Experiences and support needs of the Pacific sexual violence workforce in Aotearoa New Zealand

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UNIVERSITY OF AUCKLAND Waipapa Taumata Rau NEW ZEALAND
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"We want to thrive, not just survive!" (PSG & PWNSV, 2021, p.6)

"… [I want] **to see sexual violence be discussed safely in our Pacific community**, **to see education shifts** from just about being a safe talk [to be] also about the impacts and effects/affects, both emotionally and psychologically; [what] it does when sexual violence occurs; **what is consent in the Pacific context**? [I want it] to be really part of that. I work in family harm and will continue to do so". (Questionnaire respondent)

"I think **when it comes to the Pasifika models that I use, it is definitely something, sadly, I have had to implement personally**. My work environment is still very much a western system and so it has kind of been… especially when I've been going into classrooms, where like a lot of our content is very educational, but it can be placed in this [way]… is what we perceive to be right and wrong, which can really affect Pasifika's value systems that are really rooted from a young age" (Talanoa Session)

"…So how I took care of myself, I suppose; definitely, like, clinically you needed the critical cultural supervision, it is so important, and that is what I've emphasised with a lot of our Pasifika practitioners – keep up, maintain regular professional clinical cultural supervision. It is important that you keep doing that because you have to talk to somebody about these cases" (Talanoa Session)

"I made a decision to go into private practice so that I could apply cultural ways of working without mainstream expectations of delivering numbers, levels and outcomes. **I wanted to work holistically in a way that would honour Pasifika culture, in a way that seemed more authentic to me as a therapist**" (Talanoa Session)

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List of Acronyms

Acronym:	Meaning:
SV	Sexual violence
Aotearoa NZ	Aotearoa New Zealand
Pacific SV workforce	Pacific SV Workforce of Aotearoa New Zealand
CBT	Cognitive Behavioural Therapy
MSD or the Ministry	The Ministry of Social Development
NZCCA	NZ Christian Counsellors Association
NZAC	NZ Association of Counsellors
PCC	Pasifika Counsellors Collective
NZAP	NZ Association of Psychotherapists
NZPsP	NZ Psychological Society
ANASW	Aotearoa NZ Association of Social Workers
PIWHP	Pacific Island Women's Health Project
IPV	Intimate partner violence
TOAH-NNEST	Te Ohaakii a Hine – National Network Ending Sexual Violence Together
NGO	Non-government organisation
Corrections	Department of Corrections
ACC	Accident Compensation Commission
FV	Family violence
PSG	Pacific Steering Group
PWNSV	Pasifika Workforce Network Sexual Violence

Executive Summary

"We want to thrive, not just survive! (PSG & PWNSV, 2021, p.6)

This research project focused on understanding "the experiences and support needs of Pacific peoples in the sexual violence ("SV") workforce of Aotearoa New Zealand". There is no empirical baseline evidence available on who constitutes Aotearoa New Zealand's ("Aotearoa NZ") Pacific SV workforce. This is the first time this information has been collected and collated. Although there is considerable literature on who constitutes Aotearoa NZ's **Pacific health workforce,** their support needs and experiences (e.g., Perese et al, 2009; Pacific Perspectives Ltd, 2019; Pasefika Proud, 2016), very little within this has been about the specific support needs of the **Pacific SV workforce** (Percival, 2010; McRobie in Wharewera-Mika and McPhillips, 2016).

This project is timely given the current work of the *New Zealand Royal Commission of Inquiry into Abuse in Care* and the December 2021 launch of New Zealand's *Te Aorerekura – National Strategy* to eliminate family violence and sexual violence. This research employed the Talanoa research methodology to bring findings from a literature review, online questionnaire (quantitative data), and individual and group talanoa (qualitative data) together, to converse with each other.

The researchers conclude that:

1. While the Pacific SV workforce of Aotearoa New Zealand ("Pacific SV workforce") largely comprises women of Samoan ethnicity, Auckland-based, over 40 years of age, and who are very well qualified (in terms of higher formal NZ education qualifications), there are smaller representations within the workforce from across other Pacific ethnic groups, and from younger (under 40 years) age groups.

2. Although the Pacific SV workforce consists mainly of people working as social workers or counsellors, they also occupy a wide range of other practitioner roles. This includes pastoral and peer support workers, and those in health promotion, sex education, psychotherapy, and medical forensics. The workforce in general is likely to stay in the SV sector for up to two years, and for those who stay beyond two years, the data suggests that most are likely to stay for up to six years, with only a few staying beyond that. For those who have left the workforce, most leave for 'personal' reasons including family related reasons. For those who stayed in the workforce, most stayed because of a strong desire to make a positive contribution to the healing journeys of Pacific SV survivors.

3. The Pacific SV workforce uses Pacific principles and values (indigenous and faith-based), protocols, models, and frameworks to inform their work with Pacific SV clients. The organising principles of tapu and vā, and the Fonofale, Talanoa, and Teu le Vā models and frameworks were the most commonly cited Pacific principles and models used by respondents/practitioners. These values incorporated both Pacific faith-based and Pacific indigenous cultural interpretations of tapu and va.

4. Participants also acknowledged use of Western and Māori models and frameworks in their SV work with Pacific clients, such as the Cognitive Behavioural

Therapy (CBT) model and Te Whare Tapa Wha model. Pacific participants who chose not to specifically incorporate Pacific values, protocols, models, or frameworks in their practices did so because they found it irrelevant to what their Pacific client needed, or because they worked predominantly with non-Pacific clients.

5. The Pacific SV workforce is currently scattered, isolated, and fragmented. Strengthening the emerging national Pacific SV workforce network and establishing a Pacific multiservice agency that can bring members together from within the SV sector and across Aotearoa NZ to support each other, manage referrals, navigate systems, and advocate for Pacific SV support needs, is necessary.

6. The workforce is frustrated with current state systems and approaches to funding and reviewing Pacific SV cases. The current approach (especially that adopted by ACC) is considered culturally alienating, counterproductive, and potentially retraumatising for Pacific SV survivors.

7. A more holistic public funding, reporting, evidence-building, and assessment system that can respond constructively to Pacific approaches to SV work is needed. This will help reduce the need for Pacific SV practitioners to engage in voluntary pro bono work with Pacific SV clients who need help but are unable to afford it and ineligible for state funding support.

8. More specifically targeted and culturally nuanced workforce education and training initiatives around sexual harm prevention is needed, especially in relation to consent to sex issues in Pacific spaces beyond legal definitions.

9. Pacific SV practitioners need ongoing support from cultural and clinical supervisors well versed in Pacific cultural and clinical SV issues, frameworks, and models.

10. Pacific SV practitioners draw on informal and formal support networks to deal with self-care, including compassion fatigue. Pacific faith-based communities and families provide a significant amount of this informal support.

The researchers recommend that:

1. The emerging national Pacific SV workforce network be supported to bring the Pacific SV workforce together from across the SV sector and Aotearoa NZ, to advocate on behalf of the workforce and to explore the viability of a Pacific SV multi-service agency.

2. The findings of this research report be used to inform SV sector planning and investment in Pacific SV workforce development, bearing in mind the significant work already carried out by the Pacific health and Pacific family violence sectors on overlapping Pacific workforce support needs.

3. A review be undertaken of the impacts and/or effects of relevant state funding, reporting, evidence-building systems and evaluation processes on the productivity and

retention of Pacific SV practitioners and on their potential to re-traumatise Pacific SV survivors.

4. The SV sector invest in growing Pacific cultural and clinical supervision expertise, Pacific SV workforce career and/or professional development and/or leadership pathways and recognises the contribution that informal Pacific networks play in supporting Pacific practitioner self-care and workforce retention strategies.

5. Because of the high numbers of male Pacific sexual violence offenders, the paucity of information or knowledge on the support needs of Pacific LGBTQ+ peoples and Pacific youth affected by sexual violence, and on the positive value associated with peer support services, more work is needed by the SV sector to attract more Pacific males, youth and LGBTQ+ persons to the SV workforce.

1.0 Introduction

1.1 Background: Framing the project's Pacific focus

This project came about because the Ministry identified Pacific peoples as a priority group and identified the need for Pacific-led research into the Pacific sexual violence workforce space.

"In October 2019, the [Ministry of Social Development] Insights research team met with the Pacific Steering Group, which is facilitated by Te Ohaaki a Hine National Network Ending Sexual Violence Together (TOAH-NNEST, their Pacific Steering Group of Tauiwi Caucus).[1] … The Ministry found that:

(a) "*Pacific people are one of the priority groups* identified within the [All-of-Government co-designed sexual violence work] programme" (ibid, italics inserted), and,

(b) "[The] *Pacific workforce is key to providing culturally responsive support*. Previous research has identified that Western models of practice are ineffective and can be traumatic for Pacific peoples, contributing to a process of re-victimisation (Wharewera-Mika & McPhillips, 2016). Hence, *there is a need for a Pacific workforce that represents the range of Pacific Island groups, genders and age groups*; and that can appropriately draw on/use:

- *Pacific spirituality*, which is likely to be church based;
- Pacific culture, which is unique for different Pacific Island groups; and
- Pacific language, including specialist sexual violence terminology that may not translate; and use of informal terms that can support the engagement of subgroups, for example, men and young people (Tiatia, 2008b)" (ibid).

In this report the term 'Pacific' is used interchangeably with the term 'Pasifika'. These are terms commonly used by Pacific peoples and New Zealand government ministries and organisations to describe those peoples living in Aotearoa NZ who self-identify as belonging to one or more Pacific ethnic group (not including Māori).

The 2018 New Zealand census records 381,642 peoples living in New Zealand who self-identified as belonging to at least one Pacific ethnic group.[2] This constitutes 8% of the total New Zealand population. Of this eight percent, approximately 46% have lived in New Zealand for 20 years of more. Almost 60% belong to a single Pacific ethnic group. Sixty-six percent were born in New Zealand. Ninety-one percent speak English. While there is still a significant number of Pacific peoples who self-identify as Christian in 2018 this is a declining number (68% in 2018 compared to 80% in 2006). Those who self-identified as having no religious affiliation since the 2006 census rose from 14% in 2006 to 23% in 2018.

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1 The above quotes were drawn from the CSO contract section A1.

2 See: https://www.stats.govt.nz/tools/2018-census-ethnic-group-summaries/pacific-peoples.

Samoans are by far the largest single ethnic group (48%), followed by Tongans (21.5%) and Cook Islanders (21%), then a large number of smaller Pacific ethnic groups (14 in total), which include Niueans (8%), Fijians (5%, which is inclusive of Indigenous Fijians or i-Taukei, Fijian-Indians, and Fijian-Rotumans), Tokelauans (2%), Tuvaluans (1%), i-Kiribati (0.8%), Tahitians (0.5%), Papua New Guineans (0.3%), ni-Vanuatu (0.25%), Solomon Islanders (0.2%), and Hawaiians (0.1%).[3] Notwithstanding the number of ambivalences and complications associated with the Pacific/Pasifika identity labels and categorisations (see Teaiwa and Mallon, 2005), their continued and particular usage in Aotearoa New Zealand gives them relevance and currency for our purposes.

This background informs the project's scope and terms of reference.

1.2 Project Terms of Reference

In December 2020, the Ministry of Social Development ("MSD" or "the Ministry") contracted Auckland UniServices Limited to deliver an exploratory baseline-setting research project on the experiences and support needs of Pacific peoples in the sexual violence workforce ("the project").

The project's primary research question is: "What are the experiences and support needs of Pacific peoples in the sexual violence workforce"?

The following questions were used to guide primary data collection:

- Who constitutes the Pacific sexual violence (SV) workforce of Aotearoa New Zealand (NZ)?
- Where are they located (geographically and in terms of their workforce roles)?
- What is their demographic profile?
- What are their experiences of providing support to Pacific peoples affected by sexual violence in Aotearoa NZ?
- What are or were their support needs, work goals and aspirations?

The project began in April 2021 and ended in December 2021.

The exploratory baseline-setting nature of the project, together with time and funding constraints, limits data analyses to descriptive analyses only. More intricate analyses of any key discussion areas raised may be possible through academic articles published by the team after delivery of final report or through the procurement of further in-depth research building on project findings.

1.3 Report Structure

[3] Note that the overall percentage for total share of Pacific ethnic groups listed equals over 100% as respondents could self-identify as belonging to more than one Pacific ethnic group. This suggests that the size of Pacific peoples belonging to more than one Pacific ethnicity is probably around 8-10% but this does not account for those who self-identify as belonging to one or more Pacific and non-Pacific ethnic group, especially Pacific-Māori and/or Pacific-Pākehā/European ethnicities or both.

The aim of this report is to describe the project's key findings, conclusions, and recommendations. It includes summaries of key themes arising from three data sources: the literature review, an online questionnaire, and talanoa sessions. In sections four, five, and six of the report, the conclusions (in relation to the primary research question) are outlined, a summary discussion of key themes are provided, and recommendations for action suggested.

2.0 Research Philosophy, Methodology and Design

2.1 Talanoa, vā[4], tapu and noa

The project adopts the Talanoa research methodology (Vaioleti, 2006, 2013; Farrelly and Nabobo, 2014; Suaalii-Sauni and Fulu-Aiolupotea, 2014; Fa'avae et al, 2016; Prescott and Johansson Fua, 2016). This involves a framework for doing indigenous pan-Pacific research that draws specifically from indigenous Pacific research values (pan- and ethnic-specific), including the Polynesian concepts and practices of talanoa (storying), vā (spiritual relationality; see Iosefo., et al, 2021; Fa'avae, 2018; Koya Vaka'uta, 2017; Naufahu, 2018; Ofanoa et al., 2015; Stewart-Withers et al., 2017; Tecun et al., 2018), tapu (sacredness, see Enosa et al., 2019; Amituanai-Toloa, 2006) and noa (open, accessible and/or ordinary) and combining this with the sampling, recruitment, and transferable logics of quantitative and qualitative methods as used by social scientists and health researchers, especially those involved in outcomes research (Curry et al, 2009). Although the terms vā and talanoa derive from Polynesian[5] languages, the concepts of storying, respect, reciprocity, relationality, tapu, and noa that reside within, are concepts that resonate across different indigenous worldviews, language frameworks and cultures (Yunkaporta, 2021; Archibald et al, 2019; McRobie and Agee, 2017; Smith, 2012).

The vā as a term refers to the Polynesian idea and belief that space – all space – is relational, not empty; it is creative, dynamic, connecting, energising and sacred, and thus to be treated at all times with respect (Ka'ili, 2005; Mo'a, 2015; Suaalii-Sauni, 2017; Baice, T., et al., 2021). The vā sees that all things exist in relation to one another, that all things are interconnected and intraconnected in a vā relationship. There is a vā relationship between people, between people and their God/gods, their environments (physical, mental, spiritual, social), animals, and all of creation – rocks, cosmos, earth, particles, waterways – and their life forces, ideas, and so on and so forth. One creates and/or begets and/or interacts and/or is with another or many others at all times, at any time, at some time. As such one is always in a state of being in relationship. This understanding of the vā continues to influence, direct, define and care for how Pacific peoples in Aotearoa NZ *know* and *do* contemporary Pacific research, and is something that is implicitly assumed within the talanoa methodology we understand and use here.

Talanoa as a concept means to talk or story (tala), to engage in conversation, and even for some, to gossip. Talanoa also means to talk in accessible, ordinary (noa) ways or in ways that have no set purpose or direction, instead allowing for the act of reciprocal

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[4] The vā is variously spelt using either no macron over the 'a' or a macron over the 'a'. A macron over the 'a' is used here to assist non-Pasifika speakers recognise its elongated sound. Also, unless it is at the beginning of a sentence or a proper noun or within a direct quote, the term vā is not capitalised.

[5] The categorisation 'Polynesian' has been critiqued by Pacific indigenous scholars for its condescending settler colonial imperialist origins (Arvin, 2019). We recognise this critique and acknowledge it's validity. We find, however, that for the sake of clarity that when using contemporary English, it offers a less wordy and more easily accessible term to describe the group of Pacific Islands peoples and cultures of interest here for our targeted readership. The current alternative 'central Pacific' descriptor is considered for present purposes too vague. We understand the paradox this presents and see it as symptomatic of the ongoing challenges of languaging modern Pacific experiences.

sharing to shape the final story and determine the path for the talanoa.[6] This talanoa project as a whole sought to be sensitive to and deliberate about recognising Pacific diversity and the many different vā relations within. It draws on an interpretation of talanoa that seeks to avoid gossip, to focus instead on reflexive open-ended storying genuine in its pursuit of providing a clear narrative of the current state of knowledge of Aotearoa NZ's Pacific sexual violence workforce, about their experiences and support needs.

All face-to-face talanoa sessions held, questionnaire responses provided, and literature reviews conducted for this project involved the researchers *being in conversation*, *and in a vā relationship* with project participants and the information raised by relevant literature. The research team sought to bring these conversations into a dynamic with each other (i.e., to work through whether what the literature seemed to be saying resonated with what the questionnaire findings and talanoa session findings were saying, for example), and with the aims of the project. This was done both intuitively (based on relevant prior researcher knowledge and experience) and systematically (based on thematising processes). In this sense *talanoa as conversation* becomes metaphor not only for how information was gathered (framing the project's methods and methodology) but also for what the project hoped to create, i.e., a focused but open and culturally response-able[7] conversation - one that takes Pacific indigenous concepts of va, tapu and noa seriously (i.e., beyond token recognition), making them meaningful and visible in the designing and doing of outcomes research with Pacific peoples.[8]

Our initial study design also included site observations to gather real-time information on the physical environment of four Pacific SV services in Auckland. The assumption was that they could provide descriptive context to participants' physical workplace environments. However, because of the 2021 prolonged COVID-19 lockdowns in the Auckland area the site observation arm was cancelled. Site observations were considered a bonus, but not a pivotal data source. While they could add a further source for the triangulation of the outcomes of the literature review, questionnaire and talanoa sessions (in terms of relevant workplace information), its loss to the project was minimal as some relevant information was available from a review of service/agency websites and, although very minimal, also from participant narratives. The services/agencies reviewed were initially selected from MSD database lists and from a key word google search using the terms "Pacific" or "Pasifika" and "sexual violence" and "service", "programme", "agency", and/or "organisation".

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6 See Vaioleti (2006, 2013) for a Tongan understanding of 'noa' in relation to talanoa. Noa here relates to Polynesian ideas of ordinariness, to the profane and/or temporal and to . In Polynesian cultures 'noa' is often used in contradistinction to the notion of tapu. To tala-noa is to talk about things that may be either or both ordinary and tapu. If there are tapu elements involved, this is recognised and through use of appropriate ritual or ceremony can be made accessible by the ritual or ceremonial lifting of the tapu.

7 As per Karen Barad's idea of response-ability (c.f. Barad, 2012; Kleinman, 2012).

8 The cultural nuances of the concept of tapu are more familiar to the western mainstream mind than those of noa. Tapu in this context is used to refer to ideas of the extraordinary, the spiritual, sacred, beyond human understanding, and thus to that which ought to be protected and treated with care, caution, respect and humility.

2.2 Approach to Literature Review

The literature search comprised a systematic search of five open access academic literature databases – EBSCO Host; ProQuest; JSTOR; Informit; and Google Scholar – and supplementary searches of grey literature (see appendix 7.4). Grey literature is defined as sources not available via online open access sources, but through university library borrowing systems or direct contact with authors. They include, for example, literature produced by organisations outside usual commercial or government publishers, such as NGO submissions made to government or parliamentry committees.[9]

Key search terms included: "sexual violence", "sexual abuse", "sexual assault"; "Pacific", "Pacifica", "Pasifika", "Pasefika", "New Zealand", "Aotearoa", "New Zealand workforce", "Aotearoa workforce".

2.3 Online Questionnaire

The online questionnaire contained three sections: a demographic section, a section for those who at the time were current members of the Pacific SV workforce, and one for those who were past members (see copy of online questionnaire at appendix 7.1).

Questionnaire items consisted of a mixture of open and closed ended questions. A total of 29 items were provided. The questionnaire was structured into seven parts:
(1) Demographics,
(2) Employment history,
(3) Pacific clientele,
(4) Pacific values, beliefs, practices, models, and frameworks,
(5) Workforce support,
(6) Personal work goals and aspirations, and
(7) Closing comments.

The questionnaire was anonymous, and pilot tested with TOAH-NNEST's Pacific steering group members. A link to the final version of the questionnaire was sent to potential participant groups across Aotearoa NZ via third parties (i.e., by people outside the research team). These third parties were:
(a) MSD's project management team,
(b) TOAH-NNEST's Pacific steering group networks, and
(c) the following professional associations:

- NZCCA (NZ Christian Counsellors Association),
- NZAC (NZ Association of Counsellors),
- PCC (Pasifika Counsellors Collective),
- NZAP (NZ Association of Psychotherapists),

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[9] For example, we are indebted to the Pacific Steering Group (PSG) & Pasifika Workforce Network Sexual Violence (PWNSV) of Tauiwi Caucus at Te Ohaakii a Hine National Network Ending Sexual Violence Together (TOAHNNEST) alliance for permission to sight and read their submission and to append it to this report. See appendix 7.5. Please note that to align to the formatting of this report the pagination of the original PSG & PWNSV submission document has been removed. The page numbers referenced in this report when citing this document relates to the original document.

- NZPsP (NZ Psychological Society), and
- ANASW (Aotearoa NZ Association of Social Workers).

Participants (or respondents) were recruited in two phases. First, through a third-party email process using the above networks and professional associations. Then, because this produced a very low response rate (only 13 responses received a month after it was released), a second proactive follow-up phase was conducted. This involved the MSD project management team and TOAH-NNEST Pacific steering group chair inviting representatives of Pacific SV agencies to two online zoom sessions where a project presentation and 'Q and A' session with research team was held. One session was coordinated and facilitated by the Cause Collective and involved a coalition of frontline providers for Pacific peoples affected by SV. The other session was organised and facilitated by TOAH-NNEST's Pacific steering group coordinator. Both sessions were held via zoom and were well attended (both had approximately 8-10 representatives from different services). The second phase increased the number of respondents to the questionnaire significantly.

The questionnaire did not require participant names or organisational affiliations, to ensure the questionnaire data was anonymous. The online questionnaire was voluntary and at no point were participants required to disclose identifying information. The first page of the online questionnaire provided detailed information about the aims of the study and key sections of the questionnaire. This included contact information for the research team should questionnaire participants wish to participate in the talanoa sessions. The onus was on them to make contact in order to protect their anonymity.

This is the first questionnaire of its kind for this workforce. Therefore, there was no 'gold standard' to aim for regarding an ideal response rate. Notwithstanding, a recent study by PSG & PWNSV (2021, p.5) suggests that currently there are approximately fifty (50) "specialised Pasifika workers" working in the Aotearoa NZ SV sector. The literature review and project findings' discussion sections address the issue of who and what constitutes a 'specialised Pasifika SV worker'.

After two months when the questionnaire closed, there were 50 online responses recorded by the Qualtrics platform. However, 10 of those responses were not useable (i.e., they had answered no questions). The final data set for the questionnaire is therefore based on a total of *40 responses* only.

The project's time and budget constraints meant that the questionnaire design was kept simple and analyses descriptive only.

2.4 Talanoa Sessions

Individual and focus group talanoa sessions were conducted with 13 participants to explore their experiences as members of the Pacific SV workforce of Aotearoa NZ (see copy of talanoa topic guide at appendix 7.2).

Participants were recruited through the same third-party recruitment method employed for the questionnaire respondents. Talanoa participants were sent email

invitations through the third parties listed earlier. The expectation was that the third party would forward the email invitation to all members of their organisation or agency. The onus was on participants to make first contact with the research team. However, similar to the online questionnaire, because of the very low response rate to the first approach (i.e., after two months there were less than 10 participants secured), a second more proactive recruitment approach was used. This consisted of a combination of the snowball recruitment method[10] whereby (a) the team reached out to potential participants recommended by existing participants, or (b) because members of the research team were also part of the Pacific SV workforce, they were drawn on to approach and invite their networks to participate. The latter was considered ethically appropriate within the Pasifika talanoa and vā frameworks described above, where existing trust-relationships and response-able researcher practice was brought to the fore to contextualise, counteract and/or make transparent potential power-relations, bias, or undue obligations between researcher and participant.

Due to Covid-19 lockdown restrictions, all talanoa sessions were facilitated via the online zoom platform. Seven individual talanoa sessions and two group talanoa sessions of three participants each were conducted. This brought the total number of talanoa participants to 13.

A talanoa topic guide was designed and piloted (see appendix 7.2 for copy of talanoa topic guide). Three research team members facilitated one or more of the talanoa sessions. Two were experienced talanoa researchers, the other was a novice who received training in the talanoa method before carrying out their session. All talanoa sessions were transcribed verbatim and transcripts were kept securely on password protected electronic files held by the project's two lead researchers.

The main aim of each of the talanoa sessions was to explore the following topic areas:

1. Participant's personal working background,
2. Participant's practice approach,
3. Participant's experience of support to implement their practice approach, use of sexual violence trauma care, recovery and resilience models, and self-care, and
4. Participant's own work goals and aspirations.

2.5 Approach to writing recommendations

As part of our Pacific talanoa research methodology the project team felt it important to include Pacific SV workforce stakeholder representatives in a talanoa on the preliminary findings to encourage active and meaningful interactions between Pacific SV researchers and Pacific SV frontline, policy, and advocacy workers. This meant holding off on writing the recommendations until after this sense-making talanoa exercise. This talanoa meeting was held in 23 November 2021. The outcomes from this

[10] The snowball method is a common method used for recruitment of participants for qualitative studies. It involves current participants who have already agreed to participate in the study suggesting new participants for involvement in the research. These new participants would be assessed for eligibility and if they meet the criteria their contact details would be sought, and then they would be approached. See Parker, C. (2020). *Snowball sampling.* London: Sage.

talanoa helped nuance the final version of this full draft report, especially the recommendations. This approach to checking sense-making and to writing the recommendations proved beneficial for all - the research team, MSD oversight team, and Pacific SV Stakeholder participants in that it helped to further triangulate the baseline findings of this report and foster meaningful conversations. It also gave Pacific stakeholders another opportunity to re-emphasise the urgency of this Pacific research work and its significance, to better understanding the needs of the Pacific SV workforce. Below are some comments raised by participants at this sense-making talanoa session, expressing their sense of urgency for this research and highlighting what they see to be some key issues for address.

"It is critical that research reflects the crisis nature. We want Pacific specific services but at the same time can't let mainstream off the hook. We need to force the sector to do better and ensure there's a Pacific lens over all work that happens."

"Pacific staff leaving are such a big loss to services. A lot of Pacific people who have left the workforce do so with their experiences of encountering racism and systemic barriers, then those aren't captured."

"This research can help [un]cover experiences about how Pacific staff members aren't being invested in for leadership opportunities. Pacific staff are often very committed but let down by organisations who don't understand the value they bring".

2.6 Approach to managing confidentiality concerns

The research team acknowledges that where there are small numbers of participants from small, connected communities or population groups the risk of participants being identified, and of the study breaching confidentiality, is high (Damianakis and Woodford, 2012). We also acknowledge that with politically sensitive topics like sexual violence, risking identification may have serious negative ramifications for participants. However, we also recognise Juan Tauri's caution (2018, p.9) around hegemonic universalised institutionalised ethical codes that misunderstand and marginalise Indigenous 'cultural consent' factors.

While our participants' rights to confidentiality are important to us, those rights must be understood within the specific cultural contexts to which they and the researchers belong. For us this meant carefully balancing the concerns of our Pacific cultural ethics that informed the informed consent of our participants, our talanoa methodological approach, and our vā relationships, alongside the wider concerns of the universally applied research confidentiality principle. We decided on balance that it was appropriate in the interests of transparency and honouring 'cultural consent' to information (such as in Table 12 on the ethnicity, age and job status (practitioner or managerial) of our talanoa participants, and that to honour the protective aspects of the principle of confidentiality, we removed from quotes any specific reference to who the quote belongs to. This significantly reduces the risk of identifying participants from our small and connected Pasifika community in Aotearoa NZ while at the same time makes transparent the overall breakdown of the ethnicity, gender and practitioner/manager status of participants. The same balancing principle was applied to the decision to (a) not suppress small respondent numbers, and (b) include non-sensitive but specific

qualitative references made by questionnaire participants (as in Table 1 reference to health promoter on radio) as they were in their original questionnaire comment or response.

2.7 Ethical Approval

The project received full ethical approval from the University of Auckland's AHREC (Auckland Health Research Ethics Committee) in July 2021.[11]

[11] See participant information sheet at appendix 7.3 for how the project addressed research ethical concerns.

3.0 Research Findings

This section describes the research project findings by source type: literature review findings, online questionnaire findings and qualitative talanoa findings. These are described in that order.

3.1 Literature Review Findings

The information generated from our literature review is organised into ten (10) thematic finding areas, listed as statements below.

1. Levels of reporting of Pasifika SV offending and victimisation is low as are the levels of Pacific engagement in SV research.
2. Pasifika SV prevention approaches are culturally nuanced or specific, strengths-based, healing-focused, and family and/or community-led.
3. Māori and Pasifika sexual violence workforce development concerns and modalities of healing are aligned and connected.
4. Family violence, sexual violence, and sexual harm are interconnected.
5. The ambiguities of sex, sexuality and consent make sexual violence a complex issue to address.
6. There is a dearth of evidence-based information on who constitutes the Pacific SV workforce and why, their experiences and support needs, and this should be addressed.
7. A co-ordinated national Pasifika SV workforce network is needed, is emerging and is currently made up of less than 50 Pasifika SV 'specialists' of Pasifika descent.
8. The current Pasifika SV workforce experience significant 'compassion fatigue'.
9. Workforce inequities, inappropriate supervision and a lack of leadership and promotion pathways have negative implications for Pasifika workforce retention.
10. There is a need for a new Pasifika acumen, one that is agile and creative but also grounded, that can keep up with the constantly changing dynamics of Pasifika sexual violence work without losing the integrity of Pasifika values.

3.1.1 Levels of reporting of Pasifika SV offending and victimisation is low as are the levels of Pacific engagement in SV research

Surveys over the years have attempted to ascertain rates of family and sexual violence incidents in Pacific women and Pacific youth. "The 2001 New Zealand National Survey of Crime Victims found that 23% of Pacific women had experienced family and intimate partner violence (IPV), and 12% had experienced violence from people they knew" (Percival et al, 2010, p.6). The survey also asked participants of their experience of sexual interference or sexual assault over their lifetime, and before the age of 17. Although some Pacific respondents in this 2001 crime victims survey did respond to this question, the response rate was very low[12] (Morris and Reilly, 2003). For Pacific

[12] Five percent, although not as low as Māori women at one percent.

youth, "The New Zealand National Youth 2007 survey found that 13 per cent of Pacific female secondary students and six percent of Pacific male students had experienced one or more episodes of unwanted sexual behaviour from another person in the last 12 months. Of those, 27% said the abuse was severe and more than half had not told anyone" (Percival et al., 2010, p.6).

