & Collings, S. (2005). Suicide Rates in New Zealand: exploring associations with social and economic factors. Wellington: Ministry of Health.

Lui, D., & & Dowland, J. (2003). Family – a Samoan perspective. Keynote presentation to the SF national conference, Christchurch Convention Centre. Wellington: Mental Health Commission.

Macpherson, C, & Macpherson, L. (1987). Towards an explanation of Recent Trends in Suicide in Western Samoa. Man, 22, 2, pp 305-330.

Maskill, C., Hodges, I., McClellan, V., & Collings, S. (2002) Explaining Patterns of Suicide: A selective review of studies examining social, economic, cultural and other population-level influences. Wellington: Ministry of Health.

Ministry of Health. 2006. New Zealand Suicide Trends: Mortality 1921-2003, hospitalisations for intentional self harm 1978-2004. Monitoring Report No 10. Wellington: Ministry of Health.

New Zealand Guidelines Group. (1998). Young People at Risk of Suicide: A guide for schools. Ministry of Education. www.nzgg.org.nz.

New Zealand Guidelines Group. (2003). The Assessment and Management of People at Risk of Suicide. NZGG and the Ministry of Health. www.nzgg.org.nz.

Oakley-Browne MA, Wells JE, Scott KM. (2006) Te Rau Hinengaro – The New Zealand Mental Health Survey: Summary. Wellington: Ministry of Health

Rubinstein, D. (1992). Suicide in Micronesia and Samoa: A critique of explanations. Pacific Studies, 15, 1, pp 51-75.

Stewart-Withers, R., & O'Brien, A. (2006). Suicide Prevention and Social Capital: A Samoan perspective. Health Sociology Review, 15, 2, pp 209-220.

Tamasese, K., Peteru, C., Waldergrave, C., & Bust, A. (2005). O le Taeao Afua, the new morning: a qualitative investigation into Samoan perspectives on mental health and culturally appropriate services. Australian and New Zealand Journal of Psychiatry, 39(4), 300-309

Tiatia, J. (1998). Caught between cultures: a New Zealand born Pacific Island Perspective. Auckland: Christian Research Association.

Tiatia, J. (2003). Reasons to Live: NZ-born Samoan Young Peoples Responses to Suicide. Thesis. Auckland: University of Auckland.