Our review of violence studies with New Zealand-based Pacific respondents found that men are more likely to commit sexual violence offences than women, and women are more likely to be victims of sexual violence than men (see McPhillips et al, 2002; Percival et al., 2010; Malungahu & Nosa, 2018). However, women, though few, are also perpetrators of sexual violence, and men and LGBTQ+ peoples are also victims (Anae et al, 2000; Wharewera-Mika and McPhillips, 2016). Carswell et al (2019) find that very little research exists on the impact of sexual abuse on Pasifika men. Kingi et al. (2009) note that while few Pacific women report sexual violence, even fewer male and transgender sexual violence victims will report to the police (see also Dickson, 2017; Brown-Acton and Peteru, 2014).

Some findings reflect an overlap between family violence and sexual violence within Pacific communities. The Pacific Island Women's Health Project (PIWHP, in McPhillips et al. report, 2002) stated that "Within Pacific communities in Auckland/Tamaki Makaurau, sexual abuse is mostly perpetrated by family members, acquaintances and people within the community. Perpetrators often span the range of male relatives, including uncles, grandfathers, and cousins. There may be multiple incidents of sexual abuse by multiple perpetrators within the family. Abuse is usually not reported to authorities even if disclosed" (p.98; see also Siataga, 2011; New Zealand Royal Commission of Inquiry, 2020).

Between the years 1997 and 2006, New Zealand police apprehension percentages for sexual violence offending in Pacific youth revealed a disturbing increase in levels compared to the same statistics for Pākehā and Māori groups. Pacific youth sexual violence offending was 0.42% in 1997 and 0.66% of their overall violent offending apprehensions for the study years compared to 0.27% and 0.44% for Māori, and 0.69% and 0.77% for Pākehā. These statistics suggest that there is both low reporting of Pacific sexual violence offending in Aotearoa NZ and low Pacific engagement in sexual violence research. A breakdown of different Pacific offending and victimisation patterns by gender, age and other variables is not yet fully or easily available (see Ioane, et al., 2013).

McPhillips et al. (2002) found significant underreporting of Pacific sexual abuse or violence in their study of sexual violence in Tamaki Makaurau/Auckland, especially where the abuse or violence happens within family or interpersonal contexts. This was affirmed by Kingi et al.'s study (2009) which found that Pasifika victims of sexual violence were the most reticent to report to police compared with Māori and New Zealand Europeans. There remains an information gap as to why this is so.

"In this study, Pacific participants were least likely to report to the Police (1 out of 8), followed by Māori (9 out of 21). New Zealand European participants were most likely to report (19 out of 37)" (Kingi et al., 2009, p.57).

In relation to reporting sexual violence within families, namely sibling incest, McPhillips et al (2002) found that brother/sister incest is the most commonly reported and is usually perpetuated by the older sibling (Araji and Boesk, 1997, cited in McPhillips, 2002, p.93). Araji and Boesk (ibid) identified four main factors contributing to the underreporting of incest, all of which have analytical value for assessing the underreporting of Pasifika incest cases. Namely:
(a) a tendency by parents (especially in sibling or close cousin incest) to label sexual behaviour as experimentation or exploratory, and therefore not serious enough to report,
(b) family members are generally more tolerant of incestuous relations between siblings when siblings are young, close in age, and where violence is not a factor – putting it down to natural experimentation that is not harmful,
(c) parents who discover brother/sister incest are unlikely to report a sexually abusive child, and/or
(d) an assumption that trauma is minimal because generational boundaries have not been violated.

Some underreporting is a result of personal beliefs about violence. Koloto and Sharma (2005) noted a case involving a Pasifika woman who did not report marital rape because she thought that rape was not possible within a marriage situation. Additionally, she believed that if she did report her husband that this would adversely affect her children and the possibility of that was enough to deter her from reporting him and leaving him. The PIWHP (in McPhillips et al., 2002) noted that for some of the Pacific women they worked with, many believed that sex was a wife's "marital obligation" (p. 99). Hand et al. (2002) similarly noted that Pacific women in their study considered violence within marital or marital type relationships as normal.

Moreover, McPhillips et al. (2002) have recorded migrant scepticism of the principle of professional confidentiality. They suggest that because of this, along with the low rates of Pacific sexual violence reporting and high prevalence of religious and cultural beliefs preventing migrants from talking openly about sex (even in a professional setting), reporting numbers are kept low. Disclosure of sexual violence happens usually only after the victim/survivor has established a trust relationship with those they disclose to (ibid). For SV victims/survivors, once a disclosure is made it can take many therapy sessions before healing begins and much depends on the trust relationship between survivor/victim and the SV worker (McPhillips et al., 2002; Wharewera-Mika and McPhillips, 2016; PSG & PWNSV, 2021; see also Vaka et al, 2016; Earl et al, 2014; Te Pou o te Whakairo nui, 2009).

3.1.2 Pasifika SV prevention approaches are culturally nuanced or specific, strengths-based, healing-focused, and family and/or community-led

PSG & PWNSV (2021), Pasefika Proud (2020) and *Te Aorerekura* (New Zealand Government, 2021), each find that because Pasifika continue to live in closely knitted communities in Aotearoa NZ, where traditional cultural understandings of family prevail, they are more likely to respond positively to prevention strategies and crisis and justice approaches that give due regard to traditional or indigenous Pacific values and foundations. The newly emerging Pasifika SV workforce network currently led by

Te Ohaakii a Hine – National Network Ending Sexual Violence Together (TOAH-NNEST)'s Pacific steering group draws a link between these foundations and those within Aotearoa's tangata whenua or Indigenous kaupapa Māori approaches (PSG & PWNSV, 2021).

Pacific approaches to sexual violence prevention and intervention differ from mainstream approaches in that they are culturally informed and nuanced, strength and healing-focused, and led by the family or community. This is reflected in the Pasefika Proud the *Pathways for Change 2019-2023* framework, which envisions "Pacific families and communities [that] are safe, resilient and enjoy wellbeing" (Pasefika Proud, 2020, p.4). Its theory of change centres on the Pacific family and their communities of support, noting that this is where "identity, belonging and sacred relationships are nurtured and protected" (ibid). However, as noted in the earlier section, violence can and does occur within family spaces. To make proactive positive changes away from family violence, capable of preventing the reoccurrence of violence, the framework contends that there exist Pacific cultural values with unique transformative powers that can be harnessed to create or inform preventive strategies and interventions that disrupt and heal intergenerational Pacific cycles of violence (ibid; see also Fa'alau and Wilson, 2020; Ministry of Social Development, 2012; Crichton-Hill, 2001). Vā and tapu are examples of such concepts, which are recognised in the recently launched *Te Aorerekura* family violence and sexual violence strategy.[13]

"For example, in different Pacific cultures, violence is understood as a fundamental disruption of the va (sacred space) or violation of tapū (forbidden and divine sacredness) of people that require actions to protect, heal and restore them. It is essential that responses to family violence and sexual violence are grounded in the culture and experience of the people, family or whanau who need support" (New Zealand Government, 2021, p.14, diacritics in original).

The literature reviewed suggests that the transformative power of Pacific concepts like tapu and vā lie in their abilities to make Pacific worldviews visible and comprehensible in mainstream policy spaces. The mere use of non-English Pacific indigenous words signals a different worldview. This is a necessary first step in the fight for policies and interventions that can recognise Pacific solutions that are values-based, community-led, and family-oriented (Pasefika Proud, 2020; McRobie in Wharewera-Mika and McPhillips, 2016). Author use of these concepts seek to bring about appropriate recognition to Pacific family violence and sexual violence frameworks, models or approaches that use and have long advocated for Pacific family-oriented, community-based solutions to violence that privilege Pacific concepts, values, methodologies and worldviews (e.g., use of the *Fonofale* name and model – cited in Ministry of Health, 1998; Thomsen and Tavita, 2018; Suaalii-Sauni, et al., 2009; the various *Vā* approaches – cited in McRobie in Wharewera-Mika and McPhillips, 2016; Ministry of Health and Le Va, 2014; and the *Nga Vaka o Kainga Tapu* frameworks – detailed by the Pacific Advisory Group, Ministry of Social Development, 2012).

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[13] The strategy, titled "Te Aorerekura: the enduring spirit of affection: the national strategy to eliminate family violence and sexual violence" (New Zealand Government, 2021), was launched on7 December 2021.

At present there is no specific Pacific sexual violence service model or workforce development framework in use in Aotearoa NZ (McRobie in Wharewera-Mika and McPhillips, 2016). According to McRobie (2016) the current Pacific SV workforce draws predominantly from the Fonofale model. It is also the most cited Pacific framework/model of health in the literature, created by Fuimaono Karl Pulotu-Endemann (see Ministry of Health, 2008, appendix pp.29-30). The model uses the image of a Samoan fale (house) as metaphor to depict and name what is important to Pacific peoples' health in Aotearoa NZ, and how they draw connections between key concepts common across Pacific value systems to frame Pacific wellbeing.

"The Fonofale model incorporates the values and beliefs that many Samoans, Cook Islanders, Tongans, Niueans, Tokelauans, and Fijians had told Fuimaono Karl during workshops relating to HIV/AIDS, sexuality and mental health from the early 1970s to 1995. In particular, these groups all stated that the most important things for them included **family, culture and spirituality**. The concept of the Samoan fale, or house, was used as a way to incorporate and depict a Pacific way of what was important to the cultural groups as well as what the author considered to be important components of Pacific peoples' health. The Fonofale model incorporates the metaphor of a house, with a roof, [posts] and foundation" (Ministry of Health, 2008, p.29, bold inserted).

Other Pacific models/frameworks/approaches cited by the literature reviewed, though less frequently, included:

- Seitapu Pacific clinical and cultural framework (Le Va, 2009),
- Teu le Va approach (Anae, 2016),
- Te Vaka model (the canoe model; Agnew et al., 2004, p.11; Suaalii-Sauni and Samu, 2009),
- Faafaletui model (a Samoan dialogue model; Agnew et al., ibid; Tamasese et al., 2005),
- Traditional healing treatment models (Agnew et al., ibid),
- Fonotaga a le Aiga approach (a Samoan meeting; Chauvel, 2012, p.12),
- La'u Puletasi model (utilising the Samoan metaphor of a traditional female dress; ibid),
- Aiga model of care (Samoan family model of care; ibid),
- Vaka Atafaga model (a Tokelauan canoe model; Kupa, 2009).

Each of the above models/frameworks/approaches affirm the importance of family, culture and spirituality to Pacific peoples. They assume an ethos of collective and familial care and responsibility, principles of never-ending service and reciprocity, of love and compassion, all implicit in the vā. These principles are understood and practised in culturally-nuanced ways specific to the ethnic Pacific group at hand. As Malatest International (2018) attests, the need to understand differences as well as similarities across Pacific groups is important when de-escalating or preventing violence.

"When we look at Pacific family violence interventions, programmes, understandings and activities to address this [family violence] phenomenon – such as Pasefika Proud

and the Nga Vaka o Kāiga Tapu (conceptual frameworks and training programmes) – we know that culture matters and understanding Pacific family violence within ethnic-specific and cultural worldviews provides **critical insights** to strengthen prevention and interventions that resonate with Pacific peoples." (Malatest International, 2018, in Pasefika Proud, 2020, p.20, bold inserted).

Vā and tapu are concepts embedded in frameworks developed for different Pacific professions, from health and education to social work and justice (Mafile'o, 2006; Airini, 2010; Pacific Advisory Group, 2012; McRobie in Wharewera-Mika and McPhillips, 2016; Ravulo et al., 2019; Redman-McLaren and Veukiso-Ulugia, 2019; Suaalii-Sauni et al., 2021; Wartzburg et al., 2003). The prevalence of sexual violence within Pacific families means that core vā relationships within the family have been violated and brought into tension with each other. Here the family space can and does become for victims of sexual violence a space "of terror and dysfunction", one that engenders confusion, pain, "loss of belonging and identity" (Pasefika Proud, 2020, p.4). Critically exploring the conceptual and practice parameters and nuances of different Pacific understandings and practices of the vā has potential to facilitate deep access to the 'critical insights' suggested by Malatest International (2018), and into the complexities of the terror and dysfunction, and by extension into the rethinking of appropriate interventions, implied above.

Pulotu-Endemann et al.'s (2007) point, that cultural awareness and sensitivity to Pacific cultural contexts when working with Pacific peoples affected by mental health problems in clinical and organisational contexts, applies equally to sexual violence. In the Pulotu-Endemann et al. (2007) report they reflect on a story told by a health service's matua (elder) advisory group member about incest in a traditional Indigenous Fijian context. The incest, she explained, was seen by some as 'normal' among the aristocracy or high born. Such occurrences were considered and promoted not as sexual violence but as cultural duty. Should anyone object, the objections would be dismissed or silenced on these grounds. Here, explaining how to navigate between protecting practices considered 'traditional' on the one hand, and individual human rights and freedoms on the other becomes messy and emotionally volatile (see also Robertson et al., 2007). In such contexts, stigma, shame, and silence abound, and understandings vary on how and where sex, consent, tapu and vā (ought to) operate. Pulotu-Endemann et al's report (2007) states:

"…Although traditionally shunned by most families, incest and/or familial rape was commonly practiced in traditional Fijian society by men of chiefly rank. Victims would include both women and children, many of who were usually members of the same nuclear or extended family as the chief. … Single female victims who became pregnant as a result of such incest or familial rape were often immediately married off to one of the high chief's subjects within the same clan or mataqali before the pregnancy was widely known. This was to prevent shame and retribution upon the perpetrating chief. The link between the impact of incest and familial rape of this kind on the various parties involved and any mental health issues suffered by them is speculative at this point. The common occurrence of such a practice in traditional times raises similar speculation over the prevalence of related mental health conditions. It was common for women who endured these circumstances to become mentally unwell from the shame incurred. The shame invariably remained with her despite her nuptials. Child victims

of incest and/or familial rape were similarly believed to become mentally unwell" (p.48-49).

Although speculative, the quote indicates a context worth following up on in terms of the acceptability and/or prevalence of this alleged chiefly privilege. No up-to-date information was found in the literature reviewed on this specific point. The quote makes visible a suggested context of sexual power dynamics, and of associated shame and stigma, from within an indigenous Pacific society not often written about. It highlights the kinds of overlapping issues extant within.

Because of the respect that Pacific cultures give to the family institution and their chiefs or leaders, when sexual abuse occurs it is often shrouded in secrecy (Percival et al., 2010; UN ESCAP, 2009; Sumeo, 2004). To deal with the stigma, shame, and silence, Mataia (2016) finds that because sexual violence is potentially demeaning of a person's mana (both the victim's and the offender's) and that of their respective families, knowing how to talk about sex and sexual violence requires cultural knowledge and competence (see also Pulotu-Endemann and Falefa, 2017). Humour, when used appropriately, is seen as a useful tool to combat the awkwardness of approaching sex-related topics with Pacific families (McPhillips et al., 2002). One source describes how in Niuean and Samoan cultural norms, humour, metaphors, allegories and storytelling (faagogo) are used to help address sex and sexual abuse matters. They report:

"In the Niue culture, sex is also not discussed openly, and similarly it is discussed only by way of humour…. [For Samoans] messages are also conveyed through falea'itu (Samoan=comedy)(sic). Strong messages about rape can be presented in that medium. A further example of a way for raising awareness is the use of fa'agogo (Samoan=bedtime story)(sic). This is a metaphorical way of conveying the message… There is no one word for rape. The Niue words that have been used in relation to sexual abuse include, fakapilo, takiva (to dirty something). Samoan words include fa'amalosi (to force) and pule le uma ([lit. 'authority that does not end' for] child sexual abuse)" (McPhillips et al., 2002, p.100).

According to Mataia (2016), when working with Pacific sexual violence cases, social workers must be prepared to address, speak to, negotiate and work through the gravity of unspeakable sexual violence acts committed but without necessarily naming them. This is, as Pulotu-Endemann et al (2007) have noted, at least in part, because of the tapu and gendered sensitivities or taboos ascribed to sex and to talking about sex by Pacific cultures (see also Griffen, 2006).

"The issue of sex is tapu and sensitive in the Pacific context. In particular if the discussion involves both men and women especially if they are from the same family (e.g., brother and sister or son and mother). The specialist worker should have the ability to ensure discussions on issues of sex and sexuality are done in a sensitive manner and in a culturally safe environment. [This] can be achieved by doing it in a gender specific forum or if there is a mix of genders and age groups (young and old) that the appropriate respectful and less graphic language is used" (Pulotu-Endemann et al, 2007, pp. 36-37).

Carmel Peteru (2012) refers to how the 'culture of silence' around sex in the Pacific discriminates against Pacific women and children, and particularly those living in situations of social and economic deprivation. Peteru (2012) suggests that sadly the low status of women and children in the Pacific increases the likelihood that they will be exploited and/or abused, physically and/or sexually. Peteru notes that because are at the bottom of most modern Pacific Christian social hierarchies, and males at the top, they are expected to accept roles of submission to 'senior' males, from husbands to fathers, brothers, chiefs and/or family elders. Where this is the case, Peteru argues that "girls may have difficulty rejecting [their] sexual advances and are less likely to recognise that they are being abused or exploited" (Peteru, 2012, p. 18; see also McPhillips, 2002).

Te Paa Daniel (2018) bravely calls out exploitative male behaviour within the Pacific church and clergy hierarchies, arguing that they have been either active or complicit in perpetuating male violence against Pacific women for too long. The Pacific church (largely Christian) plays a significant role in the lives of many Pacific peoples in Aotearoa NZ (see Census 2018 statistics, see also section 1 of this report; see also Alefaio-Tugia and Havea, 2016; Makasiale et al., 2007; Filemoni-Tofaeono and Johnson, 2006). Pacific women from cultures with strong religious beliefs in the subservience of women to men have had considerable pressure put on them to forgive their perpetrators. Offender remorse and preventing family disunity are cited as reasons for Pacific victims to forgive their assailants (McPhillips et al., 2002; McRobie in Wharewera-Mika and McPhillips, 2016). While forgiveness may be appropriate in some cases, in others it may not, at least not straight away, which is something that even Indigenous Pacific restorative justice approaches can find difficult when families want immediate resolve (McRobie in Wharewera-Mika and McPhillips, 2016). This is something Pacific sexual violence frameworks will need to address.

3.1.3 Māori and Pasifika sexual violence workforce development concerns and modalities of healing are aligned and connected

The Pacific Steering Group and Pasifika Workforce Network Sexual Violence submission to government (PSG & PWNSV, 2021) notes a historical relationship between Pasifika and Māori, evident in the claim that they have a relationship that "spans thousands of years in this Moana", share "modalities of healing" that are "similar and closely related" and "align more closely …than with mainstream healing practices" (p.5). The submission also notes that the historical relationship between the Crown and Māori serves as a useful lesson to Pasifika about the challenges of gaining due recognition for Pacific values and paradigms in public policy settings.

"Pasifika people see the broken relationship between the Crown and Kaupapa Māori (sic). Constant undermining of Kaupapa Māori creates glass ceilings for what and how Pasifika can consider real partnerships to look like. Te Hau Tangata [circa, 2019] has a good definition of violence for us" (ibid, p.8).

Formal recognition of a shared Polynesian heritage between Māori and Pasifika that at the same time honours Māori as tangata whenua of Aotearoa NZ, enables opportunity for Māori and Pasifika to share in the strengths in their Indigenous healing models

without compromising the vā between them as tangata whenua and tauiwi in Aotearoa NZ.

3.1.4 Family violence, sexual violence, and sexual harm are interconnected

Te Aorerekura (New Zealand Government, 2021) assumes that where sexual violence or harm is present, other forms of violence or harm are most likely to also be present. Given the high incidences of sexual violence occurring in family settings across cultures and countries (World Health Organisation, 2013; Cripps and McGlade, 2014; Gavey and Farley, 2021; New Zealand Government, 2021; Paulin et al., 2018) the coupling of family violence or domestic violence with sexual violence makes sense. This is even more so for Pacific peoples who consider sex and family relations sacrosanct (Percival et al. 2010; Pacific Advisory Group, 2012; Pasefika Proud, 2020).

Cripps and McGlade (2008) remind us that context is everything and that there is no single cause for family violence and sexual violence, but rather "a multitude of inter-related factors" (p.242). In exploring the case of Indigenous peoples in Australia, and in Canada, they contend that strengthening victims'/survivors' and offenders' community and family help systems will be more effective than sending family violence and/or sexual abuse offenders to prison (ibid, p.234). The implication is that families and communities or support people know their people best and are more likely to care about what happens to them in the short and long term. This is of relevance to all peoples, including Pacific.

Robertson et al.'s (2007) comprehensive and moving reports (volumes 1 and 2) on women's experiences of protection orders in New Zealand included Pasifika participants. Their findings support an analysis of how family or domestic violence (including intimate partner violence) intersects with child abuse and sexual violence. They found that "men's violence against women is often accompanied by violence against their children", even sexual violence (ibid., p.247, volume 2). They note how in one of their Pasifika case studies, Mele (a pseudonym) was sexually and physically abused by her father and witnessed horrific physical violence against her mother since she was at least seven years old. In analysing the gaps between law and practice, Robertson et al. (2007) identified that there exists a serious gap between "women's experience of violence, intimidation and abuse and the way the system respond[s]" (p.6, volume 1).

3.1.5 The ambiguities of sex, sexuality and consent make sexual violence a complex issue to address

Robertson et al (2007) note that in relation to violence against children in Aotearoa NZ , the Care of Children Act 2004 limits violence against children to physical and sexual violence. However, as Gavey and Farley (2021) and Robertson et al. (2007) discuss, sexual violence also includes psychological and emotional violence, online stalking, distribution of photographs without consent for sexual purposes, and sexual harassment and grooming, where no physical sexual assault occurs. With most members of Pacific families today having easier access to cell phones and online platforms, especially to social media (Brimacombe, 2017), and many still unfamiliar

with how online systems work, opportunities to be unknowingly exploited by sexual predators, known and unknown, have increased, putting Pacific peoples at considerable risk.

Gavey and Farley (2021) also caution policymakers against being too quick to replace 'sexual violence' with 'sexual harm'. They argue that sexual violence is used as "an umbrella term for a wide spectrum of different forms of sexual exploitation, coercion, abuse, and violence" (ibid, p.229) and is flexible in ways that 'sexual harm' is not. They found that over the last twenty years sexual violence has gained significant currency, coherence and presence in New Zealand policy and decision-making spaces, giving "community-based advocates and service providers significant voice at the policymaking table" (ibid, p.231). They cite the important involvement of community networks like TOAH-NNEST and conclude against the need to move away from the term sexual violence; advocating that sexual violence, unlike harm, keeps systemic and structural violence – the 'unseen' or hard to see violence – on the table. This is important for all Indigenous, minority, vulnerable and/or marginalised peoples who are as much affected, if not more so, by systemic and structural bias or violence as by physical, psychological, and emotional violence.

Pacific cultural constructs relating to sexually abusive behaviour can be complex and that complexity is often left underexamined because of the taboos associated with sex. This creates situations where these myriad ambiguities surrounding sex, sexuality and consent act to hinder the effectiveness of interventions and the achievement of true healing. An example of an ambiguous Pacific sexual offending construct can be found in the notions or phenomena of moetolo ('sleep crawler') and toso teine (a person who 'pulls' – toso – girls for sex). These were discussed by the male participants of Anae et al's (2000) study of Samoan men's roles and responsibilities in reproduction. The moetolo is commonly described as someone (usually a male) who crawls "at night to a woman's house with sexual malintent" (Percival et al. 2010, p.11). Percival et al. (2010) point out that the moetolo of Samoa is similar to the motoro of the Cook Islands, the moetotolo of Tokelau, and the tolopo of Niue (ibid). Margaret Mead, in her famous 1928 text, *Coming of Age in Samoa*, describes the moetolo[14] as "the curious form of surreptitious rape… sleep crawling, resorted to by youth who find favour in no maiden's eyes" (1928, p.88). This is a reading of the moetolo that Seiuli (2016) draws on and privileges to help explain the sexual deviance and offending of his Samoan client Fa'asala (a pseudonym), who is imprisoned in New Zealand for his "hands-off" sexual violations against young girls in his neighbourhood while they slept.

However, Sailiata (2014) records a relatively recent discussion of the moetolo by Samoan academics from the National University of Samoa who presented at the Pacific History Association conference in Wellington. These academics claimed that the moetolo is a phenomenon wider than that suggested by Margaret Mead (1928), Seiuli (2016) and others.[15] They claimed that there are different moetolo scenarios, not just that involving a 'surreptitious rapist' with clear intent to commit rape. One such

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14 She uses the longer spelling *moetotolo*.

15 See Seiuli's (2016) article for references to Tuvale's (1968) and Bradd Shore's (1975) accounts of the moetolo, for example.

alternative scenario involves males engaging in a male bravado game, like a dare, where the intent was not to rape anyone but more to see if they could crawl into a girl's bed chambers without getting caught. This scenario is arguably alluded to in the words of the moetolo song, known to the above Samoan academics and commonly sung in 1950s-1970s Samoa, and supported by Samoan male informants. Another scenario involved couples who are having a clandestine relationship and decide to rendezvous in her fale (house) but are almost caught by her male kinfolk had it not been for her cry of 'moetolo' which distracted them from identifying her beau. In this case the moetolo label is used as a ruse. These scenarios show how cultural constructs of sexual deviance like the moetolo might be a lot more fluid or multilayered than at first presumed. The different applications highlight the need for more rigorous research into the complexities and multiplicities of meaning potentially present in Pacific sexualised constructs that captures nuance and can draw relevant links to policy and practice imperatives.

The issue of consent is pivotal to criminal proceedings against sexual violence or abuse (Robertson et al., 2007). Modern criminal codes or laws stipulate a minimum age of consent to sexual relations. In New Zealand sexual relations with a person under the age of 16 years is considered statutory rape regardless of custom or cultural convention and offenders are strictly liable if caught, even if the minor allegedly consented or had parental consent to get married before 16 (as is sometimes the case with arranged marriages or traditional cultural betrothals outside of New Zealand).[16]

The jurisprudence of modern strict liability crimes includes the view that there are certain crimes (such as the sexual violation of a minor or 'driving while under the influence'[17]) where intent and/or consent is believed irrelevant. In these situations, the argument is that cultural relativism is to be avoided in order for legal standards to be met and fairness and justice for all to be seen to be upheld (ibid; see also Kim, 1997; Percival et al, 2010). However, migrants bring with them attitudes to sex and patterns of sexual behaviour that are shaped by the social, religious, and political contexts of the countries they came from. Understanding these attitudes and behaviours can help nuance Pacific sexual violence prevention strategies and crisis intervention approaches.

Understanding age of consent across the Pacific, for example, can help give some context to Pacific sexual offender attitudes. The age of consent varies slightly from country to country in the Pacific Islands or Oceania, with most, like New Zealand, currently setting their age of consent at 16 years, with some countries going as low as

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16 In New Zealand s128-134 of the Crimes Amendment Act 2005 defines acts of sexual violation using the language of 'rape', 'incest' and 'unlawful sexual connection'. Section 134 of the Act relates to "sexual conduct with young person under 16" and subsection 1 says that "sexual connection with a young person [under 16 years] is liable to imprisonment for a term not exceeding 10 years". See: https://www.legislation.govt.nz/act/public/2005/0041/latest/DLM346175.html. In New Zealand marriage before 16 years is illegal. The age of consent to marry without parental consent in New Zealand is 20 years. Seventeen-to-nineteen year-olds who wish to marry must have the consent of their legal guardians.

17 "In November 2013, Cabinet agreed to lower the adult limit to 250mcg of alcohol per litre of breath and 50mg of alcohol per 100ml of blood. The change was put in place through an amendment to the Land Transport Act 1998. The new limit came into effect on 1 December 2014." See: https://www.transport.govt.nz/about-us/what-we-do/queries/regulation-of-drink-driving-limits/

14 years and as high as 19 years.[18] Child marriages are also not unheard of in the Pacific.[19] And what constitutes a child, legally speaking, depends on which Pacific country one is in. Moreover, in most Pacific Island countries, same sex marriages and same sex sexual relations is illegal no matter the age.[20] Indeed, except for Aotearoa NZ and Australia, heterosexuality within most of the Pacific Islands is considered fixed with any public suggestion to the contrary condemned, i.e., ideas of sexuality being fluid, bi or polyamorous for example. This is not to say, however, that same sex sexual relations do not happen in the Pacific Islands or that same sex cohabitations are not accepted among Pacific peoples and cultures. McMullin and Kihara (2018) with respect to the fa'afafine and fa'afatama of Samoa suggest that same sex relations have been present in Samoa and part of Samoa's cultural fabric for centuries. Claims of public acceptance in Samoa of fa'afafine could arguably be reflected in the fact that Samoa's Fa'afafine Association is quite active in Samoan public life (in Samoa and in the diaspora) and has been for some time, and in the fact that Samoa's former Prime Minister Tuilaepa Sailele was not afraid to express public support for the Association despite his country's stance against homosexuality.[21]

What all situations of sexual violence and abuse have in common is the issue of consent. Namely, the lack of consent. However, as Tuulia Law (2020) explains, anti-rape culture campaigns and interventions that merely replace 'no means no' with 'yes means yes' slogans miss the point about the active and passive ambiguities around sex, sexuality and consent that lie within both 'rape culture' and 'positive sex culture'. If these are not interrogated and honestly reflected on, it can potentially derail intervention efforts regardless of intention. Learning about sexuality, about what one likes in sex or not, what one believes is their sexual orientation or not, at any particular time, is dependent on so many different variables and combinations of variables that wading through the myriad qualifications and disclaimers can become counterproductive. Because of this Law (2020) notes that activist campaigns that flipped the 'no means no' to 'yes means yes' slogan, using the 'consent is sexy' idea to shift the narrative away from the defensive, run into the same problems of ambiguity faced by 'no means no' campaigners.

In cultures and societies where talk of sex in public is highly taboo, made secret, and punished (like that within many Pacific cultures), the natural ambiguities surrounding consent are misunderstood, feared, and/or left underexplored, creating overly simplistic and reductionist thinking that will favour dogmatic certainty in policy over

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18 See: https://www.ageofconsent.net/continent/oceania. FSM at14 years, Kiribati and Solomon Islands at15 years, Nauru at17 years, Northern Mariana Islands at 18 years, and Niue at 19 years. The rest of the 12 Oceania countries listed in the website set the age of consent at 16 years, including Samoa, Tonga, Fiji, Cook Islands, PNG, Australia and New Zealand. The point is that there is variability in the Pacific Islands or Oceania, and that variability depends on the dominant cultural and religious beliefs of each country at any given time and on the sexual and religious politics of the day.

19 See: https://pacific.unfpa.org/en/news/editorial-pacific-can-become-global-leader-ending-child-marriage

20 See: https://antigaylaws.org/regional/pacificoceania/.

21 See: https://www.rnz.co.nz/international/pacific-news/397872/understanding-the-pacific-s-alternative-genders; see also the SFA Facebook page for evidence of public activities: https://www.facebook.com/sfainc/; see also https://www.rnz.co.nz/international/pacific-news/319827/samoa-pm-praises-fa'afafine-association.

dynamic fluidity if pushed. This will confound rather than help resolve the problem. Researchers have found that ambiguity around sexual violations occur in situations where 'bad sex', including grooming and 'hands-off' sex, is normalised or condoned and can, as shared by some of the participants of Robertson et al.'s (2007) study, be erroneously seen as 'good sex'. If these ambiguities are left uninterrogated overly simplistic assessments of sexual violence (Pacific or otherwise) that don't quite hit the mark will continue to mislead sexual violence prevention policy and practice.

"[We must acknowledge that there is] a vast expanse of bad sex – joyless, exploitative encounters that reflect a persistently sexist culture and can be hard to acknowledge without sounding prudish – has gone largely uninterrogated" (Wodda and Panfil, 2017, p.10 in Law, 2020, p.272).

3.1.6 There is a dearth of evidence-based information on who constitutes the Pacific SV workforce and why, their experiences and support needs, and this should be addressed

Our literature search revealed a continued dearth of specific information about the Pacific SV workforce of Aotearoa NZ – information about who constitutes the workforce, their experiences, and their support needs. Percival et al.'s (2010) report noted that among its aims was the aim to "Examine Pacific cultural sexual violence prevention approaches that could be further developed by the *sexual violence workforce in New Zealand*" (ibid, p.5, italics inserted). They suggest that a "Pacific workforce related to sexual violence" is present in New Zealand (2010, p.19) and argued that there is a need to increase its "capacity and capability", especially in "policy making, service delivery, community organisation, research and evaluation" (ibid). But they did not elaborate on the scope or makeup of this workforce. They recommended that the workforce ought to be supported, however, through:

- "Strategies to increase ethnic-specific Pacific services and [the general] workforce to ensure Pacific families receive appropriate services",[22]
- "Cultural safety training for the existing anti-violence workforce to ensure Pacific families receive appropriate services",
- "Particular focus on workforce development for Pacific men working with Pacific sex offenders", and
- "Particular focus on training and upskilling of Pacific counsellors to increase the numbers who are ACC accredited" (ibid).

The inferences are, in relation to a Pacific SV workforce, that (a) it is a workforce that is involved in the prevention of sexual and other associated violence, (b) it is a workforce that is (or ought to be) knowledgeable about relevant Pacific cultural matters (or have easy access to this knowledge and have those whose knowledge is accessed appropriately recognised) and that these matters continue to be of importance to Pacific families in Aotearoa NZ, (c) that it is a workforce that works closely with Pacific survivors/victims and their families or support people, (d) is lacking in Pacific male workers who can work with Pacific sex offenders (presumably Pacific male sex

[22] Alongside the call for ethnic-specific services is a call for more gender-specific services or programmes the recognise the different needs of different gender groups within Pacific, such as the work carried out by the Pacific team at SAFE Network, Auckland, with Pacific male sexual offenders.

offenders), and (e) is a workforce that has a significant need for but lacks sufficient numbers of ACC accredited Pacific counsellors. Here we catch glimpses of who, according to the literature, constitutes (or ought to constitute) the current Pacific SV workforce of Aotearoa NZ and what some of their experiences and support needs might be. These findings are also supported by McRobie (2016) and PSG & PWNSV (2021).

Most recently, in their submission to the national strategy for family violence and sexual violence, the newly emerging network of Pasifika sexual violence workers led by TOAH-NNEST's Pacific steering group (PSG & PWNSV, 2021) argued for:

1. the urgent need to invest "*in research* into Pasifika communities and relationships – particularly around healing methodologies",
2. the urgent need to invest in "*workforce development* across the sexual violence sector that engages and sustains Pasifika pathways", and
3. the urgent need to invest in "*appropriate and safe* [SV services and prevention initiatives] for Pasifika communities" (PSG & PWNSV, 2021, p.3).

What both PSG & PWNSV (2021) and Percival et al. (2010) imply is that the Pacific SV workforce is not only not well understood but that this has a lot to do with it being under-researched, under-theorised and not empirically researched and/or tested enough. Detailed studies such as those conducted by Percival et al. (2010), Pacific Advisory Group (2012), Wharewera-Mika and McPhillips (2016), Carswell et al. (2019), and Malatest (2021), provide useful insights into the cultural belief systems of Aotearoa NZ's Pacific population and into what practitioners see as some key Pacific 'good practice' concerns and frameworks for working with Pacific survivors/victims and offenders of sexual violence, their families, communities and support people.

What is not available within the current literature found is detailed information on the workforce itself, the scope of professions and/or job types within it, demographic and other descriptive profiles, specific discussion on workforce experiences and concerns (NZ Human Rights Commission, 2020; EEO Trust, 2011). Malatest International (2021) suggests that more research is needed on Pacific young peoples' perspectives of family violence and sexual violence, while Carswell et al (2019) and Wharewera-Mika and McPhillips (2016) find that there is also a need to pay specific attention to the impact of sexual violence on Pasifika men and LGBTQ+ peoples, and on the need for services that can work specifically with them.

3.1.7 A co-ordinated national Pasifika SV workforce network is needed, is emerging and is currently made up of less than 50 Pasifika SV 'specialists' of Pasifika descent

In June 2021, TOAH-NNEST's Pacific steering group (PSG & PWNSV, 2021) coordinated an online zoom fono (meeting) with some members of the Pasifika SV workforce network from throughout Aotearoa NZ to discuss the government's national strategy to eliminate family violence and sexual violence. The feedback received from fono participants formed the basis of their submission, presented by the TOAH-NNEST Pacific steering group on behalf of the fono to government. While the submission served as a catalyst for potentially establishing a more formal and representative national

Pacific SV workforce network complete with its own governance and membership, it is clear that to get the idea of a national Pasifika SV workforce network started, coming together to author the submission was important.

"The network is emerging and does not yet have relationships established within it to make this particular consultation a thorough overview of the Pasifika workforce contributions. This network will continue to meet on a regular basis…to develop the nurturing relationships required to gather information on the sexual violence sector from a Pasifika perspective" (PSG & PWNSV, 2021, p.3).

From the feedback received from fono participants, the submission claims that "As far as we know, *there are less than 50 Pasifika sexual violence specialists that make up the Pasifika sexual violence workforce*" (PSG & PWNSV, 2021, p.5, italics inserted). From the literature surveyed this is the only source that makes such a claim, albeit qualified. This offers a concrete baseline starting place for determining workforce numbers and potential members. When analysed further, alongside information from other sources within the literature (e.g., McRobie in Wharewera-Mika and McPhillips, 2016; Percival, et al., 2010), the reference to 'specialists' may be understood as referring to those considered 'professionals' (i.e., a qualified member of an existing caring profession such as social work, counselling, therapy, psychiatry, general medical practice, sexual violence policy, research and evaluation). However, PSG & PWNSV (2021) is not clear whether the workforce ought to be limited to these 'specialists' or can be broadened to include other job titles, including peer or community support workers, voluntary or paid. PSG & PWNSV's reference to those who attended the fono as constituting people who "work in the area of sexual violence in varying degrees of proximity to client focused work" may be read as including peer support workers (2021, p.3).

Of importance for the workforce is the question of ethnicity. That is, whether to limit the Pasifika SV workforce network to members who are of Pacific descent only or not. Those who participated in the PSG & PWNSV submission were described as "sexual violence workers [from] around New Zealand Aotearoa who are of Pasifika descent" (PSG & PWNSV, 2021, p.3). McRobie (2016) suggests that there are a significant number of sexual violence sector workers not of Pasifika descent who work with Pasifika clients. This is a question with political and practical implications for the emerging national Pasifika SV workforce network and is one that concerns all Pacific and other ethnic-specific workforce initiatives across Aotearoa NZ.

3.1.8 The current Pasifika SV workforce experience significant 'compassion fatigue'

PSG & PWNSV (2021) contend that because of the paucity of Pasifika practitioners with the requisite cultural and/or clinical and/or peer support skills needed, those currently servicing the needs of Pasifika clients can experience significant amounts of 'compassion fatigue'. The factors leading to that fatigue, she contends, are as much cultural as they are work-related and impact workforce retention and wellbeing. Moreover, addressing this concern will require better understanding of the overlaps between the clinical and cultural in professional and/or organisational practice.

"There are so few Pasifika sexual violence workers in the country, that they experience compassion fatigue. Not only do they honour this deeply complex work in their daily

paid practitioner space, but they also often end up being the person best equipped to deal with family and community disclosures of sexual violence where the family/community have decided the safest approach does not include pathways currently available like social services or reporting to police. …The same sexual violence workers who experience compassion fatigue in their work and personal lives, also end up being key advocates for the sexual violence sector in various positions. This model of practice is not sustainable, but it is deeply necessary to have strong advocates for Pasifika within the sector." (p.5).

'Compassion fatigue' is a risk factor for workforce 'burn-out' and thus a significant barrier to workforce retention and job satisfaction (Devilly et al, 2009; Pross, 2006; Gilbert and Proctor, 2006). There is a moral 'response-ability' on governments and employers to ensure that the workforce is properly protected from such risk factors. PSG & PWNSV (2021) suggest that for Pacific SV workers, compassion fatigue involves the stress of not only having to deal with the heaviness of sexual violence disclosures but also the burden of representing Pacific concerns in a sector that tends to marginalise them.

3.1.9 Workforce inequities, inappropriate supervision and a lack of leadership and promotion pathways have negative implications for Pasifika workforce retention

PSG & PWNSV (2021) raise a list of workforce needs that participants of their fono identified as important to growing and retaining Pasifika sexual violence workers. These included:

- "Adequate supervision…includes culturally specific supervision",
- "Equitable pay scales",
- "Pathways to leadership – educational opportunities for management on appropriate pathways for Pasifika sexual violence workforce to upskill",
- "More capacity in the workforce – invest in the Pasifika people already in the sexual violence sector, so that leadership opportunities can be engaged, without overloading the other, very few, Pasifika specialists in sexual violence sector" (ibid, p.6).

The fono advocated strongly for the establishment of a sexual violence infrastructure to support the proper and safe development of a Pasifika sexual violence workforce, complete with culturally informed processes for career progression and community leadership development.

"There is a reluctance from Pasifika practitioners in the sexual violence sector to claim their knowledge titles – always assuming someone else knows more – but also being aware through experience that the sexual violence sector lacks the infrastructure to safely accommodate their career progression and support their leadership with Pasifika communities. …Without the infrastructure to support our Pasifika sexual violence workers, there is little space available for Pasifika people to respectfully and safely hold their communities accountable for sexual violence and for healing from sexual violence" (ibid, p.5).

PSG & PWNSV (2021) record a list of recommendations from the fono for the development of this infrastructure. It includes the establishment of appropriate educational and service support for Pasifika survivors/victims, their families, and chosen support people. And a long-term investment plan to build and grow a Pasifika workforce, building capacity and capability. They argue for investment in "targeted scholarships" (ibid, p.6) and in "research [and education] on sexual violence [and 'right' Pacific indigenous healing approaches] in Pasifika communities" (ibid, p.6, 9).

3.1.10 There is a need for a new Pasifika acumen, one that is agile and creative but also grounded, that can keep up with the constantly changing dynamics of Pasifika sexual violence work without losing the integrity of Pasifika values

Jean Mitaera (cited in Pasefika Proud, 2020, p.6) and Carmel Peteru (2012) speak of the need for Pacific leaders to develop a new acumen, one that can "unshackle ourselves from the safety of the 'known'" and "recast our [Pacific] vision with imagination and possibilities" so that "we do not … run the risk of fulfilling every negative prediction that has already been cast about us" (Mitaera, ibid). Peteru (2012) pushes for this new acumen in the hope that it can better articulate for mainstream sensibilities the relationship between 'culture' and 'offending', and 'culture' and 'victimisation' from a Pacific perspective. Pacific victims, perpetrators, and their families each have their own experience of culture and its impacts on offending and victimisation. Working effectively with them requires first acknowledging this. Mitaera and Peteru believe that it is time to delve more deeply into the methodologies, ontologies, and epistemologies of Pacific modalities of healing, to harness their potential to redefine and recast Pacific futures as futures that are, by definition, abuse free.

In conclusion

"We want to thrive, not just survive!" (PSG & PWNSV, 2021, p.6).

Our review of the literature suggests that there is much work to be done to better understand and support the needs of Aotearoa NZ's emerging Pacific SV workforce. The literature surveyed expressed a clear need for such a workforce but was less clear about how best to develop it. What was clear was that while there exists such a workforce in Aotearoa NZ, it is currently fragmented and stretched, and in urgent need of infrastructural support to grow and thrive. And though it is still taking form and is currently seen to be made up of workers with specialist professional, clinical, cultural and/or peer support skills, supporting the establishment and growth of such a workforce is invaluable for both Pacific peoples and Aotearoa NZ as a whole.

For over 70 years Pacific peoples have migrated and settled in Aotearoa NZ (Mallon et al, 2012). Today they constitute 8% of the total New Zealand population (New Zealand Census, 2018). The literature we accessed suggests that while there continues to be large gaps in SV workforce knowledge of SV in Pasifika spaces, there is a small but informative body of Pacific focused literature that is useful, particularly when it is brought into meaningful conversation with wider research knowledge on sexual violence, sex, sexuality and consent (NZ Royal Commission of Inquiry, 2020; Simon-Kumar, 2016; Abrahams et al., 2014; Coles et al, 2013; Fanslow and Robinson, 2014;

Fanslow et al, 2010; McGregor, 2011; Mossman, et al., 2009; Powell and Henry, 2014; Schluter et al, 2007; Triggs et al., 2009). We conclude that the main challenge suggested by the literature for building the kind of specialised acumen and leadership needed to guide Aotearoa NZ's Pasifika SV workforce forward lies not, as mama Jean says, in Pasifika and Aotearoa merely recreating "the known" (Pasefika Proud, 2020, p.6), but in Aotearoa and Pasifika being able to recast and reimagine that known, and have meaningful vā-filled conversations with it, together.

3.2 Online Questionnaire Findings

These questionnaire findings are descriptive only.

3.2.1 Summary of respondents' demographic profile (by ethnicity, place of residence, age, gender, and highest formal New Zealand education qualification)

(a) Ethnicity and Place of Residence

The overall ethnicity and place of residence profile of our questionnaire respondents reflects that of the 2018 New Zealand Pacific population census (New Zealand Census, 2018). Participants self-identified their ethnicity and had the option of selecting more than one ethnic group. For single ethnicity counts, Samoans make up 48% of the total Pacific population of Aotearoa NZ and are 50.9% of our respondent population.[23] The other single ethnic categories represented in our overall respondent population include those who self-identify as Tongan (7.3%), Fijian (7.2%, which is evenly split between i-Taukei or Indigenous Fijian and Indo-Fijian)[24], Niuean (3.5%), Solomon Islander (1.8%), Tokelauan (1.8%), Cook Islander (1.8%), and Tuvaluan (1.8%).

Of interest, in terms of implications for the delivery of Pacific-specific or ethnic-specific approaches when working with Pacific peoples affected by SV, is the number of respondents of mixed ethnicities (18.2%, counting both respondents of mixed Pacific ethnicities, and mixed Pacific and non-Pacific ethnicities). Furthermore, 5.5% of respondents noted not being of any Pacific ethnicity. This latter statistic is of interest in terms of understanding the scope of the ethnic make-up of practitioners who work with Pacific SV clients who may also benefit from Pacific practice guidelines and access to a Pacific SV workforce support network.[25]

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[23] According to the 2018 New Zealand population census, 60% of Pacific peoples belong to a single Pacific ethnic group. Samoans are by far the largest single ethnic group (48%), followed by Tongans (21.5%) and Cook Islanders (21%), then a large number of smaller Pacific ethnic groups (14 in total) include Niueans (8%), Fijians (5%, which is inclusive of Indigenous Fijians or i-Taukei, Fijian-Indians, and Fijian-Rotumans), Tokelauans (2%), Tuvaluans (1%), i-Kiribati (0.8%), Tahitians (0.5%), Papua New Guineans (0.3%), ni-Vanuatu (0.25%), Solomon Islanders (0.2%), and Hawaiians (0.1%). (Note that the overall percentage for total share of Pacific ethnic groups listed equals over 100% as respondents could self-identify as belonging to more than one Pacific ethnic group. This suggests that the size of Pacific peoples belonging to more than one Pacific ethnicity is probably around 8-10% but this does not account for those who self-identify as belonging to one or more Pacific and non-Pacific ethnic group, especially Pacific-Māori and/or Pacific-Pākehā/European ethnicities or both).

[24] We acknowledge that there is debate within different Pacific sectors surrounding reference to or inclusion of Fijian Indians or Indo-Fijians within the Pacific peoples or Pasifika category in Aotearoa New Zealand. As a baseline study of the Pacific SV workforce in Aotearoa New Zealand, we have included Indo-Fijians or Fijian Indians in this project as participants who responded to the call to participate in our online questionnaire and talanoa sessions self-identified as Fijian and Fijian Indian or Indo-Fijian. This is in itself a key finding.

[25] We have included non-Pacific peoples here for two reasons: because 1. the anonymous questionnaire was distributed through national organisations whose membership were made up of Pacific and non-Pacific ethnic groups, and so was likely to attract all peoples who worked with Pacific SV survivors, and 2. the definition of a 'Pacific SV workforce' could arguably include all peoples who work with Pacific SV survivors regardless of ethnicity. See the Discussion section of this report for further comment on this issue.

In terms of place of residence, 63.9% of the total Pacific population of Aotearoa NZ live in the Auckland area[26] compared with 62.5% of our respondent population.

Figure 1: Pie-graph of ethnic breakdown

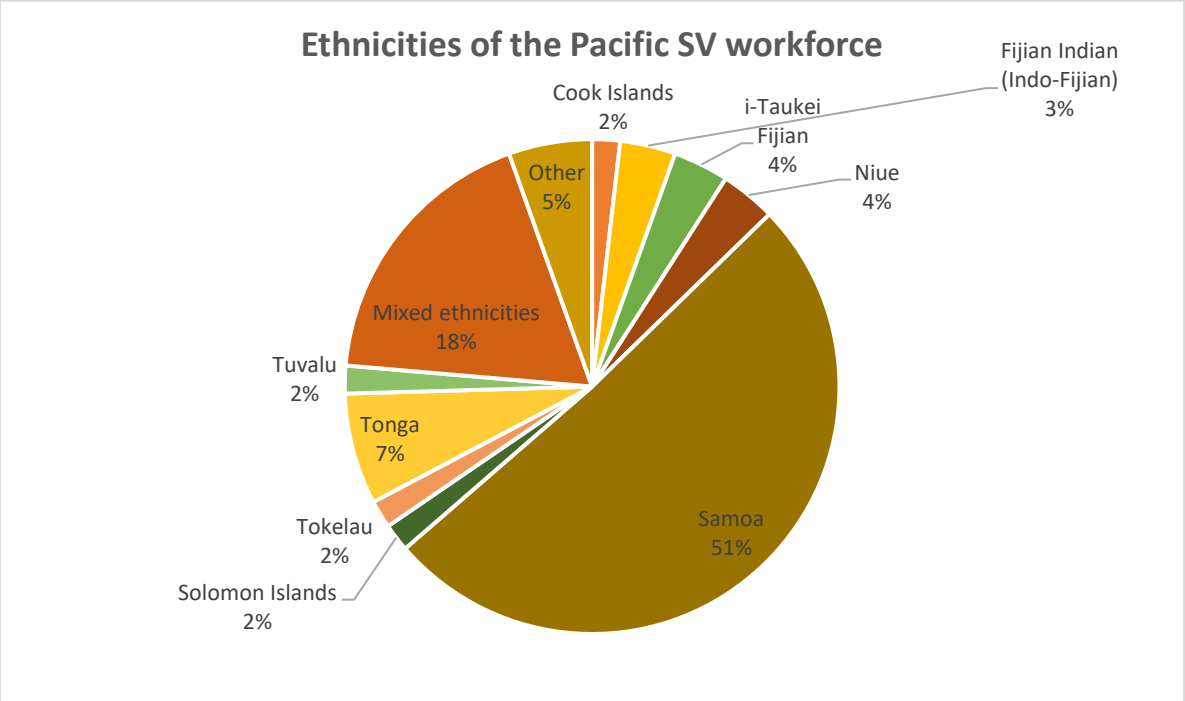
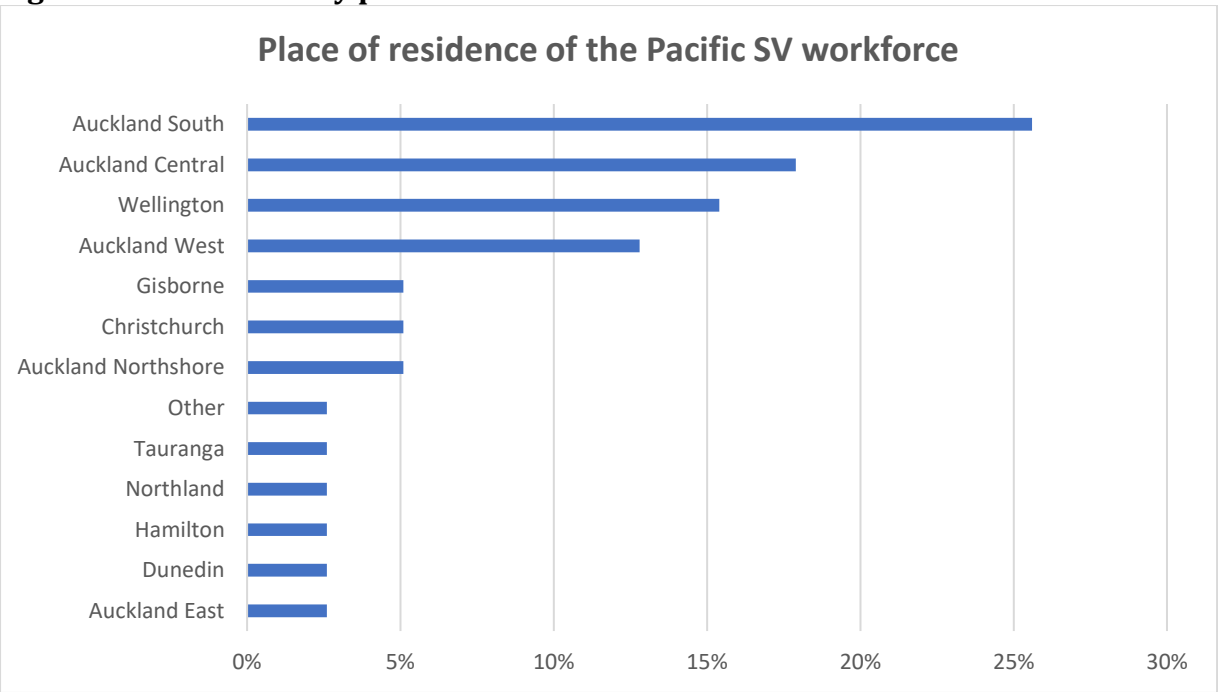


Figure 2: Breakdown by place of residence

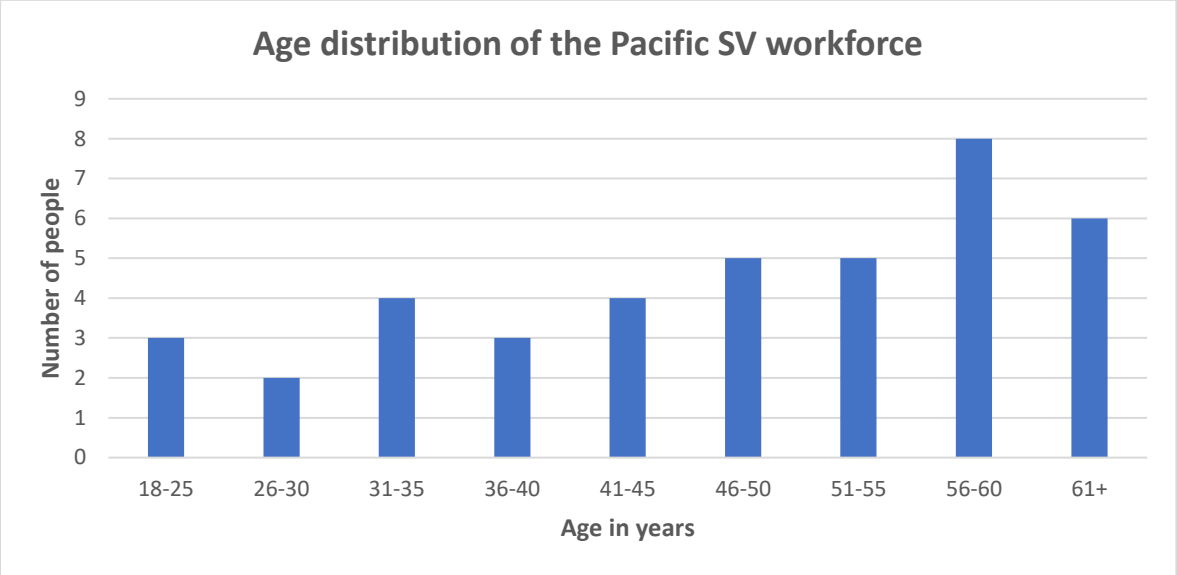


26 See: https://knowledgeauckland.org.nz/publications/2018-census-results-pacific-peoples-in-auckland/

(b) Age

In 2018 the median age for Pacific peoples in Aotearoa NZ is 23.4 years, compared with the median age of our respondent population, which is 21.5 years. However, most of our respondent population (70%) were 40 years or over. This suggests that statistically the Pacific SV workforce is largely an 'older' (i.e., over 40 years of age) workforce.

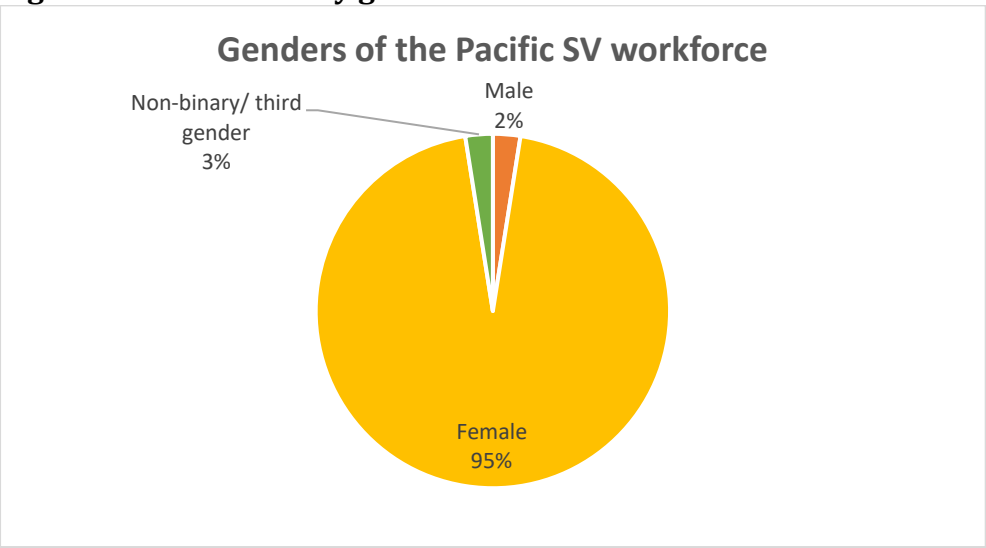
Figure 3: Breakdown by age range



(c) Gender

According to the 2018 census, women and girls make up 49.8% of the total Pacific population in Aotearoa NZ. Our respondent population is, however, 95% women. This suggests that the Aotearoa NZ Pacific SV workforce is at present overwhelmingly women. The remaining five percent consist of respondents from the other two gender categories offered, male and non-binary/third gender.

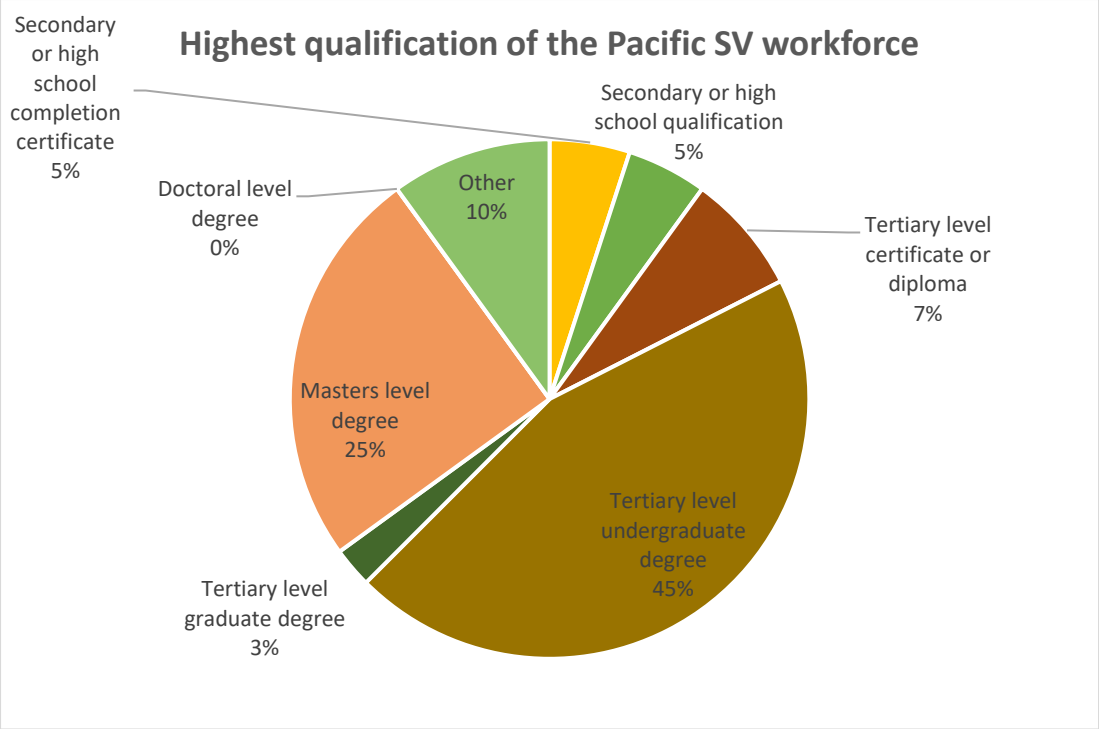
Figure 4: Breakdown by gender



(d) Highest Formal New Zealand Education Qualification

Lastly, in terms of the highest formal New Zealand (NZ) education qualification variable, 80% of our respondent population had an undergraduate degree or higher as their highest formal education qualification. This sits in stark contrast to the recent 15% statistic for those in the Pacific 25-to-64-year-old adult population of Aotearoa NZ who hold an undergraduate degree or higher as their highest formal education qualification (Ministry of Education, 2021, p.4).[27] This suggests that the Aotearoa NZ Pacific SV workforce is, in formal education terms, well qualified, something that is perhaps to be expected given that the SV field is a 'specialist' (PSG & PWNSV, 2021) field where most of its practitioner positions require at entry level a tertiary qualification.

Figure 5: Breakdown by highest formal NZ education qualification



These findings suggest that the demographic profile of the Pacific SV workforce of Aotearoa NZ is overwhelmingly well qualified women aged 40 years and above, and while made up largely of practitioners based in Auckland and of Samoan ethnicity, also includes – though in smaller numbers - practitioners from a wide range of richly diverse Pacific ethnic backgrounds, who are located across different parts of Aotearoa NZ.

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[27] See, www.educationcounts.govt.nz/govt.nz. Ministry of Education. 2021 (March). *Education Indicator, Education and Learning Outcomes.* Wellington, pp.1-5.

3.2.2 Summary of Employment History Findings

This subsection describes the results of section two of the questionnaire relating to respondents' employment status and context, including workplace details.

(a) Percentage of those currently employed and no longer employed by an SV agency

Most (80%) of questionnaire respondents are currently employed in the SV sector and work for an agency that provides support to Pacific peoples affected by SV. The remaining 20% are past employees of an agency that provided (and may still provide) support to Pacific peoples affected by SV.

(b) A breakdown of the characteristics of those 'currently employed' or 'were employed' by an SV agency

(i) Type of SV agency employed by

Most respondents (87%) who are currently employed within an SV agency are employees of a Non-Government Organisation (NGO). The remaining 13 percent are employed by a government agency.

Of the 20% who are past employees of an SV agency, 62.5% of them responded to the question of type of agency they worked for. From this, just over half (60%) worked for an NGO and the rest for a government agency.

What these findings indicate is that the current Pacific SV workforce are employed either by an NGO or government agency, and most work for an NGO.

The NGO and government agencies listed by all respondents included:

- A Sexual Assault Care Service [in a DHB],
- Department of Corrections ("Corrections"),
- Accident Compensation Commission ("ACC"),
- Child Youth and Family Service (known today as Oranga Tamariki or Ministry for Children),
- Educational institutions,
- Faith-based or Church-based social services
- Sexual Abuse HELP Foundation,
- Rape Crisis
- STOP services
- A private practice or consultancy
- Māori health or social service

(ii) Workplace locations of present and past employees of SV agencies in Aotearoa NZ

Of those who responded to this question[28] of main workplace locations, the majority (74%) indicated working mainly in Auckland. Almost three quarters (74%) of current employee respondents and exactly three quarters (75%) of past employee respondents work in the Auckland area.

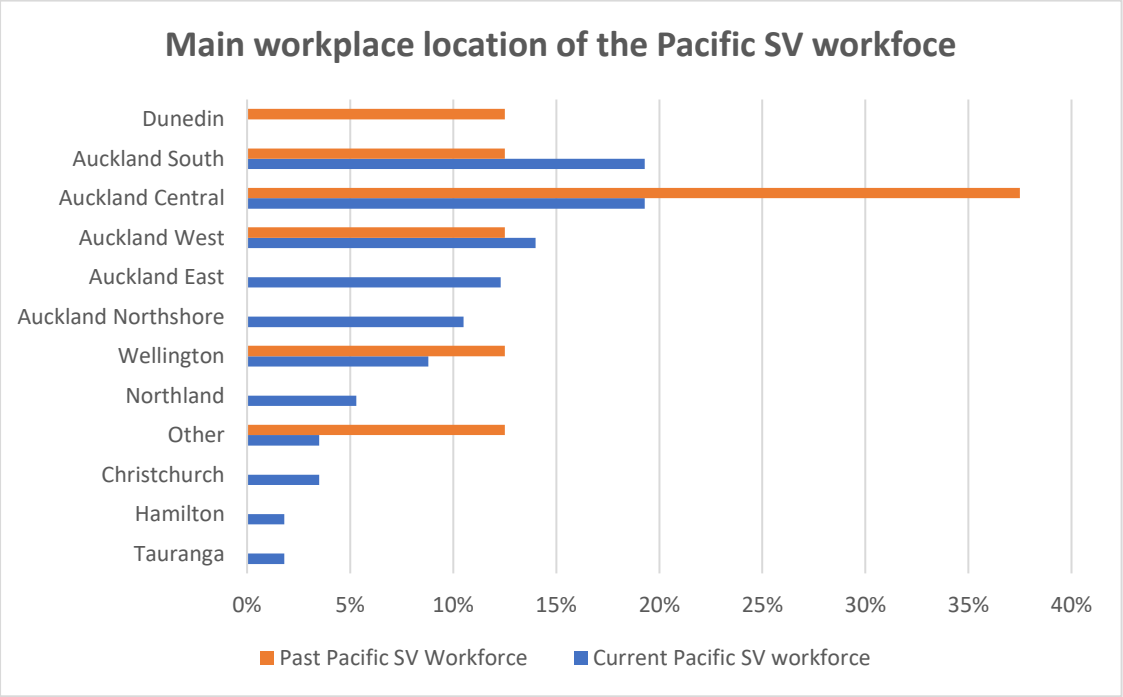
For the remaining respondents who indicated working outside of Auckland locations, the Wellington areas (which includes the areas of Kapiti and Porirua noted in the 'Other' locations) rated the next highest main workplace location site. Twelve (12.3%) percent of current employees and 12.5% of past employees indicated working mainly in Wellington areas (including Kapiti and Porirua).[29]

The remaining responses to the question of main workplace location are spread across the following areas outside of the Auckland and Wellington regions.

These are:

- Northland,
- Christchurch,
- Dunedin,
- Hamilton,
- Tauranga.

Figure 6: Workplace location



These findings suggest that the respondent population represents a range of different geographical workplace sites across Aotearoa NZ. It also suggests a connection between

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28 See Q.8 of the questionnaire (see copy of questionnaire in the appendix 1).

29 The 12.3% of current Pacific SV workers whose main workplace is located in a Wellington area includes the respondents who selected the 'Other' category.

the high concentration of Pacific SV workers working in urban centres (particularly the Auckland and Wellington areas), and the fact that both the Pacific population of Aotearoa NZ resides in largely urban-based centres as do our overall respondent population.[30]

(iii) Workplace Roles

The most popular roles held by current and past SV employee respondents were social workers or counsellors. Fifty percent of current employee respondents and 43% of past SV employee respondents held one of these roles. The workplace roles or positions mentioned by the current and past Pacific SV workers are noted in Table 1 below.

Table 1: Workforce roles or positions held by current and past Pacific SV workers

Current Pacific SV Worker Roles & percentage of total current respondents	Past Pacific SV Worker Roles & percentage of total current respondents

• Church leader (2.6%)
• Nurse (2.6%)
• Pastoral support (2.6%)
• Psychotherapist (2.6%)
• Translator/Interpreter (2.6%)
• Youth leader (2.6%)
• Community support worker (5.3%)
• Counsellor (23.7%)
• Social worker (23.7%)
• Other (31.6%)
  ○ General manager
  ○ Crisis support worker
  ○ Office manager
  ○ Educational facilitator
  ○ Probation officer
  ○ Crisis counsellor
  ○ High school programme facilitator
  ○ Service manager/programmes provider
  ○ Forensic examiner
	• Church leader (7.1%)
	• Community support worker (7.1%)
	• Psychotherapist (7.1%)
	• Youth leader (7.1%)
	• Peer support (14.3%)
	• Social worker (14.3%)
	• Counsellor (28.6%)
	• Other (14.3%)
	  ○ Crisis support
	  ○ Health promoter on radio

These findings suggest that respondents are or were employed in a wide range of roles for the Pacific SV sector overall, with most working as either social workers or

[30] This has implications for how and where to target or distribute workforce development programmes and resourcing

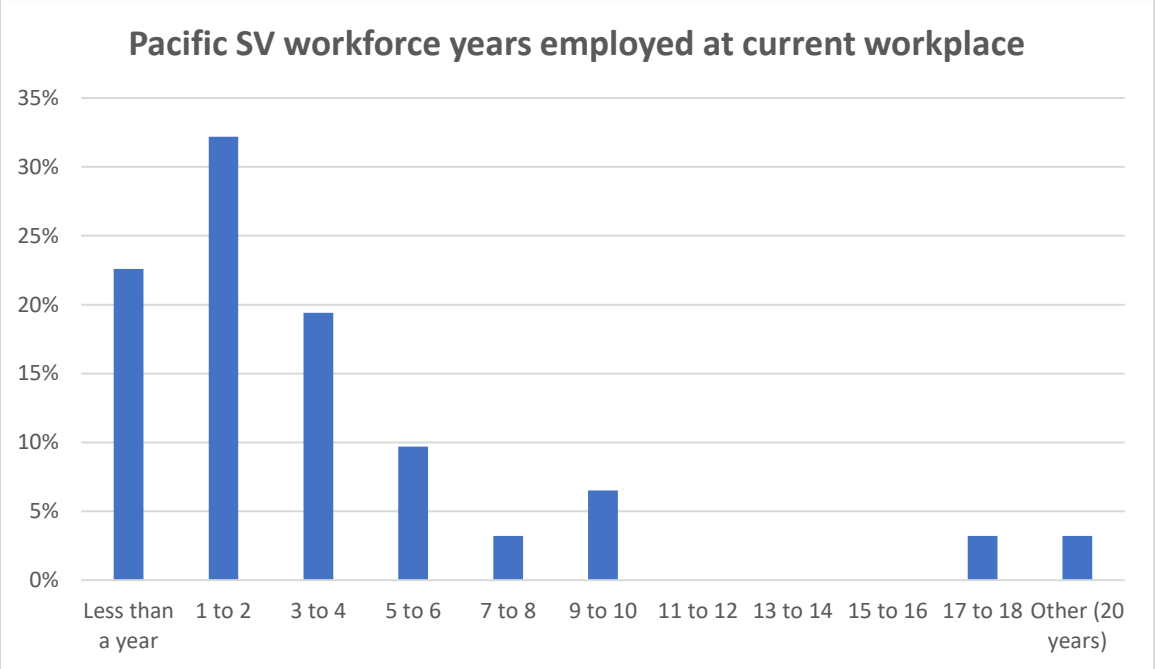
counsellors. The kinds of roles identified suggest that there exists a high level of 'specialised' knowledge and professional competency (including cultural and clinical competencies) within the Pacific SV workforce.[31]

(iv) Total Years Employed in Current Workplace

Of the 31 current employees, one third (32% or 10/31) have been at their workplace between 1-2 years, followed by those who have been there for less than one year (22.6% or 7/31) and then by those who have been there between 5-6 years (19.4% or 6/31).

Only a few respondents (12.9% or 4/31) indicated having worked at their current workplace for 9 years or more, with 6% currently employed at their present workplace for over 16 years.

Figure 7: Years employed at current workplace



These findings suggest that most of the Pacific SV workforce have been with their current SV agency for no more than two years.[32]

(v) Total Years Employed (Past & Present) in the SV Workforce

For those respondents who are still currently employed in the SV sector, 29% (or 9/31) indicated being employed there for 10+ years, and 25.8% (or 8/31) for 4-9 years. Most

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31 Because of the low numbers of participants per position or role identified in this list, the roles are described in the plural to help preserve participant anonymity.

32 One might further surmise from these findings that only a few stay with an agency beyond six years.

currently employed respondents (32% or 10/31) indicated having been employed in the SV field, thus far, for a total of between 1-3 years. And only a handful (12.9% or 4/31) indicated being employed in total, thus far, for less than a year.

For those respondents who are past employees of the SV sector, 50% worked in the SV sector for 10+ years. No past respondent worked for less than a year in total. Only 16.7% worked for a total of between 1-3 years, and 33.4% for a total of between 4-9 years.

Table 2: Total Years Employed in Pacific SV Workforce

Years	CURRENTLY EMPLOYED IN PSV WORFORCE		PREVIOUSLY EMPLOYED IN PSV WORKFORCE	
	Count	Percentage[33]	Count	Percentage
< 1	4	12.9	0	0
1-3	10	32.3	1	16.7
4-6	6	19.4	1	16.7
7-9	2	6.4	1	16.7
10-12	1	3.2	1	16.7
13-15	1	3.2	1	16.7
16-17	0	0	0	0
18-19	1	3.2	0	0
20+	6	19.4	1	16.7
Total	31	100	6	100

These findings suggest that at least half of the Pacific SV workforce of Aotearoa NZ (approximately 59%) have worked for the SV sector for at least a total of six (6) years, and that only a few (approximately 32%) have stayed beyond 10+ years.

(vi) Reasons for continuing to work in the Pacific SV field

In answer to the statement: "Please identify the reason(s) why you continue to work in the Pacific sexual violence workforce",[34] 47.5% of the responses (or 29/61 responses) received from current employees centred on the reason – "I want to contribute to making a positive difference to those affected by sexual violence in the Pacific community".[35] There were six specific reasons to choose from and an "Other" response category or option if participants felt that their reasons were not adequately covered by the six listed. The six listed are mentioned in Figure 8.

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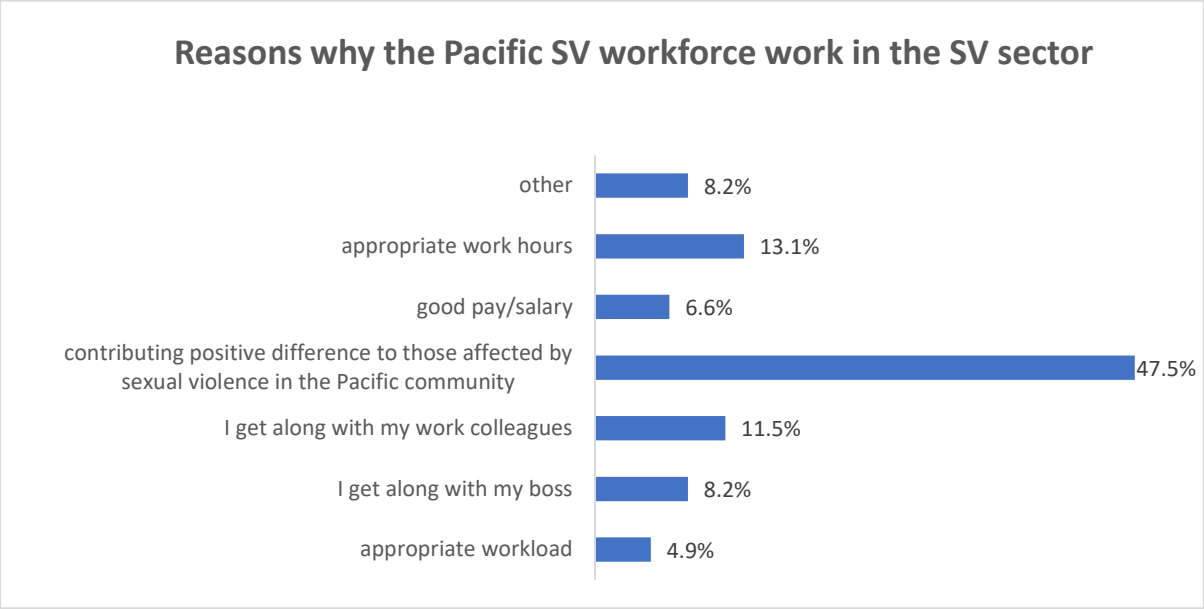
33 These percentages have been rounded down to one decimal point only, which may bring the total percentage to a little over 100%.

34 See Q.12 of the questionnaire.

35 The list of reasons offered for selection in Q.12 were initially composed by those in our research team who are practitioners in the Pacific SV workforce. They drew on both professional and personal experiences in the workforce and in research studies such as that led by Julie Wharewera-Mika and Kathryn McPhillips (2016). The final list of questions was affirmed by the research team's questionnaire leads and by the MSD research oversight team before release to potential participants.

Figure 8: Reasons for continuing to work in the Pacific SV field



The reasons offered by those employees who selected the "Other" category option for why they continue to work with their SV agency include the following:

- "I want Pacific communities affected by SV to be able to see more Pacific workers who are part of the group providing help/support for survivors",
- "There is a great need and a lack of workers",
- "[I] love to work with Pasefika people, families who involve with Family Violence including Sexual Violence",
- "Caseload more manageable in specialist service".

These findings suggest that respondents currently employed with a SV agency continue to work there because, more than anything else, they aspire to make a positive difference in the lives or healing journeys of Pacific peoples generally, and Pacific peoples affected by sexual violence specifically.

(vii) Reasons why past employees left the Pacific SV field

In answer to the statement, "Please identify the reason(s) why you left the Pacific sexual violence workforce",[36] six reasons were offered for selection with an "Other" category option for those who felt that their reasons for leaving were not included in these six.[37] Interestingly, similar to the findings relating to reasons for continuing to stay with their current SV agency, most (though marginally so at 21.4%) centred on the reason: "Personal (including family) reasons". But this is then followed by an even spread of 14.3% of respondents who indicated each of four following reasons as important. That is,

- "Cultural safety and/or competency issues",
- "Professional safety and/or competency issues",

[36] See Q.18 of the questionnaire.

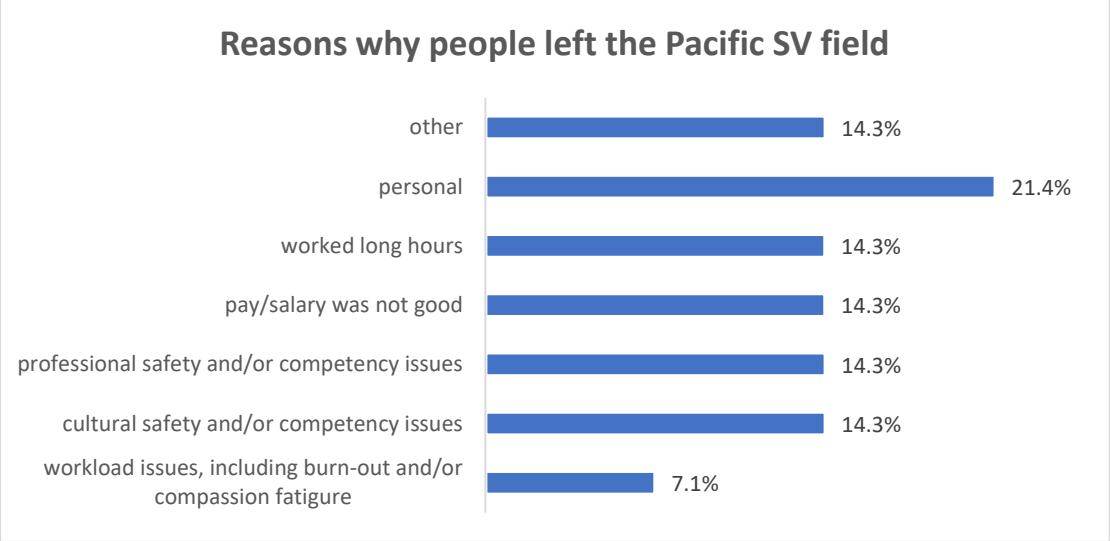
[37] The process for compiling the final list of reasons offered for selection in Q.18 was the same as that adopted for Q.12.

- "Pay/salary was not good", and
- "Worked long hours".

The remaining percentage of responses to this question identified the option or reason category: "Workload issues (including burn-out and/or compassion fatigue)".
For those who identified "Other reasons" for leaving the Pacific SV field, these included:

- Leaving to work in private practice because it provided "greater flexibility and better pay", and
- Leaving to take up further tertiary level studies.

Figure 9: Reasons why those not currently working left the Pacific SV field



These findings suggest that respondents who have left the SV workforce or field did so for a range of different reasons or combinations of reasons, from "personal (including family)" reasons to reasons involving taking up further tertiary level studies, workload issues, pay or salary issues and/or cultural or professional safety or competency issues. While the "Personal issues" reason featured most, it was closely followed by the other reasons listed as depicted in Figure 9.

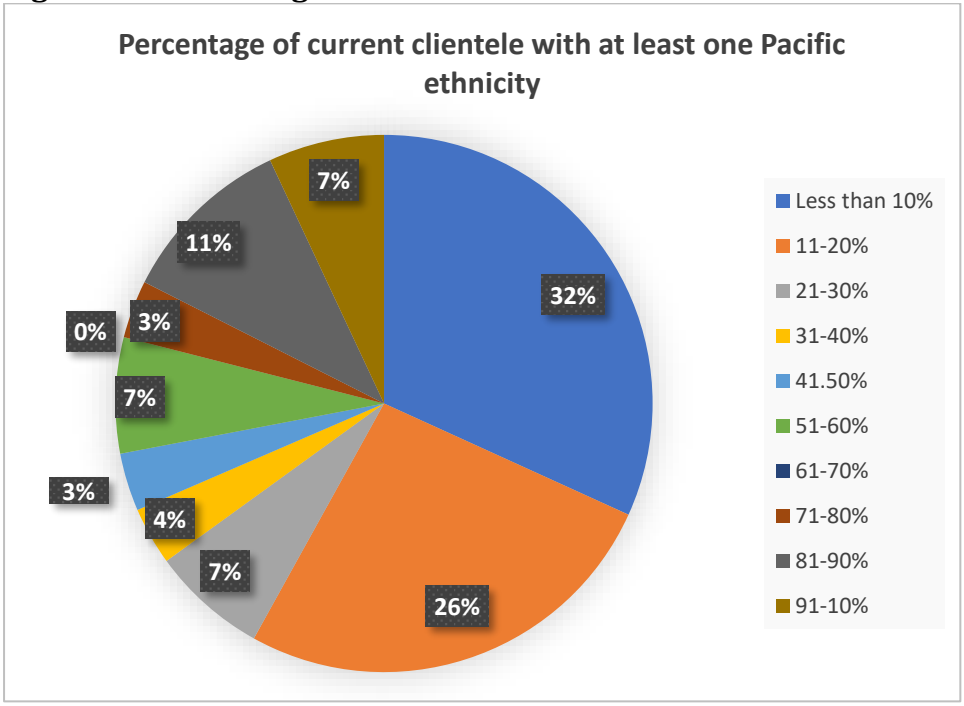
3.2.3 Pacific Clientele

This subsection presents the results of section three of the questionnaire relating to the ethnic make-up of respondents' Pacific clientele. Participants were not directed to reveal how they came to decide on their percentage range. Although this presents a limitation to determining accuracy, the participant's own perception of how many Pacific peoples they work with is in itself of value to the exercise of baseline data building.

(a) Percentage of current clientele with at least one Pacific ethnicity

Of the 29 respondents currently employed by an SV agency and who responded to the question, "What percentage of your clientele are of at least one Pacific ethnicity",[38] most (32% or 9/29) noted that less than 10% of their clientele were of at least one Pacific ethnicity. This is followed closely (at 26% or 8/29) by those who noted that only 11-20% of their clientele were of at least one Pacific ethnicity. These two groups combined constitutes the majority (58%) of the total responses to this question. Only 14% of these respondents had a current clientele list that was made up predominantly (i.e., over 80%) of Pacific clients.

Figure 10: Percentage of current clientele with at least one Pacific ethnicity



These findings suggest that while most of our current employee respondents (29 out of 32) do work with Pacific clients, overall, their Pacific clients make up a small percentage (20% or less) of their current caseloads.

(i) List of Pacific ethnicities of current Pacific clientele

Table 3 lists the different Pacific ethnicities of the Pacific clients of current employees, in order of highest to lowest by number of responses per ethnic category.

Table 3: Ethnicities listed for Current Employee Respondents' Pacific Clientele

Ethnic category	% of responses
Samoan	20.0
Tongan	18.0
Cook Islands	15.8
Fijian Indian or Indo-Fijian	11.7

[38] See Q.19 of the questionnaire.

Niuean	7.5
i-Taukei Fijian or Indigenous Fijian	5.8
Tokelauan	5.8
Tuvaluan	5.8
I-Kiribati	3.3
Ni-Vanuatu	3.3
Mixed ethnicities	3.3
Solomon Islands	1.7
Other	1.7
Total	100

The largest single ethnicity identified among the clientele group is Samoan at 20%, followed closely by the Tongan and Cook Islands groups at 18% and 15.8% respectively. The Indo-Fijian group is the next significant group with the only other double-digit percentage figure of 11.7%. "Mixed ethnicities" and "Other" ethnicities groups include a mix of Pacific ethnicities, and of Pacific and non-Pacific ethnicities.

These findings affirm the wide range of Pacific ethnicities present among Pacific peoples in Aotearoa NZ affected by SV that seek the support of SV help services, and that the distribution of ethnic proportions reflect the general ethnic make-up or proportional representation of Pacific peoples living in Aotearoa NZ.

(b) Percentage of total clientele that were of at least one Pacific ethnicity

All past and current employees were invited to respond to the question, "Throughout your time in the sexual violence workforce, what percentage of your total clientele were of at least one Pacific ethnicity"?[39] The majority (87.5% or 35/40) of the total questionnaire respondents answered this question. Most of these 35 respondents (i.e., 83% or 29/35) were current employees, and 17% (or 6/35) were past employees. As illustrated in Figure 11, just over half of these 35 respondents noted that their Pacific clients made up less than 21% of their total SV clientele lists. The two next largest percentage ranges were equal at 11.4% of total responses and were almost at opposite ends of the continuum. That is, as noted in Table 4, 11.4% of total respondents noted that their Pacific clients made up either 21-30% of their total clientele or 91-100%.

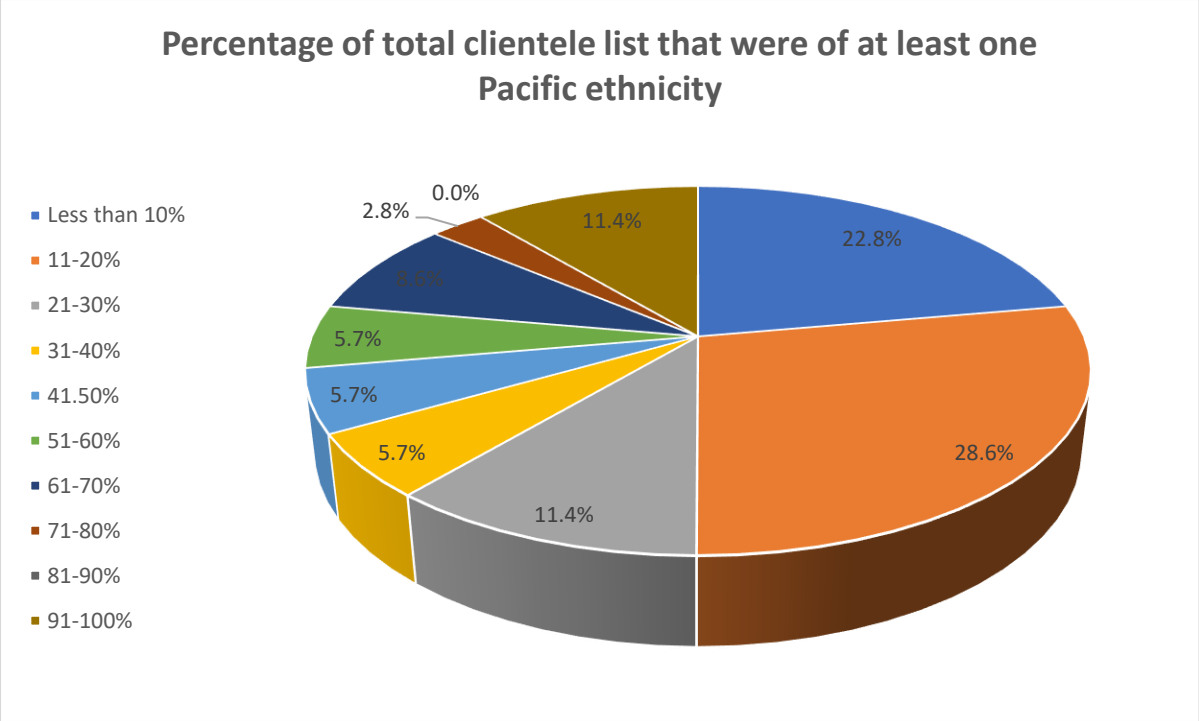
Table 4: Percentage of total clientele of Pacific ethnicity for Past and Current Employees

Percentage of clientele of Pacific ethnicity	Current employees, total no. of responses	Past employees, total no. of responses	Current + past employees, total no. of responses	% of past & current employee total responses
Less than 10%	8	0	8	22.8
11-20%	8	2	10	28.6
21-30%	3	1	4	11.4
31-40%	2	0	2	5.7

[39] See Q.21 of the questionnaire.

41-50%	2	0	2	5.7
51-60%	1	1	2	5.7
61-70%	3	0	3	8.6
71-80%	1	0	1	2.8
81-90%	0	0	0	0
91-100%	2	2	4	11.4
Total	29	6	35	100

Figure 11: Percentage of total clientele list that were/are of at least one Pacific ethnicity



These findings suggest that for just over half (51.4%) of the respondents who answered this question, Pacific clients make up less than 21% of their total (past and present) SV clientele lists. This group of respondents, however, also reported that 11.4% of them had clientele lists (past and present) that were predominantly (91-100%) Pacific. This raises questions for further study about how client distributions happen across different agency, organisation and/or profession-based settings and on what basis.

(i) List of Pacific ethnicities of all respondents' total Pacific clientele

All respondents (current and past employees) listed as follows the different Pacific ethnicities of their total Pacific clientele lists. Table 5 orders these from highest to lowest number of responses given per ethnic category.

Table 5: Pacific ethnicities listed for all respondents' total Pacific clientele

Ethnic category	% of responses
Samoan	33.7
Tongan	16.8
Cook Islands	14.5

Fijian Indian or Indo-Fijian	9.7
Niuean	4.8
Tuvaluan	4.8
Mixed Ethnicities	4.8
i-Taukei Fijian or Indigenous Fijian	3.7
Tokelauan	2.4
I-Kiribati	1.2
Ni-Vanuatu	1.2
Solomon Islands	1.2
Other	1.2
Total	100

Like Table 3, the results of Table 5 find that the three larger single ethnic groups within the general Pacific population – the Samoan, Tongan and Cook Islands ethnic groups – make up a significant proportion (65%) of the ethnicities of all respondents' total list of Pacific SV clients. In the remaining percentage, however, there is a rich diversity of other Pacific ethnic groups present, including those of mixed ethnicities. The "Mixed ethnicities" group is made up of both mixed Pacific and a mix of Pacific and non-Pacific ethnicities. Responses to the "Other" group did reference specific ethnicities.
These findings are similar to those suggested for the ethnic distribution of Pacific clients for current clients of Pacific SV employees currently working for an SV agency. That is, that the findings affirm that while there is a wide range of Pacific ethnicities present among those Pacific peoples in Aotearoa NZ affected by SV who seek support from an SV agency, most are either of Samoan, Tongan or Cook Islands heritage.

3.2.4 Pacific Values, Practices, Protocols, Models and Frameworks

This subsection presents the results of section four of the questionnaire relating to respondents' use of Pacific values[40], practices[41], protocols[42], models[43] and/or frameworks[44] in their SV work or practice.

(a) Intentional Use of Pacific Values, Practices and Protocols

[40] A 'value' is understood here to be similar to a principle.
[41] A 'practice' is understood here to include personal, informal, customary or everyday behaviours or ways of being and doing adopted by individuals or groups, that may be associated or linked to but may also be differentiated from and not dependent on those 'practices' that are established and regulated by formal organisations such as village councils, governments, NGOs, and/or professional bodies.
[42] A 'protocol' is understood here to refer to those rules, procedures, processes and/or practices commonly associated with different rituals and ceremonies performed across various formal and informal, cultural, spiritual and professional spheres. For discussion on spirituality and trauma see McRobie and Makasiale (2013).
[43] 'Model' is identified here when the term is expressly used by respondents to describe a Pacific 'model'. Where it is not expressly used, the research team adopts the meaning of 'model' as a theoretical or physical representation of a method or product.
[44] Similar to 'model', a 'framework' is identified when the term is expressly used by respondents to describe a Pacific 'framework'. Where they do not, the term is understood to refer to a theoretical structure that both frames and provides the foundation for an approach, idea, concept, or system.

A total of 32 respondents (out of 40) responded to the question, "[Do] you intentionally use or [have you intentionally] used Pacific cultural or ethnic values, practices and/or protocols to inform your work with Pacific peoples affected by sexual violence".[45] Almost all who responded (30 out of 32) responded in the affirmative, the remaining in the negative.

When asked to specify or name these Pacific cultural or ethnic values, practices and/or protocols they provided the following list, detailed in Table 6.[46]

Table 6: Pacific Values, Practices and Protocols Identified[47]

Values	Practices	Protocols
• Vā feiloa'i[48] • Aiga (family) • Family • Hospitality • Spirituality • Trust • Vā • Cultural values • Respect • Forgiveness • Boundaries • Communities of support • Cultural sensitivity • Cultural competency across different cultures • Faith-based values • Lotu (Christian church, spirituality, faith-based) values • Alofa (love) • Tatalo (prayer)	• Vā feiloa'i • Vā • Talanoa (storying; conversational method) • Use of legends, bible stories, pese (songs) • Use of alagaupu (proverbs) • Use of gafa (genealogical knowledge) • Understanding of 'demigods'[50] • Aiga • Family • Hospitality • Spirituality • Trust • "Cultural space" • Authentic connections • Uses lived experiences • Use of Pacific languages • Cultural practices	• Vā feiloa'i • Vā • Fa'asamoa • Aiga • Hospitality • Spirituality • Trust • Appropriate use of Pacific languages • Cultural protocols • Cultural sensitivity • Cultural competency across different cultures • Faith

45 See Q.23 of the questionnaire.

46 Only those responses that related directly to the "values, beliefs and practices" focus of the question have been included in this list. Those responses that relate more to "Pacific practice models and frameworks" have been included in Table 6.

47 The contents of Table 6 have been drawn directly from respondent answers and only where necessary for reasons of clarity are responses edited. Whether the 'response' constitutes a value, practice or protocol was determined by the research team. As is consistent with many Pacific indigenous cultural norms, some concepts may be both noun and verb, and could fit – culturally speaking – in one or more category. In line with this norm, where appropriate, the team may have placed a 'response' in more than one category. All values, practices or protocols referred to using the same terms are listed once (e.g., family values or faith-based values), even though they may have been mentioned by more than one respondent.

48 "Vā feiloa'i" refers to Samoan relational concepts, values and protocols of encounter, meeting and engaging.

50 This infers use of cultural knowledge and wisdom relating to the heroes and characters of Indigenous Pacific oral histories, creation stories and legends.

• Ethnic-specific values • Fa'aaloalo (respect) • Tautua (service) • Pasifika values[49] • Fonofale concepts • Lalaga (weaving) and malaga (journeying) • Aga faatamālii (chiefly values; dignified values) • Soalaupule (the sharing of decision-making) • Saogalemu (safety) • 'Fofo le alamea le alamea' (Samoan proverb – 'solutions lie within') • Fesoota'iga lelei (good relations/relationships)	• Community of support • Cultural sensitivity • Acknowledge cultural diversity and complexity across and within Pacific cultures within practices • Cultural competency practices across different cultures • Uses faith-based practices • Uses biblical word-based scriptures • Ethnic specific practices • Acknowledging the collective • Pasifika modalities • Lalaga le ato (basket weaving)	

This list shows a predominance of Samoan-specific language terms, reflective of the number of Samoans in this respondent population group perhaps, and of the influence this may have on Aotearoa NZ's Pacific SV workforce's frames of reference. Notwithstanding, the list also presents other features worth noting. For example, respondents suggest the importance of faith-based values, practices and protocols and imply that these either sit alongside or within Pacific cultural values, practices and protocols. This raises interesting questions about the relationship between "culture" and "faith" (or religion) for both Pacific peoples and Pacific SV practitioners *in* Aotearoa NZ and has implications for how clinical and secular public policy models for the family violence and sexual violence sectors ought to respond to this relationship.

Secondly, as depicted in Table 6, in organising the respondents' answers into the three categories of "values", "practices", and "protocols", it is apparent that because of the nuances of Pacific grammar, Pacific terms and concepts can belong to more than one of these three categories depending on use and context (e.g., the Samoan term "vā feiloa'i" could refer to a value as well as a practice or protocol). The portability of language terms is context dependent and while this may be clear to fluent speakers of Pacific languages, may not be so clear to those in the workforce whose fluency levels are low or variable.[51] This may have implications for cultural and professional competency training assumptions (from content material, and communication style, to teaching and learning approaches).

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[49] The "Pasifika values" and "Pasifika modalities" responses were transferred here from responses to Q.24 as the team felt that the terms were better placed here.

[51] The 2018 New Zealand census records that Samoan is New Zealand's third most commonly spoken language. It also records that 91.8% of Pacific peoples in New Zealand speak English, and only 37.8% speak two languages.

A few participants took the time to elaborate on their reasons for drawing on Pacific values, practices, and protocols to inform and guide their SV practice with Pacific peoples affected by SV. The importance of family and cultural values to Pacific SV practitioners, and their perceived 'response-abilities' to the needs of their Pacific clients are key reasons offered.

"It makes it more relevant to our paihere (people in our care) and aligns with our current strategy for [mentions agency], which is Hokai Rangi – engaging with our paihere, their aiga and communities to reduce harm and risk of reoffending".

"[My] personal values instilled by my parents of respecting my elders, respecting relational 'spaces', working with the collective and inclusion of important familial relationships, unbiased and non-judgemental practice and respecting difference within the different cultural values and beliefs".

"When working with Pacific people in all spaces I acknowledge the vā between the two, the survivor and support worker. When working with Pacific peoples it is important to me to also be culturally sensitive and cross-culturally competent, acknowledging the diversity between each Pacific group and the complexities with each group's roles, protocols, etc., not approaching every Pacific person in the same manner, and always being aware of these underlying complexities that each survivor carries on top of their trauma".

For the six percent (6%) who indicated that Pacific values, practices, and protocols did not inform their SV practice, a couple of specific reasons why were provided and are worth noting. These were the non-inclusion of specific Pacific values in work programme because they were seen as irrelevant, inappropriate, or too ethnic-specific, and preferring a more client-focused approach. That is:

"[Our] programme does not have Pacific cultural or ethnic values in[cluded] in the programme".

"I talk with my clients about **their** practices/protocols – talk about what they would like, to support them in our work".

"We are predominantly a Kaupapa Māori service and use tikanga Māori concepts and values in treatment, however, we do have a number of Pacific peoples referred to us".

Overall, these findings suggest that a significant proportion of the Pacific SV workforce use Pacific values, practices, and protocols in their work with Pacific SV clients. And, that these values, practices, and protocols are informed both by Pacific cultural (including indigenous) and faith-based concepts and belief systems.

(b) Use of Pacific practice models or frameworks

Compared with the previous question on Pacific values, practices, and protocols, more respondents answered the question, "Do you use or [have you] used Pacific practice

models and/or frameworks?"[52] in the negative (i.e., 15.6% compared to 6%). This still means that a large majority 84.4% (or 27/32) answered in the affirmative.
When respondents were asked to name the Pacific models or frameworks they used, they provided the following responses, noted in Table 7.

Table 7: Practice models and frameworks identified[53]

Pacific Models	Pacific frameworks	Non-Pacific frameworks or models
• Fonofale model[54] • Hauora wellbeing model • Talanoa model • Tivaevae model • Kuti model • Vaka model • Fonua model • Teu le Vā model • Le Vā model • Fauina o le Fale model (Ara Poutama's version of Fonofale model) • Pacific models of wellbeing • Seitapu model[55]	• Pasifika modalities • Pasifika frameworks • Talanoa as a tool of engagement • Ifoga (public apology ceremony) • Matai (chiefly) • Fakatupuolamoui conceptual framework • Vā fealoaloa'i framework • Lalaga (weaving) framework • Nga Vaka o Kainga Tapu frameworks – ethnic specific	• Whare tapa wha model • Oranga Tamariki[56]

Participant responses suggest that the most well-known and cited of the Pacific models listed here is the Fonofale model, followed by the Talanoa framework or approach and the Teu le vā model.[57] This is not surprising given how long these models/frameworks have been formally used by New Zealand's Pacific health, research, education, social services, and policy sectors. Within this list of models and frameworks are the inclusion of a range of different ethnic-specific Pacific models and frameworks, such as, for example, use of the Tongan Fonua, Niuean Fakatupuolamoui, Cook Islands Tivaevae

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52 See Q.24 of questionnaire.

53 As noted in the footnote accompanying Table 6, the content for Table 7 have been drawn directly from respondent answers to Q.24 of the questionnaire, and from those responses from Q.23 considered more relevant to Table 7. Only where necessary for clarity were responses edited. In this editing process the team made sure to use as much as possible to original words in the response. All models or frameworks are referred to once in the list, even though the model or framework may have been mentioned by more than one respondent.

54 The fonofale model was the most frequently cited model by respondents (specifically mentioned twenty-four (24) times, followed by the Talanoa framework or approach (9 mentions) and Teu le vā model (4 mentions).

55 This model and the Teu le vā model were mentioned by respondents answering Q.23.

56 This was mentioned by a respondent. It is not clear whether it refers to models or frameworks used by Oranga Tamariki. We have included it here on the assumption that it does.

57 The Fonofale model was first introduced into Aotearoa New Zealand health sector in 1995. The Talanoa methodology and framework was introduced to the New Zealand research and education sector in 2006. The Teu le vā model was introduced to the New Zealand research and education sector in 2010.

models listed, all of which are Polynesian in cultural orientation, including the Māori Whare tapa wha and Hauora models.

For those questionnaire respondents who indicated that they did not use or have not used any Pacific practice models or frameworks in their work, some elaborated on the reasons why. Two main reasons were offered. These were a lack of available training in Pacific models or frameworks and a lack of perceived relevance for the inclusion of Pacific models/frameworks into programme content.

"We do not utilise official or potentially definitive models as such. This is because we are a program (sic) that goes into schools to teach a sexual harm prevention program. I utilise my skills and world view as a Pasifika person to connect and produce sessions that connection (sic) to our young people".

"Lack of training around these practices, models/frameworks".

These findings overall suggest that there is a wide range of Pacific models and frameworks that inform the work of Pacific SV practitioners. The model most well-known to Pacific SV practitioners is the Fonofale health belief model. While not all SV programmes target Pacific clients specifically, some general programmes do receive Pacific referrals and/or take on Pacific clients. Respondents suggested that in those circumstances where they received a Pacific referral or their programme is likely to attract Pacific participants, being aware of Pacific models and frameworks, and how they could be applied in practice could be useful.

3.2.5 Workforce Supports

This subsection presents the results of section five of the questionnaire relating to respondents' views on supports available to them in their work with Pacific peoples affected by SV.

(a) Available Supports

Seventy-two percent (72% or 29/40) of questionnaire respondents provided a response to the question on "What kinds of supports are or were available to you to carry out your services to Pacific clients"?[58] Table 8 records the number of responses received per response category. Respondents could choose from four different options or categories and/or could use the "Other" category should they feel that the supports available to them did not adequately fit within the four options provided.

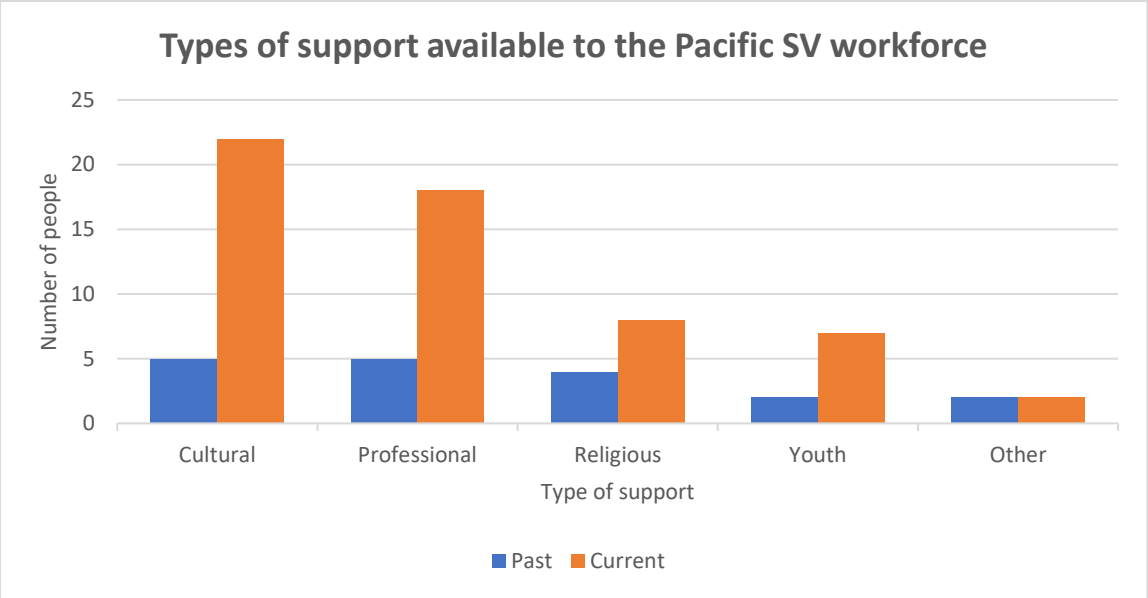
Table 8: Total quantitative responses to type of supports available to them

Response Option/Category	Percentage (Current Employees)	Percentage (Past Employees)	Total
1. Cultural (e.g., supervision, peer support, referral services support, etc.)	38.6%	27.8%	36.0%

[58] See Q.25 of the questionnaire. The question provides four response options to choose from plus an "Other" response category. Respondents could choose more than one response option.

2. Professional (e.g., supervision, peer support, referral service support, membership in a disciplinary or interdisciplinary association, such as Pasifika Counsellors Collective, etc.)	31.6%	27.8%	30.7%
3. Religious (e.g., pastoral support)	14.0%	22.2%	16.0%
4. Youth (e.g., supervision, peer support, referral services support, etc.)	12.3%	11.1%	12.0%
5. Other	3.5%	11.1%	5.3%
Total	100%	100%	100%

Figure 12: Available Supports to the Pacific SV workforce



(i) "Cultural" and "Professional" Supports Available

As suggested by the findings in Table 8 and Figure 12, "cultural" and "professional" supports were the main kind of supports respondents identified as important and were accessible or available to them. Respondents were invited to elaborate further on what these "cultural" and "professional" supports were for them. Table 9 details their responses.

Table 9: List of qualitative responses about the 'cultural' and 'professional' supports available[59]

Cultural	Professional
• [Support received] about language, life experiences, professional background…"	• Pasifika professional supervision • Linkages to key Pasifika services

[59] Where respondents provided the same answer, this is only noted once, unless it fits as both a 'cultural' or 'professional' support.

• Cultural supervision • Cultural support from other PI colleagues and regional Pasifika advisors • Leadership advice and support • Referral support • Support from Pasifika community leaders • Translation services • Ethnic-specific services support • Advocacy support • External supervision • Pasifika support group at workplace, to talk about practice from a Pasifika lens and also check in with each other and support each other • Email and phone call support when required • Mentoring	• Access to a broad network for Pasifika referral agencies and supports • Referral support • Leadership advice and support • Peer support • Peer supervision • Translation services • Ethnic-specific services support • Advocacy support • External clinical supervision • Self-directed enquiry support • Internal case-load management supervision • Support from professional associations or collectives, national bodies, faith-based bodies, and Pasifika bodies • Email and phone call support when required • Mentoring

A few respondents provided a lot of rich detail in their explanations, such as the following four who emphasised the need for both cultural and professional support. One of them noting that access to professional supervision was made easier because "work pays for that". Moreover, while these respondents raised the importance of being a member of a general New Zealand national professional body for easier access to support services, they also noted, however, that, sometimes, Pacific voices or a Pacific presence is not visible within. They state:

"Pasifika counsellors and networks…these have grown over time and enriched my support for clients…But the reality is, it is not just cultural but professional cultural services needed".

"We are encouraged to meet with our professional supervisor once a term, and work pays for that. If we get disclosures, we can get additional support".

"I was a member of [mentions national professional association] but have been disappointed by their lack of genuine promotion and support of Māori and Pasifika cultural supports. I withdrew my membership from [this association] and was going to join [another national professional association] but joined [a Pasifika one instead]. …I am passionate about setting up a Pasifika professional [mentions specific SV field] body to more appropriately support our Pasifika communities".

"[I'm] unclear about where [mentions Pacific association/collective] was, [as it was] non-existent with [mentions the name of the national NZ professional association/collective]".

These findings suggest that cultural and professional supports go hand in hand and thus both must be available to Pacific SV practitioners in order for them to carry out their work effectively. The type and extent of the cultural and professional support required will depend on the roles occupied. Of note is the reference to the availability of faith-based professional association supports.

(ii) "Religious", "Youth" and "Other" Supports Available

Though less was said about these supports, respondents also elaborated on the kinds of "religious", "youth" or "other" supports available to them. These are listed in Table 10.

Table 10: List of qualitative responses about the 'Religious', 'Youth' and 'Other' supports available

Religious (e.g., Pastoral support)	Youth (e.g., supervision, peer support, referral services, etc.)	Other
• Support of church leaders for spiritual guidance…need spiritual guides in our job from my understanding, as it is a heavy job and a lot of unwanted spirit-bag vibes • Pastoral support • Support for contacts via emails or phone calls for clarity or advice • Prayer support from churches • Referrals • Practical help • Pastoral care and prayer from family and Church (Christian) pastors • Pastoral care from small group of women that I pray with • Support from varying Pasifika church links	• Free youth help lines • Youth resources from [mentions two Pasifika NGOs that target Pacific youth] • Professional supervision and peer support • Referral services • Pasifika youth links [from – mentions professional counselling and education networks] • Support for contacts via emails or phone calls for clarity or advice	• A diverse pan-Pasifika network • Informal community support services • Family/Aiga/Sibling support

'Religious' and 'other' supports identified by respondents related mainly to Christian church-based supports, and to the spiritual/pastoral support of family or other informal Pasifika community networks. "Youth" supports related to both professional and peer supports for youth workers, and to gaining access to resources specifically for Pasifika youth. The following comments by respondents suggest that Pasifika SV workers draw

on 'pastoral' type support for their personal wellbeing and professional development from these informal church-based and family support networks.

"Family/aiga support from my siblings who encourage me in this area of sexual violence, in the form of prayer for me or practical support like health and wellbeing care and going for walks and regular family lunches".

"I am a senior member of my church leadership, [I] am able to design pastoral programmes as needed by our faith community. I have brought a range of awareness of key Pasifika messages via seminar speakers, introducing the stopping violence themes; family first information to grow awareness…".

These findings suggest that for some Pasifika SV practitioners, informal support networks (such as family members, personal faith-based groups, church leaders, and/or peer support groups) are available to them and are used to help support both their professional work and their efforts at self-care.

(b) Agencies that respondents work closely with to service the needs of their Pacific clients

Twenty-six (26) out of 40 respondents answered the question, 'Please list up to three agencies (outside of your own) that you work closely with to service the needs of your Pacific clients".[60] Of this 26, over half (61.5%) listed three agencies, 23% listed two agencies, and the remaining percentage (15.5%) listed only one. The list in Table 11 presents a range of different government and NGO services or agencies.

Table 11: List of Government and NGO agencies that respondents work closely with

NGOs	Government agencies or affiliated teams
• Catholic Social Services • The Fono • Taulanga U • Counselling Services Centre • HELP • SAFE • Le Vā • Friendship House • Pacific [Health] Coalition Group • Family Start • Fonua Ola • Family Action • Grandparents raising grandchildren • K'aute Pasifika • Presbyterian Support Family Works	• Oranga Tamariki • Police • Hospital • Counties Manukau SR Team • Ministry of Social Development (MSD) Work and Income NZ • MSD social workers • Interpretation Agency

60 See Q.26 of the questionnaire.

• Taeaomanino Trust • Mapu Maia • Porirua Whanua Centre • Aviva • Tu Wāhine • Youthline • Stopping violence services • He Waka Tapu • Outline [Aotearoa] • Mentoa [Trust] • Anglican Women and Children's Trust • EAP Services • Pasifika Counsellors' Collective (PCC) • TOAH-NNEST • Penina Trust • Takanini Villa [Sexual Harm Service] • Interpretation Agency • E tu Pasifika • Tangata Atumotu Trust • Purapura Whetu Trust	

The responses suggest that most respondents have access to a network of at least three agencies or services (either an NGO or government-based agency), that they can and do draw on. And that this network covers a wide range of SV related agencies or services from across the country.

3.2.6 Personal Work Goals and Aspirations

This subsection presents the results of section six of the questionnaire relating to respondents' work goals and aspirations, and barriers. Seventy-two-point-five percent (72.5% or 29/40) of the total questionnaire respondents answered the first question about goals and aspirations.[61] And slightly more (30/40 or 75%) answered the second question about barriers.

(a) Respondents' goals and aspirations

Respondents' goals and aspirations ranged from personal professional development goals (such as seeking higher level formal educational qualifications) to developing clinical and cultural practices, skills, and competencies for themselves and their respective SV fields, to supporting community and workforce development. These included:

- *"Mentoring/coaching youth social workers"*

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61 See Q.27 of the questionnaire.

- *"I would love to be able to work with a specifically Pasifika focused caseload within my current capacity as a probation officer (or senior practitioner) and to help expand our Pasifika networks"*

- *"Working with Māori, Pasifika, Asian, Ethnic minority clients"*

- *"To be a clinical psychologist that specialises in working with rangatahi in our justice system"*

- *"To progress in my career – which will mean leaving the organisation"*

- *"[To] gain a new skill; further studies; professional development; boost networking abilities; become expert in this field"*

- *"To continue to learn more about my own ethnicity so that I can apply it more in my work; [for] example – learning gagana Samoa so that I can talanoa with aiga when they come through our services"*

- *"Continuing in developing my practice in trauma, related specifically to sexual harm, to work within an agency that is diversely Pasifika and is holistic in its meeting [of] the needs of the community"*

- *"To help non-Pasifika practitioners understand/learn effective ways of working with Pasifika clientele"*

- *"To gain a Masters in Forensic Medicine; to encourage other Pacific nurses and doctors to provide medical care to people following sexual assault or abuse; to improve Pacific representation at the national level in this space"*

- *"Complete a Master's in Social Work; develop Pacific focused programmes in our community addressing SV and safety measures for our young people, etc."*

- *"To continue to provide the excellent service and the best experience I can for our clients"*

- *"To set up a Pasifika service for sexual abuse education, aiming around youth"*

- *"To gain a qualification to enable me to provide therapy to offenders"*

- *"Professional development to support future graduates to encourage effective, culturally sensitive/appropriate practices that [are] trauma informed and safe for everyone, including Pasifika survivors of sexual violence"*

- *"To be a lawyer"*

- *"My hope is to do a postdoctoral research fellow or research to further obtain survivor perspectives"*

- *"To set up a Pasifika service for sexual abused education aiming around youth"*
- *"[To provide] a safe haven for vulnerable men"*
- *"To help others discover their true identity".*

Respondents also spoke of the kind of impact they wanted for their SV work. In their own words, they stated:

- *"To continue being impactful in the recovery and healing for survivors"*
- *"Helping and support the vulnerable people, etc."*
- *"To provide a more safer and healthier environment for our community"*
- *"[To] empower women by providing positive parenting strategies and tools; educate girls to be economically savvy; provide better education"*
- *"To be able to continue to support those in our Pasifika community who have been sexually, physically and emotionally abused. To help them build resilience, strength and heal from the abuse by providing a safe space for them to be able to be open about the abuse they have suffered. Also, to provide positive coping strategies and skills so that they can heal and be their best self with the help and support of their community of support or village"*
- *"To help non-Pasifika practitioners understand/learn effective ways of working with Pasifika clientele"*
- *"To continue to provide the excellent service and the best experience I can for our clients"*
- *"To see sexual violence be discussed safely in our Pacific community, to see education shift from just about being a safe talk but also about the impacts and effects/affects both emotionally and psychologically [as] it does when SV occurs; what is consent in the Pacific context? To be really [a] part of that. I work in family harm and will continue to do so"*
- *"To continue providing counselling for Pasifika clients by offering clients a choice".*

(b) Barriers to achieving goals or aspirations

Three-quarters of the questionnaire respondents (30/40 or 75%) responded to the question about barriers to achieving their goals and aspirations.[62] Respondents had the option of choose one or more of the three response options or categories provided in

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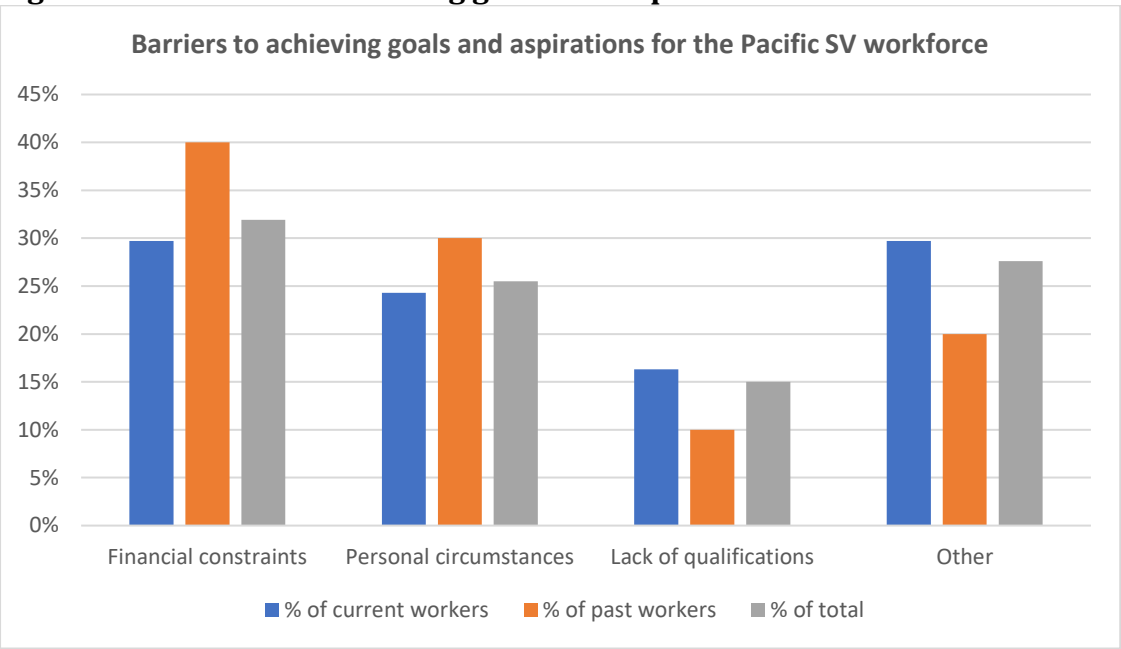
62 That is, Q.28 of the questionnaire.

the questionnaire, and if they were not satisfied with these options could also choose to respond to the "Other" category. As depicted in Figure 13, most of the respondents to this question (both past and current) identified the barrier category "Financial constraints" as the main barrier to achieving their goals and/or aspirations. This was then followed closely by the "Other" category, then "Personal circumstances" and "Lack of qualifications".

Figure 13: Barriers to achieving goals and aspirations



When invited to specify what "Other" barriers prevented them from achieving their goals and aspirations, respondents provided the following list:

- *"Exhaustion and burnout"*
- *"…lack of family support"*
- *"[Tertiary studies] – "I need to complete my [mentions tertiary qualification]"*
- *"[Child-care and family responsibilities] – "I have young children and am not interested in nannies or extended time in childcare, so I can only do this work at times that doesn't take away from my family"*
- *"[Lack of Pasifika providers] – "Lack of Pasifika providers in the wider [mentions geographical area], lack of Pasifika staff applying for jobs in this field of work, lack of opportunities for Pasifika in general to get into this workforce"*
- *"Time and support from different agencies e.g., funding"*
- *"[Lack of experience] – "New graduates need experience in working with sexual harm victims"*

- *"[Timing] – "Timing having just had my young children, now wanting to prioritise career aspirations"*

- *"A building – lease is so expensive; space and rooms are needed to facilitate workshops/groups"*

- *"[Cultural knowledge and understanding] – Sometimes inadequate cultural knowledge and understanding, language barriers"*

- *"[Lack of an agency that deals with Pacific serial abuse] – "No agency with serial abuse, Pacific Island, working in my area".*

These 'Other' barriers could be classified as relating to: 'workload causing burnout' issues, 'childcare and family support' issues, 'a lack of opportunity to gain appropriate formal experience or qualifications' issues, and a 'lack of opportunity to work for Pasifika providers in a geographical or specialist area' issues.[63]

While financial constraints were identified by respondents to be a considerable barrier to achieving their goals and aspirations, non-financial constraints were equally powerful barriers. The different goals, aspirations and barriers raised by respondents (past and present) provides interesting and useful qualitative insights into those things that matter or have mattered to workers and impacted their ability or desire to either reach their goals, stay on course or not.

3.2.7 Respondent final reflections and closing comments

This subsection presents the results of the final question and section in the questionnaire, i.e., section seven. This is where respondents were given the opportunity to share any final reflections or thoughts before the questionnaire ends.

Twenty-five respondents out of a total of 40 (or 62.5% of all respondents) took up the opportunity to make some final comments. These closing comments ranged from offering gratitude for the opportunity to provide input into this research, to requests for copies of the final report, to recommendations for the setup of a Pacific-specific or pan-Pacific service that would meet their perceived service gaps in the sector.

One comment reflects on the timeliness of the research given the impacts of the COVID-19 pandemic on Pacific families. Another provides an answer to a missed question. But all in all, these final responses offered further rich insights into the contexts and aspirations of respondents for the Aotearoa NZ Pacific SV workforce. The richness of the responses supports the use value of including this kind of open-ended question as a closing question in a questionnaire of this kind. The respondents share the following closing thoughts:

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[63] There are some possible overlaps between some of these "other' responses and the financial constraints and personal circumstances categories.

"I work for the only Kaupapa Māori sexual violence service in New Zealand and are not aware of any such service available to our Pacific peoples. I am pleased that my organisation does not turn away any Pacific peoples needing support and would like to see something like this available to the Pacific community."

"The need for more focused and dedicated interventions for Pasifika paihere (people in care) in SV is needed down here in [names location] and it would be great to see more of the providers from the [name of location] regions reach out to us here and share information about how we could possibly make that happen."

"I missed answering the question regarding Pasifika models or approaches and was unable to go back and complete this section. So, I am providing my answer in final comments. I find having an attitude of 'meaalofa'[64] and integrating 'talanoa' & 'whare tapa wha' helpful in working in crisis counselling".

"Private practitioners working with Pasifika are few. Our biggest financial struggle is high rents and overheads. We also do not qualify for many professional development workshops, grants etc., because we are not eligible. However, the benefit is that we get to practice culturally and authentically because we do not have targets and expectations of a western system to contend with".

"I would like to be more connected to the Pacific workforce in this space. I feel that many of us are siloed and don't know the landscape as much as we could."

"It would be great to have the option of attending cultural workshops online. I live in [location] where there are a few workshops, but majority are facilitated in Tamaki Makaurau. I have a small Pasifika clientele, but it is important for me to maintain professional development with challenges that affect the Pasifika communities. By contributing to this research, I feel that I'm helping in a small way."

"If we educate and address the abuse at an adolescent /youth age, we are giving them new tools or strategies for the future breaking the circle half-way thru life, so youth don't have to carry the blame and from young age."

"Sexual violence is a taboo to talk about in the Pacific cultures. So therefore, we need to inform the community how to access support, what is out there in the community".

"Doing this survey has highlighted for me the importance of accessing cultural supervision for working with my Pasifika clients".

These comments provide an apt closing for this section of our report. Overall, they raise comments in support of further developing and strengthening the Pasifika SV workforce of Aotearoa NZ and note the vital roles that government and non-government agencies, including research, could play in achieving that goal.

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64 "Meaalofa" is a Samoan word for gift.

3.3 Talanoa Findings

3.3.1 Talanoa Participants

Thirteen (13) participants took part in the talanoa sessions; 12 women and one man.[65] Five other participants had expressed interest but, in the end, could not participate due to health issues and/or work commitments. Most of the participants are New Zealand-born Pacific peoples.

Combining years of voluntary and paid work, the wealth of experience in SV sector among these participants vary from five to 40 years. A few of these participants started their journey as volunteers and then progressed into different roles by completing higher level formal NZ education qualifications. Table 12 indicates the ethnic, gender and practitioner or managerial status of our talanoa participants as an overall group. This at least provides information about three markers considered core to identifying the makeup of a Pasifika SV workforce.

Table 12: Demographic details of talanoa participants

Participant	Ethnicity	Gender	Role in Workforce
1	Samoan/ European	Female	Practitioner[66]
2	Fijian	Female	Practitioner
3	Samoan	Female	Managerial
4	European/ Fijian	Female	Practitioner
5	European/Māori	Female	Practitioner
6	Samoan/ Tokelauan	Female	Practitioner
7	Samoan/ European	Female	Practitioner
8	Samoan	Male	Practitioner
9	Samoan	Female	Practitioner
10	Cook Island Māori/ Māori	Female	Practitioner
11	Samoan/ Tongan	Female	Practitioner
12	Tongan	Female	Practitioner

[65] See section one, the background section of the report, specifically the subsection titled "Approach to reporting small numbers and specific participant roles and balancing confidentiality concerns". Here we decided on balance that it was appropriate in the interests of transparency and honouring 'cultural consent' to provide Table 12, that is to provide information on the ethnicity, age and job status (practitioner or managerial) of participants, and that to honour the protective aspects of the principle of confidentiality, to remove from quotes any specific reference to who the quote belongs to. This significantly reduces the risk of identifying participants from our small and connected Pasifika community in Aotearoa NZ while at the same time makes transparent the overall breakdown of the ethnicity, gender and practitioner/manager status of participants.

[66] For the purposes of this section 'practitioner' refers to someone who works primarily in a professional SV public or private practice or service/agency role as either a clinician, frontline crisis worker, educator, programme facilitator, and/or cultural advisor. 'Managerial' refers to participants who work primarily in a managerial, governance and/or administrative role.

13	Samoan	Female	Practitioner

Out of the 13 participants, a few are psychotherapists and are ACC registered and specialise in SV. The social workers working in public services interact with clients affected by SV largely through advocacy support.

Most of the participants in our talanoa sessions live and work in Auckland. There are also participants from the South Island, the central North Island and Northland.

2.3.1 Thematic Analysis: Twelve Key Themes[67]

Theme 1: Aotearoa NZ's Pacific SV workforce are isolated, scattered and do lots of voluntary or extra service

It was evident from most of our talanoa sessions that the Pacific SV workforce who participated are scattered and feel isolated across the country and within their respective services. Most participants spoke about working in silos within their workplace. Some participants used the opportunity to participate in this talanoa to connect, sometimes for the first time, with other Pasifika people working in the same area. The following participant provided a viewpoint typical among most participants who spoke about this:

"I think one of the things I really love about this project, this study, is getting to actually meet other Pacific providers because we are just so siloed and I don't know who is out there and we could be just so helpful for each other, but we don't even know the other one exists".

Doing voluntary or extra unpaid work for the sector is normal and ongoing for some participants, done on top of their paid work, and is largely invisible to the sector. This is driven in the main by their compassion and love for those who they believe are in need and suffering. The volunteering work varies from delivering food parcels after work to providing free therapy sessions for those who are either not eligible or no longer eligible for the ACC-sensitive claims. One participant shared, for example, that:

"My voluntary work has included work in the women's prison in Wiri, Auckland. I continue to work voluntary with clients who may not be eligible for ACC (e.g.) the historical abuse happened in the Islands, but they now live in NZ and do not qualify for financial assistance like ACC. I also work unpaid when needed for clergy".

Participants shared that doing work over and above their job requirements – doing extra – was because of a need to also support Pacific peoples unfamiliar with or overwhelmed by the state's systems and because often getting into this work was more than just a job, "it is a vocation". Another two participants explained:

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[67] While the themes are numbered, the numbering does not indicate any level of prioritisation. Rather, they are used solely for ease of reading.

"Yeah, I've experienced it all, but it was not only working clinically, but it is voluntary, you know, church and community work, but I suppose for me [it] is how can you not share their pain, you know? And their heartbreak, and the heaviness of your people and your client. So, when you work from a place of love, of course your heart and your mind and soul is engaged in the story of that client, and that part of you that is empathetic, and I have always been one that tries to be authentic, you know, keep authentic as a [practitioner], keep real. So, you bring that into the room [because] it is not just a job, it is a vocation"

"Yes, that is my role, that we do pre, before court trial, court process, …it is extra work again, so we do all that emotional, all the things to set them up going through the court case…."

This voluntary work also extends to educational sessions offered to vulnerable families that some participants met outside of work through non-work avenues or contacts. One participant spoke of giving back to the community and providing for those who are more vulnerable and ineligible for other services. One participant volunteered, for example, her skill sets gained from other professional roles to offer language courses to support women and children who are survivors of abuse.

"I have always had a fulltime focus and then tried to have a give back if you like. I also did some groups in that time with women and children because I was also an English teacher. So they did a bit of a mixture with some language learning and we called it Shakti Super Heroes, so we did some children's courses around them being survivors of abuse and just getting some very careful introduction to different ideas around them being survivors and what they've overcome."

Theme 2: SV work is deep, layered, time-consuming and sometimes emotionally overwhelming, but can also be satisfying and a privilege

Participants shared that working in the SV area, with Pacific clients affected by SV, can be emotionally overwhelming, involve deep therapy work and take lots of time. All participants acknowledged that SV involves complicated, complex and multi-layered issues. One therapist sums up her experience of SV as filled with "lots of shame" for survivors but notwithstanding she found that to be involved in their healing is for her a "privilege and satisfying". Having trust between therapists and clients makes a huge difference to whether or how quickly the healing from SV journey can begin once disclosures of SV are made. This takes time.

"As SV is very deep, often with lots of shame, it is difficult for survivors to talk about it. To be in this work gives survivors an opportunity to have their story heard and validated. This begins the healing process. Being instrumental in that healing process is a privilege and satisfying as a practitioner."

Working with Pacific clients affected by SV requires appropriate time and a safe space to heal and to be supported in that healing. According to participants, Pacific SV is often a hidden issue, a historical problem, that remains buried deep for a long time. It is not until the top layers – usually relating to family or domestic violence, mental health, personal anxiety, anger and/or depression issues – are uncovered and addressed that

the SV or abuse surfaces. This is evident in the following quotes by three different participants.

"Quite often I find that with family violence the SV normally is in there. So, in that pattern of violence… so, in terms of trauma there is a lot of stuff that is hidden in there under family violence."

"So, as we know when you build emotion eventually it has to vent itself, it has to release itself and often these are done in those emotional times where whoa just flip the lid, bro, it didn't just start yesterday, it didn't start when your wife told you, you were useless and all that sort of thing. These are things that are really deep seated and unfortunately you haven't dealt with it."

"When they are getting fa'ali'i (angry)[68] they think they are just getting fa'ali'i because someone called them a brown so and so. But realising when we dig deeper [it] is actually connected to some of the blooming fa'ali'i that happened to them when they were young, and they have never dealt with it. And all they do is suppress it and they are getting older."

The implication raised implicitly by many and explicitly by a few participants, is that there were more participants taking extra time without support than with support. In other words, participants were 'taking the appropriate time' voluntarily in order to achieve the results desired by the process.

Participants spoke of how unpacking SV also depended on their client's readiness to deal with the issues once disclosed and the trust relationship built between them. This often meant they needed to be patient and careful not to rush their clients. It also meant for workers with their own histories of violence that they too have to constantly recheck themselves that they have sufficiently dealt with their trauma and have faced it and have accessed help for it. This is evident in the following quotes by two different participants.

"We need time and patience not to get in until clients are ready to get into it."

"It is also about your readiness to face it because [for] some people like revisiting their trauma, is like facing a lion. So, it is about their readiness to face it, and [for] people like myself, I was ready to face it, but I did not have time to digest it and reflect [on] it and when I allow myself to sit in that space, because it was part of work, it actually swept me off my feet. But at the same time… I needed support and help from those around me."

Theme 3: Pacific SV workers rely on Pacific practice models, frameworks, and approaches in their work

Participants used different techniques and approaches, and wove or brought together different practice models, frameworks, paradigms, to find what would work best for their clients. Some participants used metaphors to help communicate and discuss sensitive SV issues with their clients. Metaphors are used to also describe the way they

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68 In the context of this narrative, fa'ali'i is translated as angry.

saw and worked with "cultural and professional clinical values". As one participant shared,

"Using a metaphor of dancing, constantly weaving and moving in and out, creating a safe space with no boundaries – part of healing – and the dance is intertwining between cultural and professional clinical values."

Participants shared being familiar with both Pacific and western models of health, education and care, and that for many these were easily accessible in their workplaces. For others, most notably those who did not work in a Pacific specific programme, service or agency, finding the Pacific models they needed was something they had to do themselves.

"I think when it comes to the Pasifika models that I use, it is definitely something, sadly, I have had to implement personally. My work environment is still very much a western system and so it has kind of been… especially when I've been going into classrooms, where like a lot of our content is very educational but it can be placed in 'this is what we perceive to be right and wrong', which can really affect Pasifika's value systems that are [different and] really rooted from a young age."

Some participants acknowledged the use or integration of western approaches such as Narrative Cognitive Behaviour Therapy (or Narrative CBT) in their practice alongside their understandings of Pacific models and values in their work with Pacific SV clients. One participant implied that her Pasifika approach draws from her a "identity" as a Pasifika person. She explained:

"I work from a Narrative CBT approach (Cognitive Behaviour Therapy) to address [the] thinking and behaviour patterns of my clients. [And] If I know my identity in the "Pasifika" part of me (as I am also palagi), if I know how to connect back to myself on a personal level then I am well able to extend the spiritual values, mana, connection, language, culture, customs and vā into the therapeutic space when working with my Pasifika clients. I already am!"

Other participants noted bringing together different Pacific models or frameworks such as the Fonofale and the Teu le Va in their work with their Pasifika SV clients. One explained that they integrate different relevant frameworks to help their clients:

"The Pacific models that I use are Fonofale and Teu Le Vā frameworks. Yes, I use an integrated approach and [this] integrative approach is a combination of two or more theories or two or more models or frameworks that can help understand a client's problem."

Yet another participant noted trying to weave together the western/Pākeha/Palagi models and Māori and Pasifika models, concepts and values they have to work with, but implying that the integration is not always successful or necessary.

"Yes, I was not happy with what I had to present to the [group] when [my SV service] gave me their so-called programme, it was …very, very kind of like, here are the …topics, just talk to them about it. I was [like] wow, surely, it is a very Pākehā or Palagi based…so I not

trashed it, I started off with it, but I was real fortunate that with the parenting programme, anger intervention parenting programme that I'm on at the [name's another service], we do have a model there, and that is, we base it on Te Whare Tapa Whā model, the Māori wellbeing concept. Of course, Pasifika have got the Fale model. So, it is very much I operate my delivery on the basis of the spiritual, the physical, the mental, and just on the relationship side of things as well. So that's how I approach my [SV group] and deliver what I have got to deliver, and [have] prepared when I'm speaking with them, individually or in the groups. So, a lot of the things is standard talanoa, we check in. We see how they are doing in all those four areas, and as you know, it only takes one of those things to be not functioning properly and that kind of reflects, that impacts the whole of your wellbeing, and that pretty much takes a large part of our conversation, our talanoa."

Being open to a reflexive process that includes assessing the structural and practice contexts of their workplace, can help practitioners determine the value of adopting a framework, model or method, or not. One participant suggests that this can allow one to 'think about the box' and its constraints.

"Absolutely, it is definitely frameworks and models and methods, you know, we work in a community or we work in an agency that has a structure. So, if we look at it from a perspective of how we practice those frameworks, guide us to allow us… how do we take this person's narrative and place it here so we can have someone who is still thinking in the box to actually go, 'well have you thought about this one, can you fit it in your box'?"

Theme 4: The vā is a central organising principle in Pacific models of care

Underpinning the talanoa of most of our participants about their practice with Pasifika clients is the vā principle, i.e., the principle of looking after or caring for relational connections and responsibilities. All participants noted an understanding that relationships are important in Pacific spaces. Those that actively applied Pacific models spoke of working with Pacific clients in ways that assume the existence of a vā connection, a connection that must be honoured and respected, and was reflected in their approach (e.g., in "the tones" employed). Two participants shared:

"I think the one key thing while we have the Fonofale model, or one thing that stood out the most was the vā, was about the space, about the respect and the connecting or before the talanoa occurs is that vā between me and that person"

"Then with the vā, it was really that. That was the first step, was respecting the fact that what they came through, now is my turn to put their faith in me or to trust me through this process, and it was about the tones. It was also about le vā fealoaloa'i (a relationship of reciprocity or mutual relationality), how I'm respecting their journey and where their mindset is at".

Theme 5: There is a disconnect between holistic Pacific models or frameworks of care and current state SV funding and assessment regimes

Participants identified that while Pacific models of care were holistic, programme and/or government funding systems and regimes were not. Participants suggested that

funding regimes that resourced SV services operated on a logic that often presented barriers to delivering culturally appropriate, holistic, long-term therapy services for Pacific peoples. Participants noted that accessing the kind of funded therapy services that are both holistic in their approach and able to be easily extended is difficult. So much so that one participant decided to go into private practice to avoid these barriers rather than to persevere with a mainstream publicly funded and managed service.

"I made a decision to go into private practice so that I could apply cultural ways of working without mainstream expectations of delivering numbers, levels and outcomes. I wanted to work holistically in a way that would honour Pasifika culture in a way that seemed more authentic to me as a therapist."

For ACC regulated therapy sessions, applying for more sessions required the client to have to engage in an assessment process where they would have to retell their story to an assessor who they often did not have a relationship with, and for which for some clients was retraumatising. On top of this is the wait for approval from ACC, which was seen as additional stress, and as well for those who decide to prosecute their offender/s, added a further layer of stress, having to deal with the sometimes-overwhelming challenges of going through the court system.

"While waiting and waiting for the ACC, it is additional stress and not getting there… and then another thing, you have to retell your story again, and you're waiting, and then when there is sentencing, or to go through the trial, you know, all this other thing it is overwhelming. It is overwhelming and when they come closer to the, for example, waiting for 2 years' time, closer to the thing [the court case], the more stress. Some of them, say oh, I just don't want to go through it again. … Yes, and some of them are having those thoughts, man, I shouldn't have done [that], go forward. We want them to go forward but the system..."

In terms of ACC registration not all Pacific counsellors and psychotherapists are registered, but of those participants who were, they raised interesting discussion on the challenges of registration and working to ACC standards. The process of becoming a registered therapist for ACC and other professional bodies were said to be in themselves a barrier. Here the registration process and on-going registration requirements have financial and time (and sometimes upskilling) costs that not everyone can afford. The process for extending ACC funded sessions was also, for some, off-putting. The terms of the application for more therapy sessions process seemed to them to either ignorantly or unfairly question their professionalism and/or the validity or effectiveness of their approaches.

"With the ACC process a lot of our people, a lot of the Pacific counsellors and psychotherapists have been put off by the process. The reason being is like just the paperwork that is involved, it just overwhelms them and also to the requirements of training and reporting… and after so many other sessions you have to do another report and all of these progress reports that are attached, to just to validate and justify more sessions for our people - it is a barrier."

"It is the paperwork and the reports to justify, and also too they find ACC at some stage they think they might need a bit more, then ACC have their own psychologist and their own

medical staff [to] look into it as well. So, they interview the client and that is where it can be hard for the client because then they have to tell their story again to an ACC psychologist around what had happened. So that causes tension too within the ACC and amongst the Pasifika practitioners too, because for us it is about relationship. The relational aspect, vā tapuia, and it is almost they come back feeling more traumatised, and they don't want to go anymore, they don't want to do counselling anymore."

Theme 6: Professional and Cultural Supports are critical to the wellbeing of Pacific SV workers

Some participants saw advantages to working in public organisations and that this lay in having access to professional development and supervision. Unlike the participants in private practice, public agencies could more easily shoulder the financial cost for this. However, the Pacific therapists we spoke with working in SV acknowledged the importance of and need for professional supervision (especially clinical and cultural supervision) and self-care. Two participants explained as follows:

"I continue to receive essential cultural supervision regularly. I also have support from Pasifika academics and colleagues that understand, support and contribute to the wellbeing of Pasifika peoples. There is a lack of financial support and eligibility into mainstream funding for private practitioners. I often have to spend money to attend professional development courses, conferences that groups would get to attend free because of government funding and eligibility. This also applies to office expenses and overheads, no help there for private practitioners."

"So, how I took care of myself, I suppose definitely like clinically you needed the critical cultural supervision, it is so important, and that is what I've emphasised with a lot of our Pasifika practitioners – keep up, maintain regular professional clinical cultural supervision. It is important that you keep doing that because you have to talk to somebody about these cases"

Having a suitable supervisor who understands the practice approach and values of the therapist also helps. One participant found that having a professional supervisor that was Pasifika, where they didn't have to "spend half [their] supervision time explaining why [something was] important in a Pasifika context" was crucial.

"What really helped me, I worked really hard to find a Pasifika professional supervisor, because in our work force they pay for our professional supervision and I refused to get one until I knew they were of Pacific descent themselves and could understand. Yeah, I wouldn't have to spend half of my supervision time explaining why that is important in a Pasifika context … having someone who I could go to and say this is what is going on and they could understand that kind of world view was really helpful for me"

Participants who were ACC registered counsellors and worked with Pacific clients recognised the lack of Pacific registered therapists specialising in SV. Those we spoke with yearned for appropriate cultural support or supervision, and/or for the opportunity to work collaboratively with other professionals to improve the services

they offered to their Pacific clients. Some find that this kind of cultural support is what is missing for them. One participant found:

"There is such a shortage of ACC registered counsellors, psychologists, therapists and you can get ongoing long-term support if you can find at least one of those people."

One participant spoke of a support group that was part of the Nga Vaka o Kainga Tapu program which provides a framework for assessing family violence within Pacific communities, promoting an ethnic-specific approach. She stated that this support group is available to her when needed, especially when there are issues from SV clients and their families from the same ethnic group.

Theme 8: There is a need for more specialised Pacific SV workers working in ACC, Justice, Police and Courts

Participants spoke about the lack of Pacific SV workforce presence in ACC and Courts, including in evidence video ('EV') units within Police and Justice. They emphasised the importance of having Pacific representatives there as Pacific professionals play important roles as navigators to support Pacific families and clients going through these, sometimes quite alienating, processes. Access to support services for Pacific families and clients to help them navigate the justice system, including language translation services was, according to a few participants, difficult for some of their clients. One participant spoke of having Pacific navigators with clinical and cultural experience providing support to Pacific clients and their families, to help them navigate state systems. This can help eliminate or reduce their frustration and sense of alienation in the system. Two participants shared:

"Just what she said about people need navigators. They need people they can feel safe with to navigate those systems and it still does feel very siloed between Oranga Tamariki and the court system, the police and then treatment agencies. They are all very disconnected"

"I've been trying to champion one person, you know, in there. Sometimes it just takes one or even in the EV unit, so have a social worker in there, a Samoan social worker. For our people to get into the court processes for Pacific people, and the legal support, and even in the area of restorative justice, that is a missing link at the moment in SV area [for] people."

Participants observed a need for more Pacific therapists to work in the court system when Pacific SV clients and their families are involved, and for more Pacific ACC registered psychologists supporting Pasifika. With regards to this, two participants shared:

"But the process itself, the court case, we [do] have court support people there, at the courthouse now, but the sexual side of it, unfortunately, it still doesn't get a big say inside the courtroom, because sometimes like the children can be in a room at [the] time - so, they don't see the offender - but sometimes the women don't get that…."

"I think for ACC we need more, because my daughter is [in] her first year at University of Auckland [to] become a psychologist. And for me one thing is [there is] a big gap here, is

that police interview, you know, because with cases coming in, it is now and again, I go and attend, shortages across, and the court process, I would love more [in] court up here… more work around supporting and encouraging, not only Pasifika workforce, but survivors coming through the system."

For another participant who works with ACC funded clients, they noted doing so because of a desire to help disadvantaged people suffering from SV, who without ACC funding would not get the therapy they needed because they can't afford it.

"I think the fact that ACC funds therapy for people around SV and not so much domestic violence or other forms of trauma is a reason why I work more in that area. I wanted to work in the area of trauma and I also wanted to work with people who couldn't ordinarily afford therapy."

Theme 9: The Pasifika SV workforce draw on faith values to assist and inform their work with Pasifika SV clients

A few participants' spoke of how their religious or faith values assisted and informed some of their work with their Pacific clients. For one participant who was able to do some of their SV placement training in their Pacific Island country, they found that by drawing on shared Christian faith beliefs this helped to provide the culturally sensitive language frames and tones needed to address the SV offending of the chief in that context, complete with cultural and biblical metaphors and proverbs. The participant shares:

"The village issues were like family violence, there was sexual violence, that was happening in the villages. …So, a case example is a village had referred a [case of a family] with family violence, and also too, sexual violence, that was happening in the family. So, there was talk that [the chief] was sexually abusing his daughter. So, my job was to go and sit [and talk] with this [chief]. I can remember writing up the case where, first of all, you know, just the protocol [of] that humility [needed] because you are really aware of the vā, like it was happening there, but there was also too a respect and humility of being able to go [there in the first place]. So, my father trained me up. So, my father would get me to sit down before facing [him], get me to practise [my language and approach[69]] in a way that was appropriate and respectful to this old man. And he was an old man, he was old man in his 70s. So, there was a lot of grounding that went into it. So, …being able to approach him in humility and being able to sit and ask if there was any support they needed, you know, just coming in from that place of support for their family, and he was quite defensive. …So straight away, you know, to that difference, I suppose, that I come from New Zealand with this education and coming into his family. …So, we talked about that, you know, we talked about the (SV) and I said to him (spoke in ethnic language, making a humourous reference to a biblical proverb). …And of course, he laughed, and it broke the ice, you know, never mind the village, never mind New Zealand, never mind what the village is saying. It was being able to talk about God has a plan for your family and something is happening and that broke the ice. And he laughed, and I could hear some of the people at the back

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69 For confidentiality the ethnic language used by this participant is not used, English translation used instead.

laughing, you know, and that was an inroad into, you know, just what was happening in his family and the stresses that they were experiencing. Then he went from there (laughs), then he threw some scriptures [at me], you know, he threw some scriptures because you know he is a church going man, he is head of [his family], and he was really aware that in the back, you know [of] the [open house], everyone was listening. He threw some scriptures around, you know. Then I …like we talked about the sun, and about the rod, …we were talking in those terms, but it was really – that is what I love about the use of metaphors and symbols and proverbs, our values, because you can talk about the story but not talk in the story, but talk indirectly to say hey, I'm here, because of the violence, physical and sexual. …we were talking in scriptures too, you know, and it was really good. It was from there, when I said the rod is used to guide the sheep, it is to guide, it is not to hit, you know, of course he was laughing. Then he said he was talking about the disobedience. But from there that was, yeah, we were able to talk about what happened, the violence and how he needed support."

When the placement ended for this participant, on their return to New Zealand, when they shared their learnings of this case with their Pākehā lecturers, they were surprised at how concerned they were. This participant puts it down to a disconnect between "two different worlds".

"So, of course, I come back to New Zealand, I write up the case study, I present it to my [Pākehā] lecturers and they were really concerned that I didn't address the issue and they were concerned about the confidentiality aspects because the survivors were in the fale, you know, listening in. I was walking in two worlds, just two different worlds, and I think that is where I can see we are needed in both worlds. We need to walk, navigate, in both worlds, you know, to validate our way of being able to work with our [Pacific] people."

In relation to where "faith comes in" to their practice, this same participant finds that it is part of all healing to find context and if the context requires drawing on faith beliefs, then that is what is necessary. Because a lot of Pacific families have strong faith or religious (especially Christian) beliefs, being able to connect to this faith is a strength. This participant understands the tensions of drawing on faith beliefs in a secular state environment. However, this participant implies that working in context means being open to making sure those "boundaries are fluid", like when "doing a dance" and you need to be in sync with your partner if the dance is going to go well.

"I suppose for me the boundaries are fluid. I describe it is like doing a dance you go between, you know, the boundaries because part of it is their story, they are wanting to tell you their story, so being authentic in their story, in their talanoa, is being able to allow them that open space with no boundaries. Because that is part of the healing, and I suppose that is where your faith comes in. I mean, my personal faith helps me to go deeper, you know, with clients, to go deeper, but in order to go deep as a practitioner, there is also being able to bring them back to the present moment, you know, being able to bring them back, to ground them and centre them [again] before they go home again. So, the boundaries for me are fluid, but that is where we need like a cultural supervisor that understands that dance that we do [in our practice], because it is spiritual too."

This view of the value of faith beliefs to Pacific practitioner approaches to working with SV clients or groups is echoed by another participant who works with people from

different gender and sexual orientation groups. The participant shared that their cultural values and faith values informs the way they interact with people of different sexualities, suggesting that while they may not agree with a 'sinful' act they – in accordance with these values – can leave judgement aside and work with the person before them.

"So, if a [client] has got an issue with the fact that [they] might have, and I have got a few who are …gay in that area. So, I have learnt through growing up in my own Pacific culture we don't treat those people any differently, and I learnt this lesson really well with my faith that God hates a sin but loves the person. …I guess I take a lot of comfort in being able to do that when I sit next to somebody who is of that sexuality, and also, I don't have that issue, I don't actually see them in those labels. Sometimes they would ask me, 'doesn't it bother you, that I'm [gay]', and I said, 'you know what, I didn't even know that you are [gay], what brings that up?' … [They say], 'oh, I thought all the information you would have been given by my blah, blah, blah, that you would know'. …I said, 'well, no, because I don't ask for that information and it doesn't matter to me'. …So, I guess, I carry those that values that we treat people the way we ourselves like to be treated regardless of our stance, regardless of our position with our sexuality and also our faith. …I'm actually, really, kind of hold dear to my faith, you know, I know the difference in being able to work with people who are gay and being able to work with different types of people, you know, you don't judge them according to actions. It is the actions that are actually what is the problem and not the person. …So, I carry that in my work, and I guess one of the things as a Pacific person, is really generally wanting to let that person know and the other person, the client …they don't have to reveal anything to me, they do it in their own time. I'm not here to try, because I'm not a counsellor and I state that right at the end, I said I'm not a psychologist, I'm not going to try and read your mind or anything like that, but I know that you have got issues that you are working through, and I want to walk alongside you. So, because you've come to see me those issues now become a part of me, and we are going to do this together."

Theme 10: There is a crucial need to educate and mentor students into the Pacific SV workforce

One crucial need spoken about by participants is the need to grow the workforce of Pasifika SV practitioners and that this could be done by creating more opportunities for mentoring and supervising students. One participant advocated for this in therapy training, especially for student placements "that encourage Pasifika values and considerations in therapy".

A participant working in the education sector advocated for ongoing and culturally informed sex education in schools by sex educators so young people can access information and resources properly and be able to address sex, sexuality, consent and sexual violence and harm issues sensitively and appropriately. The suggestion is that training curricula for youth sex educators ought to include deeper investigations into the ambiguities of sex and consent across different cultural and ethnic settings.

"I think a big thing I would love to see [is the] kind of shift, is just more accessible training around sexual harm, especially for our school counsellors and even teachers. …But by

understanding, I think, creating that accessibility for greater education around sexual harm prevention, around what consent means, what does sexuality look like verses attraction. All these different parts that exist in our education system [that] we are teaching our young people, I think that in itself would be awesome to see our school counsellors and our teaching staff, even just having more access [to that]."

Theme 11: The Pacific SV workforce needs to grow, consolidate, and be more visible

Participant talanoa on the needs and aspirations of the Pacific workforce focused overall on growth, retention, consolidation and visibility. The narratives of the following two participants were typical of participant comments:

"My future aspiration, I would like to be a specialised Pasifika around this trauma, and being able to lead a team, being able to lead others, our people [who] come into [this]. I would love more to come, and if we can run our own practice in [provides location], a Pasifika one, it would be awesome."

"My hope is the Pasifika SV workforce will continue to grow and will continue to progress and I will encourage practitioners and Pasifika practitioners to apply for ACC registration."

Some went further in their articulation of a need for a strong Pacific SV Network. One participant stated:

"I think that is an aspiration would be that we are more, that our network is stronger or that [it] is already a strong network and I just need to go and join it."

Connecting these workers and their aspirations as a network requires some coordination. Most of the participants interviewed were not connected to or aware of Te Ohaakii a Hine – National Network Ending Sexual Violence Together (TOAH-NNEST) and its emerging SV Pacific network (which is currently a branch within TOAH-NNEST), or any other Pacific network for SV. This underpinned comments about a need for a more visible and connected national Pacific SV network.

Theme 12: An active national Pacific SV Network, Fono and multi-agency service is needed

As a number of participants were not familiar with or connected to a professional association or network, and/or had not heard of TOAH-NNEST's Pasifika network, a call for a collective or national network was perhaps unsurprising. The following participant's comments reflects this sense of disconnection:

"I think we need a National fono for all Pacific SV workers."

For those who were aware of TOAH-NNEST's Pasifika network, there was support expressed for it. This is captured by the comments of one participant who shared:

"So, I am part of TOAH-NNEST's Pasifika network as well and encouraging, and [have] always given that space the opportunity."

Two participants suggested the idea of a "medical service for sexual and family violence" for Pacific peoples – a "multi-agency Pasifika service or centre" of sorts, that is Pasifika led or run. South Auckland is raised as a location site for the medical service, presumably because of the high proportion of Pacific peoples living there. Interestingly, and perhaps understandably given the shared cultural links between Māori and Pasifika, Māori are included in the visioning of this multiagency Pasifika centre.

"Having a medical service for sexual and family violence in South Auckland that is accessible to people… That is, like a state of the art, the best facility in the country in South Auckland...."

"'Multiagency Pasifika' should be in there. Some Māori and Pacific ethnic groups in there or have a Pasifika service like a multiagency centre. We have got enough doctors out there, we have got enough clinicians in there, psychologists, counsellors who are Pasifika, why can we not do it ourselves."

3.3.2 Summary of talanoa findings

The narratives of these 13 participants (all of whom represent a range of roles in the Pacific SV workforce from across Aotearoa NZ) provide key insights and lessons for discussion around the experiences and concerns of some in the current Pacific SV workforce of Aotearoa NZ. The following summary highlights the key thought areas raised by participants in their talanoa discussion.

The workforce is scattered and isolated

From participant narratives it is evident that the workforce is somewhat scattered, isolated, and engaged in voluntary or extra service. Considering that a number of participants expressed working in silos within their areas of expertise, a network that can bring them together to support each other seems both necessary and reasonable.

Some within the workforce engage in voluntary or 'extra' service'

While the volume of voluntary or extra service work shared by participants is unable to be revealed through participant narratives, the stories told and reasons shared for why they engaged in these efforts indicate a need to look more carefully into the context for, and impacts of this, on workforce growth and development.

The workforce is frustrated with current state system approaches to funding and assessing Pacific SV cases – an approach considered culturally alienating

There is clear evidence from participant talanoa of workforce frustrations with the current state system's approach to funding and assessing Pacific SV applications for ACC funding support. Accompanying these expressions of frustration are strong suggestions that the system is culturally alienating. A close review of the assumptions within Pasifika workforce articulations of the tensions between their approaches to SV work and ACC or other state agency or professional association standards and requirements is needed.

While some practitioners can work privately to better tailor their services to meet Pasifika needs, not all are in that position. Those who continue to work in mainstream agencies, however, find that they have better access to professional development opportunities, including cultural and clinical supervision. Those working in both mainstream and private practice settings have reported resorting to providing some of their Pasifika clients or peoples with 'extra' or voluntary support, sometimes free of charge, if needed.

Practitioners who apply their faith-based values argue that for them these are part and parcel of their Pasifika values, but recognise the tension of doing so when working in a secular state environment.

While SV work is deep work, multi-layered, time-consuming and sometimes emotionally overwhelming, it can also be satisfying and a privilege

Participants recognised that SV work can be hard; it's deep work, multi-layered, time-consuming, and sometimes emotionally overwhelming. However, for some it is also work that can be highly satisfying. Many feel that it is a privilege to share in the healing journeys of their clients, and that this work has become for them more a vocation than a job.

Practitioners may use a mix of Pacific, western and Māori models and/or frameworks of care in their practice

Participants were familiar with Pacific, western and Māori models and/or frameworks of care in their practice. In particular, the Fonofale, Teu le va, Te Whare Tapa Wha and Narrative CBT models/frameworks, but also – though to a lesser degree, the Nga Vaka o Kainga Tapu frameworks. Overall, participants utilised one or more of these models/frameworks in their practice, integrating them in ways considered appropriate for the case at hand.

The vā was considered a key Pasifika principle of care that underlined Pasifika SV approaches to both crisis and prevention work.

It is critical to understand what consent looks like in different Pacific spaces and how to talk about these in empowering ways

Participants were aware of the taboos surrounding sex and sexual violence in Pacific spaces. However, the need to probe into 'what consent means' in different Pacific contexts was raised as critical to delivering effective sex education to Pacific peoples, especially young people, to achieving prevention goals, and/or to gaining self, family, group and/or community empowerment.

A more holistic public funding and assessment system is needed that can respond to Pacific approaches to SV, and reduce the need for voluntary or extra work

Participant talanoa suggests that a more holistic va-oriented framework for funding and assessment support of Pacific SV clients is needed. This may address the tendency and

suggested need to give voluntary service to clients who fall within the gaps of the system.

More specialised Pacific SV workers are needed in key state agencies involved in SV prevention initiatives and crisis interventions, including sex educators

Participant talanoa imply a need for more specialised Pacific SV workers to advocate for and support Pasifika SV survivors and families through state agency processes, especially ACC, evidence units (within Police and Justice) and the courts generally. This specialised workforce would hold competencies in relevant clinical and/or cultural knowledge and skills or be able to easily access these.

Participants also noted that more specialised education and training opportunities is needed around Pacific sexual harm prevention and crisis interventions, including those informed of the ambiguities of sex and consent in different Pacific youth, community, family and ethnic-specific spaces.

To thrive the Pacific SV workforce needs to grow, be more connected and visible – a national 'by Pacific for Pacific' network and multi-agency service might help

The Pacific SV workforce needs to grow, be more connected and visible to each other and the wider SV sector. Participants spoke of a desire for a national network and multi-agency service that is 'by Pacific, for Pacific', and capable of providing quality specialist clinical and cultural services for Pacific clients, recognised and supported by the state, NGOs, communities and families. They also spoke of the need to support and grow student training opportunities and placements in the SV sector, and increased use and recognition of Pasifika care models/frameworks/approaches/concepts.

4.0 Conclusions

From our literature review, online questionnaire, talanoa sessions and stakeholder fono feedback findings, the project draws the following conclusions in response to the research question: "**What are the experiences and support needs of Pacific peoples in the sexual violence workforce**"?

We start with conclusions about who constitutes the Pacific SV workforce, then provide conclusions on their key support experiences and needs as a workforce, and end with conclusions relating to further research. There are some overlaps between these sections (particularly the last two) but are seen and thus organised separately because they focus on different aspects of the overall research question.

4. 1 Who constitutes the Pacific sexual violence (SV) workforce of Aotearoa New Zealand (Aotearoa NZ)? (Where are they located geographically, what are their workforce roles, what is their demographic profile, how long do they stay in the workforce for, and how many Pacific clients do they work with?*)*

4.1.1 Overall, the Pacific SV workforce of Aotearoa NZ is made up largely of workers of Samoan ethnicity (50.9%, according to questionnaire findings). They are well qualified (i.e., 80% of the workforce have completed an undergraduate degree), mainly aged 40 years or above (approximately 70%), are overwhelmingly women (approximately 95%), largely resident in Auckland (about 63%), working for a non-government organisational (NGO) in Auckland.

4.1.2 With regards to the workforce's ethnic breakdown, we find that the Pacific SV workforce, whilst largely Samoan, also includes a rich number of smaller representations from other single Pacific ethnic groups. That is, it includes people of other single Pacific ethnicities (e.g., of Tongan, Fijian – both Indigenous and Indo Fijians, Niuean, Solomon Islander, Tokelauan, Cook Islander and Tuvaluan) ethnicities, and of mixed Pacific ethnicities, and mixed Pacific and non-Pacific ethnicities.

4.1.3 With regards to geographical locations, the Pacific SV workforce, whilst located mainly in Auckland, are also spread across the rest of Aotearoa NZ, albeit in smaller numbers. According to our questionnaire and talanoa results, outside of Auckland respondents are located mainly in the greater Wellington areas (including Kapiti and Porirua), and in the Christchurch, Dunedin, Tauranga, Northland, and Hamilton regions.

4.1.4 With regards to workplace sites, while most of the Pacific SV workforce are employed with a non-government organisation (NGO), most of these NGOs collaborate closely with government agencies and some are part of various Pacific professional networks or associations (e.g., the newly emerging Pacific SV workforce network coordinated by TOAH-NNEST's Pacific steering group, the Pacific family violence (FV) network such as that led by Pasefika Proud, and/or Pacific health, counselling or social work networks or professional associations).

4.1.5 In terms of workforce roles, according to our questionnaire and talanoa findings the Pacific SV workforce comprises largely of social workers and counsellors. Smaller numbers work across a broad range of clinical roles (e.g., in nursing, crisis support,

psychotherapy, and forensics), and to a lesser degree in peer support, pastoral, education, health promotion, interpreter/translator, and/or manager roles.

4.1.6 In terms of how long Pacific SV workers might stay within the workforce, based on questionnaire responses, most will likely stay two years or less, but for those who stay beyond two years, most will likely stay up to six years with only a few staying beyond that.

4.1.7 In terms of the Pacific clientele of Pacific SV workers, for most of the past and current Pacific SV workforce who responded to our questionnaire, their Pacific clients make up less than 20% of their total clientele lists. Of those there is a wide range of Pacific ethnicities represented but most are likely to be Samoan, Tongan, Cook Island and/or Fijian (both Indigenous Fijian and Indo-Fijian). For those workers who have been employed by the SV sector beyond six years, the proportion of Pacific clients in their total clientele lists increase, with only a few of the respondents who have been with the sector for 6+ years (11.4%) noting that 91-100% of their total clientele were of Pacific ethnicity.

4.2 What are the key support experiences and needs of the Pacific SV workforce?

The Pacific SV workforce needs more cultural and clinical supervisors

4.2.1 To carry out their work effectively Pacific SV workers working with Pacific peoples affected by SV require ongoing cultural and clinical (or other professional discipline based) supervision. But there is a lack of available supervisors with Pacific cultural and clinical knowledge and expertise to properly service the demand.

The Pacific SV workforce draws from informal, formal and pastoral support for self-care

4.2.2 Alongside the pastoral support that Pacific SV workers may receive from cultural and professional supervisors, they also receive support from personal networks, such as family and church-based groups. This support contributes to how Pacific SV workers care for self, deal with 'compassion fatigue' and balance work-life pressures. The sector needs to recognise the necessity of this informal support in its Pacific responsiveness strategies and support mechanisms.

The Pacific SV workforce is currently "fragmented and scattered" across the sector but advocates strongly for the need for a formal Pacific nation-wide SV workforce network and multiservice agency

4.2.3 From literature review, questionnaire and talanoa findings, the Pacific SV workforce sees value in having both a nation-wide network and a multi-service Pacific-led agency that can bring them together as a "workforce network" to coordinate Pacific expertise, referrals, interagency support, and do advocacy work.

4.2.4 Pacific SV workers work in government, private and/or NGO workplace settings, across Pacific, Māori and/or 'mainstream'-led[70] organisations. The Pacific SV workforce is, as a group, fragmented and scattered across these workplaces and Aotearoa NZ, many working in silos and having little to no opportunity as yet to come together to become a widely known, fully functioning nation-wide "workforce network". The SV sector must invest time and resources into consolidating this 'Pacific SV workforce network' if it is to grow and thrive.

4.2.5 Our literature review, questionnaire and talanoa findings strongly support the consolidation of a Pacific-led Pacific SV workforce network and Pacific SV multiagency service that can represent, reflect and/or give voice to Pacific values and Pacific SV workforce experiences and needs in the sector.

4.2.6 Pacific SV workers found that because of the complexities of formal state systems (e.g., Police, ACC, and Court systems) when dealing with SV cases, they, and/or their Pacific SV clients (including families), can get overwhelmed and feel alienated and/or retraumatised by these systems. Solutions such as having access to 'navigators' to help workers and their clients better navigate these systems was considered a need. This 'navigational' support would include improving knowledge of state and NGO (including private business) infrastructures, increased voice and visibility in state policy review processes, and having access to skilled SV sector interpreters/translators, referral and funding support, and practical and institutional knowledge. All of which could be accessed, facilitated and/or managed by or through a nationally funded Pacific multi-agency service.

<u>Pacific SV workers find state funding and review systems for additional SV therapy sessions are frustrating for them and retraumatising for their Pacific SV survivors</u>

4.2.7 Working holistically with Pacific clients is constrained by seemingly inflexible and time-pressured state criteria and processes for funding additional programme (e.g., therapy or counselling) sessions. According to talanoa findings these criteria and processes frustrate Pacific practitioners causing them to either leave the workforce or go into private practice. These state processes can and have retraumatised Pacific clients who do not want to retell their trauma to a professional they have just met as part of the funding review process. The Pacific SV workers who raised this issue advocate strongly for a review of these state rules and processes to better understand where the pressure points are and how they can be addressed.

<u>The Pacific SV workforce do extra or pro bono work for Pacific clients who need but cannot meet service costs or are not eligible for funding support</u>

4.2.8 The Pacific SV workforce will work, if necessary, pro bono or 'go the extra mile' with Pacific clients who they believe are in need but are not able to meet service costs or are not eligible for government funding. This pro bono work is not a sustainable nor desirable solution to meeting the support needs of Pacific SV survivors, offenders,

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70 Mainstream is used here to refer to a system or organisation or agency that is led by the dominant value systems of a country.

families, communities, services and/or agencies and is likely to impact negatively on workforce retention rates. More research evidence is required on the context and extent of this pro bono practice and the impact it has on Pacific workforce retention rates.

Pacific SV workers leave the workforce for mainly 'personal (including family) reasons'

4.2.9 According to questionnaire findings, 'personal (including family)' reasons was the main reason Pacific SV workers left the SV workforce. However, financial, workload, worker burnout, and professional and cultural safety, were not far behind. Whilst these findings offer baseline evidence, a larger sample of the Pacific SV workforce may generate more representative context to this finding. This underlines a need for more quantitative information in this area.

Pacific SV workers join and remain in the SV workforce because they want to contribute to making a positive difference in the healing journeys of Pacific SV survivors

4.2.10 According to questionnaire findings, being able to contribute to making a positive difference in the healing journeys of those affected by Pacific SV was the main reason why most Pacific SV workers joined and remain in the Pacific SV workforce. However, given that most Pacific SV workers stay less than three years, to capitalise on this aspiration and grow the Pacific SV workforce, the sector needs to invest more strategically and proactively in it.

Pacific SV workers aspire to improve their career prospects as well as their professional and cultural competency levels

4.2.11 According to our questionnaire and talanoa findings, the individual goals and aspirations of the Pacific SV workforce centred mainly on improving their career prospects (which included improving overall income and/or salary levels and gaining job and financial security – to meet personal and family needs). This was linked, however, to also making a positive difference in the healing journeys of Pacific SV survivors and to effectively addressing the harms of SV in Pacific communities.

4.2.12 The Pacific SV workforce respondents want better infrastructural guidance and support for career progression, as well as access to professional development, supervision, mentoring and/or opportunities to take up leadership positions in the SV field. This requires clearer pathways to successfully accessing professional development and/or leadership or career progression support. Current pathways were identified as either non-existent or inaccessible due to financial costs or lack of opportunity or of appropriate training programmes due to structural constraints.

4.2.13 Targeted scholarships or grants for Pacific SV students to be trained in, and/or hosted by an agency that works with Pacific peoples affected by SV was strongly advocated for to help address structural constraints and increase Pacific SV workforce capacity and capability. However, this requires having enough agencies capable of and willing to take on Pacific student placements and updating SV education and training curricula to include Pacific paradigms, theories, models and/or frameworks of care. This was identified as a gap area that needs urgent sector address.

Tapu and vā are core organising principles within Pacific SV practitioner indigenous and faith-based value-systems, practices. and protocols and are embedded in their Pacific models and frameworks of care

4.2.14 Pacific SV workers work with both Pacific and non-Pacific SV clients and apply a range of different Pacific and non-Pacific care models, frameworks or approaches in their work with Pacific peoples affected by SV. However, all practitioners underlined the importance of having access to Pacific models and frameworks. The most frequently cited and used Pacific model according to talanoa and questionnaire participants is the Fonofale model, followed by the Talanoa and Teu le va frameworks. Participants also use mainstream and Māori models of care or therapy, such as the Cognitive Behavioural Therapy (CBT) approach and the Whare Tapa Wha model. Because not all participants were familiar with Pacific models and frameworks of care, requests were made for the inclusion of these models in SV worker training curricula, including online training.

4.2.15 Literature review, questionnaire and talanoa findings all point to the concepts of vā and tapu – and their violations – as key organising principles for Pacific SV prevention and intervention work. These were discussed as inextricably linked and were seen as core to and present within both Pacific faith-based belief systems and Pacific indigenous cultural-belief systems. The relationship between Pacific indigenous and Pacific faith-based values is underexplored and requires further probing for its impacts on Pacific SV models and approaches. Participant narratives suggest that participants do not separate their indigenous Pacific values from their faith-based values and that their contemporary articulations of vā and tapu reflect this inseparability. More research is required to better understand the extent to which this impacts current or is likely to impact future Pacific SV workforce practice.

4.3 What is the state of knowledge on Aotearoa NZ's Pacific SV workforce and its future research needs?

This research project provides baseline evidence on who constitutes Aotearoa NZ's Pacific SV workforce and their support experiences and needs.

4.3.1 There has been no previous research study on who constitutes the Pacific SV workforce. This study is the first of its kind and has been able to generate baseline data on the workforce to inform evidence-based SV sector planning and investment.

4.3.2 Pacific reporting of SV in Aotearoa NZ is disproportionately low. So too are Pacific levels of participation in SV studies, especially among Pacific men, Pacific children and youth, and Pacific LGBTQ+ peoples. Pacific sexual offending and victimisation rates are, however, based on current data still disproportionately high.

The combined effect of the low SV reporting and research participation rates on Pacific SV workforce and workforce development aspirations is debilitating. Sector investment in developing, implementing, and testing effective strategies to improve Pacific community awareness of significance of research to public investment in Pacific SV is urgently needed in order to lift research participation rates.

Future research must be capable of providing nuanced analyses and expand on the baseline findings of this project.

4.3.3 The Pacific SV workforce can provide leadership on how best to address the current knowledge gap in Pacific SV research on what consent means in Pacific SV spaces. This is a critical gap area that requires the support of nuanced Pacific research knowledge. Pacific SV prevention and intervention strategies must specifically engage the Pacific SV workforce in this area if it is to make headway on SV elimination strategies. Very little specific Pacific information on consent exists beyond legalistic definitions. Issues of consent in sex speaks directly to Pacific taboos and moral judgements around sex, sex education, sexual orientation, and sexuality, informed by contemporary Pacific cultural and faith-based understandings of tapu and vā. Literature review, questionnaire and talanoa findings suggest that probing consent in Pacific spaces raises personally uncomfortable and thus frequently avoided discussions for the Pacific SV workforce. This means a lot of care must be employed when engaging Pacific peoples in the SV workforce in conversations about the ambiguities, ambivalences, slippages, and contradictions of consent and sex within universalised definitions. Being aware of and having opportunity to debate these ambiguities can be confronting but can also create opportunities to address judgemental practices and community fears of confidentiality breaches, offering the potential to improve one's inclusive practice and professional standards.

4.3.4 To address the lack of detailed information available on Pacific SV to support the Pacific SV workforce in their work with Pacific peoples affected by SV, there is a need for a 'new Pacific acumen' that can recast and reimagine 'the known' (i.e., the evidence-based, anecdotal, and intuitive collective knowledge held) of why there is this lack and what to do about it (Peteru, 2012; Mitaera in Pasefika Proud, 2020). There is an urgent need to support nuanced research and evaluation that can adequately fill this lack. Questionnaire and talanoa participants acknowledge the need for more research that can expand on the baseline data gathered by this project.

5.0 Discussion

The aim of this discussion section is not to provide an exhaustive analysis of the four areas below, but rather to signal their complexities and importance to the project's overall research question: "what are the experiences and support needs of Pacific peoples in the SV workforce"?

These four areas are discussed in no order of priority as all are considered of equal importance.

Prioritising Pacific peoples and Pacific values, models, and frameworks in SV workforce development

Even though the project's primary research question sought to narrow the focus of this study to just "Pacific peoples in the SV workforce", the notion of a "Pacific sexual violence workforce" invites some wriggle room for including all practitioners, regardless of ethnicity, who work with Pacific peoples affected by SV. The question is whether we[71] ought to assume this wider interpretation of the 'Pacific SV workforce' and what the implications might be if we did or did not. What do we stand to gain? The issues within this problem of definition are complex and are both political and practical. One way to answer these questions is to ask further questions: Is the ultimate goal to make Pacific peoples working in the SV sector competent to work with all peoples affected by SV, not just with Pacific peoples? Or is it to limit Pacific peoples to working only with Pacific SV clients? The answer to these questions would seem to be a no-brainer. Developing a workforce that can work across population groups would seem the most obvious cost-effective choice for policymakers. But is it? Training an entire workforce in the cultural competencies of all of Aotearoa NZ's diverse cultural groups is not practical. There is need for a compromise.

The compromise is to provide the workforce and clients with a choice and for the sector to manage the practicalities of having that choice made available. Given that respondents to our baseline questionnaire indicated that a high percentage of their total clientele lists were mostly of non-Pacific ethnicity, this suggests that not only do Pacific SV clients work with non-Pacific SV practitioners, but Pacific SV practitioners have competencies that can service Pacific and non-Pacific SV clients. The sector invests time and resources into building Pacific-specific values, models, and frameworks for use by the SV workforce, and on targeting Pacific SV workforce development needs, because despite Pacific SV reporting rates being disproportionately low, Pacific victimisation rates are disproportionately high. And, because Pacific peoples are reluctant – even within the Pacific SV workforce – to participate in Pacific SV research, even Pacific SV workforce related research, there is little to no evidence-based information on how we can best reduce these victimisation or SV incidence rates.

The point is that in order for the SV workforce to work effectively with Pacific peoples affected by SV trauma, it needs to have as many SV workers with prior Pacific cultural

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[71] The 'we' here refers to Aotearoa New Zealand generally and to the SV sector and Pacific SV workforce, including SV researchers and evaluators, specifically.

knowledge and skills, who can communicate with Pacific SV clients effectively, read Pacific cultural contexts well, and advocate for short-term and long-term Pacific SV worker needs, as possible. This prior knowledge and skills are most likely to be found within peoples of Pacific ethnicity. Theoretically, when this prior knowledge is combined with specific SV training, the Pacific SV workforce is more likely not to cause offence to Pacific peoples, families, and communities affected by SV, and to be able to get them to trust the system, or at least to seek help and gain the support they need. However, because Pacific communities in Aotearoa NZ are small and well-connected, and SV carries significant personal and family trauma, stigma, and shame, Pacific peoples are known to be naturally cautious about accessing Pacific SV services or working with Pacific SV practitioners, for fear that their story will get out, notwithstanding awareness of professional confidentiality principles. While no empirical evidence exists yet on the specific reasons why Pacific SV survivors and families choose not to access Pacific SV services or to work with a Pacific SV practitioner, anecdotal evidence suggests that this fear forms a large part of why they don't comprise a larger part of Pacific SV worker clientele lists. Our questionnaire findings suggest that the longer the Pacific SV practitioner remains in the SV field, however, the more likely it is that they will gain a reputation for working well with Pacific clients and increase the percentage of Pacific clientele they work with. Meeting the diverse needs of the many different groups within pan-Pacific and ethnic-specific Pacific groups also means that even among Pacific practitioners there is a need to ensure that the Pacific SV workforce is representative of those who have prior knowledge and experience working with marginal or smaller Pacific populations within the SV field, such as with Pacific males, Pacific youth, and Pacific LGBTQ+ peoples.

Privileging Pacific languages and concepts

Pacific language terms and concepts give visibility to Pacific paradigms, models, and frameworks of care. The power of seeing Pacific language terms or names such as tapu, vā and Fonofale as used in policy documents or sector practice frameworks cannot be underestimated. Dame Tariana Turia and Dr Pita Sharples, in their 2011 International Day of World Indigenous Peoples speech, cited the Māori saying "ko taku reo taku ohooho, ko taku reo taku mapihi mauria" (My language is my awakening, my language is the window to my soul"). This framed their support of the promotion of Pasifika languages, their use and maintenance, in Aotearoa NZ.[72]

Privileging Pacific indigenous languages and concepts in Aotearoa NZ involves recognising that within Pacific policies, protocols, models, and frameworks there is a need to consciously avoid homogenising cultural differences when developing pan-Pacific approaches to SV prevention and crisis intervention. Languaging strategies that enables opportunities for Pacific indigenous language terms and concepts from the smaller Pacific groups to be visible, including them deliberately in policy statements or frameworks, for example, can go a long way to recognising that the Pacific population of Aotearoa NZ is made up of a wide range of peoples beyond the six larger ethnic groups, i.e., beyond Samoan, Tongan, Cook Islands, Niuean, Fijian and Tokelauan peoples. Without this conscious or deliberate effort there is a significant risk that these pan-

72 https://pacific.scoop.co.nz/2011/08/my-language-is-the-window-to-my-soul/

Pacific frameworks will further isolate and marginalise these smaller Pacific ethnic populations and hinder their access to the help they need.

'Recasting and reimagining 'the known' of Pacific SV

Jean Mitaera's (2020) call to revisit what we know of Pacific family violence and SV and to recast and reimagine that knowledge anew echoes Carmel Peteru's (2012) call for a new Pacific acumen that can break the silence, stigma and shame surrounding sexual violence and abuse within Pacific families and communities. Both these Pacific leaders signal a desire for an entire re-evaluation not only of what we know about Pacific SV, but how we know it and what we do about it. How do we access, report, and consume information about Pacific SV? They call to the Pacific SV workforce to "unshackle [them]selves" (Mitaera, 2020, p.6) and to probe the known of Pacific SV in new ways, probing what is personally, culturally, and professionally inspiring and uncomfortable, and asking what it is that makes it so?

Two such topics in need of this deeper and careful probing might be, for example, one, that of what sex and consent mean in different Pacific spaces, and two, that of what to make of the inextricable relationship between Pacific indigenous values and Pacific faith-based values when interpreting the practice of vā in contemporary Pacific models of care? Probing these questions may lead to constructive reflections on the historical and structural contexts and impacts of the relationship between:

(a) Christianity and colonialism in the Pacific, and the neo-colonial effects of that relationship on present-day Pacific sexual attitudes, values, judgements, consent, and control practices in Aotearoa NZ,
(b) Liberal/neoliberal democratic state policies and practices and Pacific SV systems, models and frameworks of restorative justice, care, and healing, and
(c) Māori as tangata whenua and Pasifika as tauiwi working separately and together in the prevention and elimination of SV in Aotearoa NZ.

Each of these areas if probed deeply can offer resources for recasting and reimagining 'the known' of Pacific SV in Aotearoa NZ.

Privileging Pacific research and evaluation methodologies in Pacific SV research

This is the first research of its kind into the specifics of the Pacific SV workforce of Aotearoa NZ. Its findings recognise the important work of those who contributed to building what we know now about Pacific health beliefs, Pacific values and practices, and Pacific models and frameworks of care, as documented in the literature review. The knowledge base discussed in this report has helped guide the work of current Pacific SV workers and informs the strategic directions of the emerging Pacific SV workforce network currently coordinated by TOAH-NNEST's Pacific steering group at the time of writing this report. But more Pacific SV research data is needed.

Our findings support the privileging of Pacific research and evaluation methodologies, such as the Talanoa methodology or Teu le vā approach to Pacific SV research and evaluation. Within these Pacific methodologies are embedded Pacific epistemological and ontological frameworks, Pacific ways of knowing, being, seeing and doing. Through

the use of Pacific indigenous language terms, these Pacific ways of knowing, being, seeing, and doing are made visible. The rise and presence of Pacific research methodologies in Aotearoa NZ speaks to a need to understand cultural and ethnic nuance in universalised or standardised research ethics, methods and/or methodological approaches. The main goal of Pacific research methodologies is to ensure that in designing and doing research with Pacific peoples, especially within highly sensitive and trauma-filled fields like SV, that the tools available and used can and do protect them from (further) harm (New Zealand Health Research Council, 2014).

6.0 Recommendations

In order of priority the researchers recommend:

6.1 The emerging national Pacific SV workforce network be supported to bring the Pacific SV workforce together from across the SV sector and Aotearoa NZ, to advocate on behalf of the workforce and to explore the viability of a Pacific SV multi-service agency.

6.2 The findings of this research report be used to inform SV sector planning and investment in Pacific SV workforce development, bearing in mind the significant work already carried out by the Pacific health and Pacific family violence sectors on overlapping Pacific workforce support needs.

6.3 A review be undertaken of the impacts and/or effects of relevant state funding, reporting, evidence-building systems and evaluation processes on the productivity and retention of Pacific SV practitioners and on their potential to re-traumatise Pacific SV survivors.

6.4 The SV sector invest in growing Pacific cultural and clinical supervision expertise, Pacific SV workforce career and/or professional development and/or leadership pathways and recognises the contribution that informal Pacific networks play in supporting Pacific practitioner self-care and workforce retention strategies.

6.5 Because of the high numbers of male Pacific sexual violence offenders, the paucity of information or knowledge on the support needs of Pacific LGBTQ+ peoples and Pacific youth affected by sexual violence, and on the positive value associated with peer support services, more work is needed by the SV sector to attract more Pacific males, youth and LGBTQ+ persons to the SV workforce.

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8.0 Appendices

8.1 Copy of Online Questionnaire

8.2 Talanoa Topic Guide

8.3 Participant Information Sheet

8.4 Literature review search methodology flow-chart

8.5 Copy of Pasifika Sexual Violence Workforce Submission on the National Strategy for Family Violence and Sexual Violence

Appendix 8.1 Copy of Online Questionnaire

Environmental Survey of the Pacific Sexual Violence Workforce

Survey Flow
Standard: Introduction (1 Question)
Standard: Section 1 (1 Question)
Block: Demographics (5 Questions)
Standard: Section 2 (1 Question)
Standard: Employment History (7 Questions)
Standard: Employment History 2 (6 Questions)
Standard: Section 3 (1 Question)
Standard: Pacific Clientele (4 Questions)
Standard: Section 4 (1 Question)
Standard: Pacific Values, Beliefs, Practices, Models, and Frameworks (2 Questions)
Standard: Section 5 (1 Question)
Standard: Workforce Support (2 Questions)
Standard: Section 6 (1 Question)
Standard: Personal Work Goals and Aspirations (2 Questions)
Standard: Section 7 (1 Question)
Standard: Any Closing Comments (1 Question)
Standard: Thank you & Reminder about the Talanoa Sessions (1 Question)

Start of Block: Introduction

Introduction Talofa, Mālō e lelei, Kia orana, Fakalofa lahi atu, Bula, Taloha ni ... and Warm Pacific Greetings:

This online questionnaire aims to gather information on Aotearoa New Zealand's Pacific Sexual Violence (PSV) workforce. There is currently no systematically collected information on the PSV workforce. This questionnaire will help us fill that gap.

We invite only those participants who:

Are **Currently Employed**, or Have been **Employed in the Past** to work with Pacific peoples affected by sexual violence, to complete this questionnaire.

If you have received the link to this questionnaire from more than one source, **PLEASE ONLY COMPLETE AND SUBMIT THE QUESTIONNAIRE ONCE**.

The questionnaire **CANNOT BE SAVED** or **RETURNED TO**, and will end on **FRI 8 OCTOBER.**

The questionnaire is part of a MSD-funded study on the PSV workforce. The PSV workforce is an important resource for providing culturally responsive support. This study seeks to understand who constitutes the PSV workforce and how that workforce can be best supported.

The attached pdf of the study's information sheet provides more information on the

study. See the Information Sheet attached.

The study involves collecting data from the Pacific sexual violence workforce using: a survey questionnaire (this one), qualitative individual and group talanoa sessions, and organisation site observations.

This online questionnaire explores **seven (7) topic areas**. These relate to:
1. Demographics (gender, age, ethnicity, etc.)
2. Employment history (current or past roles, number of years working for the sector, agency employed with, etc.)
3. Pacific clientele
4. Pacific values, beliefs, practices, models and frameworks
5. Workforce support
6. Personal work goals and aspirations
7. Any closing comments.

The survey should take you about 15 minutes to complete.

Please note that by starting this questionnaire, you will be consenting to participate in this arm of our PSV workforce research.

Your participation in this questionnaire is completely anonymous.

We are truly grateful for your participation. If you have any questions or would like to participate in a talanoa session, or just have a general question about the study, please contact the principal investigator - Associate Professor Tamasailau Suaalii-Sauni at email: s.suaalii-sauni@auckland.ac.nz; or project research assistant Mrs Sarah McRobie at email: s.mcrobie@auckland.ac.nz.

End of Block: Introduction

Start of Block: Section 1

Section 1 DEMOGRAPHICS

End of Block: Section 1
Start of Block: Demographics

Q1
Gender
(Please identify which gender category you identify with)

- ○ Male (1)
- ○ Female (2)
- ○ Non-binary / third gender (3)
- ○ Other, please specify below (4) _____

Q2 **Age group**
(Please identify which age group you belong to)

- ○ 16 - 17 years (23)
- ○ 18 - 25 years (24)
- ○ 26 - 30 years (25)
- ○ 31 - 35 years (26)
- ○ 36 - 40 years (27)
- ○ 41 - 45 years (28)
- ○ 46 - 50 years (29)
- ○ 51 - 55 years (30)
- ○ 56 - 60 years (31)
- ○ 61+ years (32)

Q3
Ethnicity/ies
(Please identify which ethnic group(s) you identify with)

- ☐ Cook Islands (1)
- ☐ Fijian Indian (Indo-Fijian) (6)
- ☐ i-Taukei Fijian (5)
- ☐ Kiribati (9)
- ☐ Niue (3)
- ☐ ni-Vanuatu (10)
- ☐ Samoa (2)
- ☐ Solomon Islands (11)
- ☐ Tokelau (8)
- ☐ Tonga (4)
- ☐ Tuvalu (7)

☐ Mixed ethnicities: please specify below (13)
_____

☐ Other: please specify below (14)
_____

Q4
Geographical place of residence
(Please identify your current geographical place of residence)

☐ Auckland Central (17)
☐ Auckland East (4)
☐ Auckland Northshore (2)
☐ Auckland South (5)
☐ Auckland West (3)
☐ Christchurch (13)
☐ Dunedin (14)
☐ Gisborne (8)
☐ Hamilton (6)
☐ Napier (9)
☐ New Plymouth (11)
☐ Northland (1)
☐ Tauranga (7)
☐ Wellington (12)
☐ Whanganui (10)
☐ Other: Please specify below (15)
_____

Q5
Education
(Please identify the highest qualification or level of schooling you have completed)

○ A secondary or high school completion certificate (1)

○ A secondary or high school qualification (e.g. High School Bursary, NCEA pass, merit or above levels) (2)

○ A tertiary level certificate or diploma (3)

○ A tertiary level undergraduate degree (e.g. a Bachelors degree) (4)

○ A tertiary level graduate degree (e.g. a Bachelor of Honours degree) (5)

○ A Masters level degree (6)

○ A Doctoral level degree (7)

○ Other, please specify: (8) _____

End of Block: Demographics
Start of Block: Section 2

Section 2 EMPLOYMENT HISTORY
End of Block: Section 2

Start of Block: Employment History

Q6 Are you currently employed by an agency that provides support to Pacific peoples affected by sexual violence? (YOU MUST ANSWER this question)

○ Yes (1)

○ No (2)

Q7 Please identify the type of agency you work for:

☐ Government agency working with Pacific peoples affected by sexual violence (e.g. Ministry of Social Development). Please specify or name below: (1) _____

☐ Non-Government agency working with Pacific peoples affected by sexual violence (e.g. Specialist service or private practice). Please specify or name below: (2) _____

Q8
Please identify the geographical location of your main workplace where you carry out your work with Pacific peoples affected by sexual violence.

☐ Auckland Central (16)

- [ ] Auckland East (4)
- [ ] Auckland Northshore (2)
- [ ] Auckland South (5)
- [ ] Auckland West (3)
- [ ] Christchurch (13)
- [ ] Dunedin (14)
- [ ] Hamilton (6)
- [ ] Gisborne (8)
- [ ] Napier (9)
- [ ] New Plymouth (11)
- [ ] Northland (1)
- [ ] Tauranga (7)
- [ ] Wellington (12)
- [ ] Whanganui (10)
- [ ] Other: Please specify below (15)

_____

Q9 Please identify your current role (roles) or position (positions) in your workplace.

- [ ] Church leader (15)
- [ ] Community support worker (14)
- [ ] Counsellor (7)
- [ ] General Practitioner (GP - medical doctor) (18)
- [ ] Nurse (17)
- [ ] Pastoral support (9)
- [ ] Peer support (8)

- [ ] Psychiatrist (13)
- [ ] Psychologist (12)
- [ ] Psychotherapist (11)
- [ ] Social worker (6)
- [ ] Translator/Interpreter (16)
- [ ] Youth leader (10)
- [ ] Other, please specify below (19)

_____

Q10
Years employed TO DATE at your current workplace

(Please identify the appropriate year band)

- ○ Less than a year (1)
- ○ 1 - 2 years (2)
- ○ 3 - 4 years (3)
- ○ 5 - 6 years (4)
- ○ 7 - 8 years (5)
- ○ 9 - 10 years (6)
- ○ 11 - 12 years (7)
- ○ 13 - 14 years (8)
- ○ 15 - 16 years (9)
- ○ 17 - 18 years (10)
- ○ Other, please specify below (12) _____

Q11
In TOTAL how many years overall have you been employed to work with Pacific peoples affected by sexual violence?

(Please note that 'total time' is inclusive of different roles and/or agencies you have held in the SV workforce, but not including time unemployed or working in a different

sector).

- ○ Less than a year (1)
- ○ 1 - 3 years (2)
- ○ 4 - 6 years (3)
- ○ 7 - 9 years (4)
- ○ 10 - 12 years (5)
- ○ 13 - 15 years (6)
- ○ 16 - 17 years (7)
- ○ 18 - 19 years (8)
- ○ 20 years + (Please specify below) (9) _____

Q12
Please identify the reason(s) why you continue to work in the Pacific sexual violence workforce.

- ☐ The workload is appropriate (8)
- ☐ I get along with my boss(es) (9)
- ☐ I get along with my work colleagues (10)
- ☐ I want to contribute to making a positive difference to those affected by sexual violence in the Pacific community (11)
- ☐ Pay/salary was good (12)
- ☐ Hours of work is appropriate (13)
- ☐ Other, please specify below (14)

_____

End of Block: Employment History

Start of Block: Employment History 2

Q13 Please identify the type of agency (or agencies) you worked for:

○ Government agency working with Pacific people affected by sexual violence (e.g. Ministry of Social Development). Please specify below: (1)
_____

○ Non-Government agency working with Pacific people affected by sexual violence (e.g. Specialist service or private practice). Please specify below: (2)
_____

Q14
Please identify the geographical location (or locations) of the main workplace (or workplaces) where you carried out your work with Pacific people affected by sexual violence.

- ☐ Auckland Central (16)
- ☐ Auckland East (4)
- ☐ Auckland Northshore (2)
- ☐ Auckland South (5)
- ☐ Auckland West (3)
- ☐ Christchurch (13)
- ☐ Dunedin (14)
- ☐ Gisborne (8)
- ☐ Hamilton (6)
- ☐ Napier (9)
- ☐ New Plymouth (11)
- ☐ Northland (1)
- ☐ Tauranga (7)
- ☐ Wellington (12)
- ☐ Whanganui (10)
- ☐ Other: Please specify below (15)

_____

Q15 Please identify the role (roles) or position (positions) you held in the workplace (or workplaces) identified at Q.14.

- [ ] Church leader (15)
- [ ] Community support worker (14)
- [ ] Counsellor (7)
- [ ] General Practitioner (GP - medical doctor) (18)
- [ ] Nurse (17)
- [ ] Pastoral support (9)
- [ ] Peer support (8)
- [ ] Psychologist (12)
- [ ] Psychotherapist (11)
- [ ] Psychiatrist (13)
- [ ] Social worker (6)
- [ ] Translator/Interpreter (16)
- [ ] Youth leader (10)
- [ ] Other, please specify below: (19)

_____

Q16
In TOTAL how many years overall did you work in the Pacific sexual violence workforce?

(Please note that the total time is inclusive of different roles and/or agencies in the SV workforce, but not including time unemployed or working in a different sector.)

- ○ Less than a year (1)
- ○ 1 - 3 years (2)
- ○ 4 - 6 years (3)
- ○ 7 - 9 years (4)

- ○ 10 - 12 years (5)
- ○ 13 - 15 years (6)
- ○ 16 - 17 years (7)
- ○ 18 - 19 years (8)
- ○ 20 years + (Please specify below) (9) _____

Q17 Please state the year you left the Pacific sexual violence workforce.
_____

Q18
Please identify the reason(s) why you left the Pacific sexual violence workforce.

- ☐ Workload issues (including burn-out and/or compassion fatigue) (8)
- ☐ I did not get along with my boss(es) (9)
- ☐ I did not get along with my work colleagues (10)
- ☐ Cultural safety and/or competency issues (11)
- ☐ Professional safety and/or competency issues (12)
- ☐ Pay/salary was not good (13)
- ☐ Worked long hours (14)
- ☐ Personal (including family) reasons (15)
- ☐ Other, please specify below: (16)

_____

End of Block: Employment History 2

Start of Block: Section 3
Section 3 PACIFIC CLIENTELE

Start of Block: Pacific Clientele

Q19
Of your current clientele, what percentage (%) are of at least one Pacific ethnicity?

- ○ Less than 10% (12)

- ○ 11 - 20% (13)
- ○ 21 - 30% (14)
- ○ 31 - 40% (15)
- ○ 41 - 50% (16)
- ○ 51 - 60% (17)
- ○ 61 - 70% (18)
- ○ 71 - 80% (19)
- ○ 81 - 90% (20)
- ○ 91 - 100% (21)

Q20
Which of the following ethnic group/s do your current Pacific clients identify with? (Please state)

- ☐ Cook Islands (3)
- ☐ Fijian Indian (Indo-Fijian) (8)
- ☐ i-Kiribati (10)
- ☐ iTaukei Fijian (6)
- ☐ Niuean (4)
- ☐ ni-Vanuatu (11)
- ☐ Samoan (1)
- ☐ Solomon Islands (12)
- ☐ Tokelauan (5)
- ☐ Tongan (2)
- ☐ Tuvaluan (9)
- ☐ Mixed ethnicities (Please specify below) (13)

_____

☐ Other (Please specify below) (16)

_____

Q21 Throughout your time in the sexual violence workforce, what percentage (%) of your total clientele were of at least one Pacific ethnicity?

- ○ Less than 10% (12)
- ○ 11 - 20% (13)
- ○ 21 - 30% (14)
- ○ 31 - 40% (15)
- ○ 41 - 50% (16)
- ○ 51 - 60% (17)
- ○ 61 - 70% (18)
- ○ 71 - 80% (19)
- ○ 81 - 90% (20)
- ○ 91 - 100% (21)

Q22
Throughout your time in the sexual violence workforce, which Pacific ethnic groups made up the bulk of your total clientele? (Please state)

- ☐ Cook Islands (3)
- ☐ Fijian Indian (Indo-Fijian) (8)
- ☐ i-Kiribati (10)
- ☐ iTaukei Fijian (6)
- ☐ Niuean (4)
- ☐ ni-Vanuatu (11)
- ☐ Samoan (1)
- ☐ Solomon Islands (12)
- ☐ Tokelauan (5)

☐ Tongan (2)

☐ Tuvaluan (9)

☐ Mixed ethnicities (Please specify below) (13)
_____

☐ Other (Please specify below) (16)
_____

End of Block: Pacific Clientele

Start of Block: Section 4

Section 4 Pacific Values, Beliefs, Practices, Models and Frameworks
End of Block: Section 4

Start of Block: Pacific Values, Beliefs, Practices, Models, and Frameworks
Q23 Please state if you intentionally use or used Pacific cultural or ethnic values, practices and/or protocols to inform your work with Pacific peoples affected by sexual violence?

○ If "Yes", please specify or name these below (7)
_____

○ If "No", please state reason/s why below (8)
_____

Q24 Please state if you use or used Pacific practice models and/or frameworks?

○ If "Yes", please state the Pacific model(s) and/or framework(s) you use below (5) _____

○ If "No", please state the non-Pacific model(s) you use and/or framework(s) you use below (7) _____

End of Block: Pacific Values, Beliefs, Practices, Models, and Frameworks

Start of Block: Section 5
Section 5 WORKFORCE SUPPORT

End of Block: Section 5
Start of Block: Workforce Support

Q25 What kinds of support are or were available to you to carry out your services to Pacific clients?

☐ Cultural (e.g. supervision, peer support, referral services support, etc.). Please specify below: (5) _____

☐ Professional (e.g. supervision, peer support, referral services support, membership in a disciplinary or interdisciplinary associations such as Pasifika Counsellors Collective, etc.). Please specify below: (4) _____

☐ Religious (e.g. pastoral support). Please specify below: (6) _____

☐ Youth (e.g. supervision, peer support, referral services support, etc.). Please specify below: (7) _____

☐ Other, please specify below: (8) _____

Q26 Please list up to three agencies (outside your own) that you work closely with to service the needs of your Pacific clients?

○ Service One: Please specify in the box. (4) _____

○ Service Two: Please specify in the box. (5) _____

○ Service Three: Please specify in the box. (6) _____

○ Not Applicable (9) _____

End of Block: Workforce Support

Start of Block: Section 6
Section 6 PERSONAL WORK GOALS AND ASPIRATIONS

End of Block: Section 6
Start of Block: Personal Work Goals and Aspirations

Q27 What are your work aspirations or goals for the future?
_____
_____
_____
_____
_____

Q28 Identify any barriers that have prevented or are preventing you from achieving your aspirations or goals.

☐ Financial constraints (5)

☐ Personal circumstances (6)

☐ Lack of qualifications (7)

☐ Other, please specify below: (8)

_____

☐ Not Applicable (11)

End of Block: Personal Work Goals and Aspirations

Start of Block: Section 7
Section 7 CLOSING COMMENTS

End of Block: Section 7
Start of Block: Any Closing Comments

Q29 Finally, if you have any closing comments you would like to share, please provide them here.

_____

End of Block: Any Closing Comments

Start of Block: Thank you & Reminder about the Talanoa Sessions

Thanks, Faafetai, Mālō ʻaupito, Meitaki maata, Fakaue lahi, Vinaka vaka levu, Thank you for your participation! If you are keen to also participate in the individual or group talanoa phase of our study please contact our principal investigator, Associate Professor Tamasailau Suaalii-Sauni at email: s.suaalii-sauni@auckland.ac.nz; or project research assistant, Mrs Sarah McRobie at email: s.mcrobie@auckland.ac.nz. The Information Sheet provides more information on our talanoa sessions.

End of Block: Thank you & Reminder about the Talanoa Sessions

Appendix 8.2 Talanoa Topic Guide

MSD SEXUAL VIOLENCE PROJECT TALANOA GUIDE

Fa'afeiloaiga – Introduction
Faafetai mo le avanoa: Introduction and establishing the va

- Warm Pacific greetings to you. We firstly thank you and appreciate you for your time that you have given to us for this talanoa. More research in the area of Pacific sexual violence is needed and therefore acknowledge your expertise and contribution to this". The aims of this research are….
- Your rights as a participant are…

(a). Participant background

- Please tell us about you and your Pacific background, your birthplace, migration story and education"

(b). Working background and experience

- "I'm interested to hear about your work experiences. What contributed to you choosing to work in this sexual violence area?"
- "How did this influence your drive to stay in this work?"
- "I'm curious about what factors contributed to you leaving your workplace?" (ONLY IF LEFT JOB)

Have you done any unpaid or volunteer work for the sector? "If yes, tell me about your experience with your unpaid work or your voluntary work"

-

(b.1) Practice approach:

- "I'm interested in your practice approach in working with Pacific peoples affected by sexual violence.
- What models of care do you use – Pacific, traditional, western, integrated approaches or other?"
- "Tell me more about your own Pacific values and whether you incorporate these into your work practice with Pacific peoples affected by sexual violence? (make sure they name and unpack these values in more details)
- If so how? If not, what are your reasons for this?"
- SUPPORT TO IMPLEMENT PRACTICE APPROACH!
- "Did you receive any support from your workplace when you applied your cultural perspectives and your (name?) Pacific models of care? If so, what type/s of support?

○ If not, what professional support and care would you have needed from your workplace? to enable you to practice in a culturally responsive way?"

○ Can you comment on the lack of support and why? And how did you get around this without this support?

○

(b.2) Experiences in: sexual violence trauma care, recovery and resilience models;

○ Some research literature talk about compassion fatigue, trauma transference and worker burnout when working with sexual violence or any trauma.

○ Have you experienced this in working with Pacific peoples affected by sexual violence?

○ If yes, we are wondering how did you get by, and what were your coping strategies?

○ If no, how did you take care of yourself?"

○ "What would you like to see happen differently, in order that our Pacific peoples affected by sexual violence can access services in which they can be further supported?".

○ Inviting them to talk about:

- Access to ACC services in which our Pacific peoples are not aware of;
- Police EVU services in which Pacific children and young people are interviewed and evidence used in court
- Court processes for our Pacific peoples for victims/survivors and offenders (as sexual violence happens in our families)
- Sector workforce legal support, such as EVU processes – Have you experienced any stress over having to access legal aid or other appropriate legal advice or representation for their clients?
    - Have you experienced giving expert witness support in support of a case they you were working on? What was your experienced like?

(c) Career or workforce aspirations: (Probe for context. Engage in non-leading reciprocal storying).

○ "Thank you for sharing your genuine and honest experiences in working with our Pacific people and sexual violence.

○ As a (status or current role), 'Do you have any work goals and aspirations personally or in terms of working within the SV area'?

○ If so, what would these be?

(d) Any final comments: (This offers the participant an opportunity to make any final or overarching comments about the research topic and/or process).

- Lastly, as a (status or current role), where would you see this service (the Pacific sexual violence workforce) within the next five years?

Is there anything else you would like to share with us that will be of value to this research investigation?

To end the talanoa, the facilitator will round off with thank you comments and an invitation to any participant who may wish to have their workplace involved in the site observation arm of the study to have a quick chat with her/him about this afterwards.

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Building 435
58 Symonds Street
Auckland
Faculty of Arts
University of Auckland
Private Bag 92019
Auckland 1142
NEW ZEALAND

Date: 30 April 2021

PARTICIPANT INFORMATION SHEET
(FOR ALL PARTICIPANTS – INCLUDING ZOOM PARTICIPANTS - AND SITE MANAGERS)

Pacific Sexual Violence Workforce Research Project
(An 'All of Government' [AOG], Ministry of Social Development [MSD] funded project)

Research Team:

- ***Principal Investigator***: Associate Tamasailau Suaalii-Sauni, Faculty of Arts,
- University of Auckland ("UoA")
- ***Qualitative Lead***: Dr Fuafiva Fa'alau, Faculty of Medical and Health Sciences, UoA
- ***Qualitative team & Pacific Counselling and Social Work Experts***: Dr Analosa Veukiso-Ulugia and Mrs Sarah McRobie, Faculty of Education and Social Work, UoA
- ***Survey Lead***: Dr David Fa'avae, University of Waikato
- ***Community Lead***: Pastor Dr. Paul Siope, Tapasā mo Aiga Inc., Auckland, New Zealand

***

Introduction Warm
Pacific greetings. Our Pacific Sexual Violence (SV) Workforce Research Project team are affiliated to the University of Auckland, University of Waikato and Tapasā mo Aiga Inc. We have been funded by the Ministry of Social Development (MSD) to carry out research on the Pacific SV workforce of Aotearoa New Zealand.

Invitation and study description
As a member of the Pacific SV workforce of Aotearoa New Zealand, we would like to invite you to take part in this study.

The study aims to describe:

1. who the Pacific SV workforce of Aotearoa New Zealand are (in terms of demographic profiles and different workforce positions or roles, etc.),
2. where you are located (geographically and within different professional bodies and/or workplaces),
3. your experiences and perspectives of providing support to Pacific peoples affected by sexual violence in Aotearoa New Zealand; and
4. your different needs and aspirations as a workforce.

What would be involved?
We would like you to participate in one or more of the following:

- an online survey, and/or
- an individual or group talanoa session, and/or
- a site observation exercise.

What's the online survey questionnaire about and what would I need to do?
This is an English language survey that requires approximately 15 minutes of your time to fill out.

We will first send an email invitation inviting you to participate in our study to the executive officers and/or secretaries of the seven key organisations or professional association bodies below. They will send the email invitation onto you. These organisations or networks are:

- Te Ohaakii a Hine – National Network Ending Sexual Violence Together (TOAH-NNEST's) Pacific Steering Group
- NZ Christian Counsellors Association (NZCCA)
- NZ Association of Psychotherapists (NZAP)
- Pasifika Counsellors Collective (PCC)
- NZ Psychological Society (NZPsP)
- Aotearoa NZ Association of Social Workers (ANZASW)
- Male Survivors of Aotearoa

Going this route (through the 3rd party rather than by making direct contact with you) helps us to to ensure your anonymity. The invitation will have the online survey link. Do get in contact with the above groups if you hear of this survey and want to participate but haven't received the email invitation and link.

If you decide to participate in the online survey questionnaire, you will just need to follow the instructions and then press 'submit' once completed.

Because the survey is anonymous you will not need to give us your name or any other identifying information.

The survey will ask you to fill out seven (7) different question areas. These areas are:

(a) Demographic related questions (4 Questions)
(b) Employment History related questions (7 or 6 Questions, depending on whether you answer "yes" or "no" to question six)
(c) Pacific clientele related questions (4 Questions)

(d) Pacific values, beliefs, practices, models and frameworks related questions (2 Questions)
(e) Workforce support related questions (2 Questions)
(f) Personal work goals and aspirations related questions (2 Questions)
(g) Open-ended closing comment related question (1 Question).

The purpose of the survey is to provide baseline quantitative data on the current number, make-up and spread of the Pacific SV workforce in Aotearoa New Zealand. This means we are looking for as many Pacific SV workers to complete the survey as possible.
Once you begin the online survey, your informed consent to participate will be assumed. Once your completed online survey has been submitted we will not be able to withdraw it from the study.

The survey link will be sent out to the above networks to send onto potential participants mid-July 2021 and run for a month.

What are the talanoa sessions about and what would I need to do?
We will run individual and group talanoa sessions. The individual talanoa sessions will be offered to everyone who wants to participate in a talanoa session.

If a service has more than one Pacific SV worker, we will ask you individually if you wish to be part of a group talanoa session together. The group talanoa sessions will require at least two participants to be viable. And, to ensure that a range of different services can participate in the talanoa sessions, we are limiting the maximum number of participants in a group talanoa session to four (4) members.

The individual and group talanoa sessions offer you as participants the opportunity to talk (talanoa) to us directly and in more depth about your work as a Pacific SV worker in Aotearoa New Zealand. Once you make contact with us, one of our team will organise to talk with you either on your own (if you prefer an individual talanoa), or as part of a group with others in your workplace (if you and they prefer).

The talanoa sessions will give us the opportunity to probe three key themes:
(a) Experiences and perspectives of working with Pacific peoples affected by SV, and of the kind of supports received to carry out this work;
(b) Experiences with and perspectives on the Pacific values, beliefs, practices, models and frameworks used in your work with Pacific peoples affected by SV, and
(c) Personal work goals and aspirations, and any barriers to achieving those.

Our talanoa sessions will be held predominantly in the English langauge, but our researchers are fluent in the Samoan and Tongan languages, should you prefer to speak in Samoan or Tongan. We can also access other Pacific langauge facilitators or translators if necessary.
We are looking for **up to 30** people maximum to join our talanoa sessions. Members of the group talanoa sessions will be counted individually.
We are looking to capture a range of the different roles and demographic profiles among our talanoa participants. This means that we will try to capture a range of

gender voices, age groups, Pacific ethnicites, workforce roles, geographical locations and service types.
We will be recruiting talanoa participants using (a) a general invitation email delivered by the seven network/organisation groups mentioned above, and (b) the deliberate 'snowballing' method. 'Snowballing' means that after conducting an individual or group talanoa with you, we will ask you to pass on our email invitation to other potential participants.
If, after reading this information sheet, you decide to participate in a talanoa session, and you live in the Auckland area, we will need to know if you wish to do an individual talanoa session or a group one, in person or via zoom. If you live outside the Auckland area, because of budgetary constraints we may only be able to conduct talanoa sessions via zoom with you.
Once we make contact with you we will set up a time to meet, either in person (for Aucklanders only), or via zoom.
If you would like us to meet with you in person, we can meet at your workplace or somewhere off site but private enough to have a confidential conversation. If via zoom, we will send you a zoom invite, with IP address and password.
Zoom talanoa sessions will be audio-recorded not video-recorded, and audio-recorded using a separate audio-recording device places next to the zooming device. The consent process for talanoa sessions conducted via zoom will follow the same procedures as that for in person talanoa sessions.
The **individual talanoa session** will only **take one (1) hour**. The **group talanoa session** is likely to take **a couple of hours (2 hours)**. As a token of our appreciation we have organised to give you a $50 voucher as a small token of our thanks and appreciation for sharing with us your knowledge, time and expertise.
To accurately record your talanoa session, we will ask for your express permission to audio-record it.
If you participate in an individual or group talanoa session you can withdraw yourself from the individual or group talanoa session at any time throughout the course of the talanoa session, and you may refuse to answer any questions, without having to give any reason. All audio-recorded talanoa sessions will be transcribed and information relating to you will be de-identified (i.e. all names and other identifying information is removed and coded). However, once all talanoa data has been de-identified and your information is integrated into talanoa data summaries, while your name or any other identifying information will be removed, it will be impossible to totally remove your presence from the study altogether.
If you are in a group talanoa session and you decide you don't want to answer a question, because of the nature of the group situation, however, the recording device cannot be turned off during the group discussion but you can stop speaking until you are ready to resume or you may leave the physical or online zoom room.

You will be given a copy via email of your individual or group de-identified verbatim talanoa transcript a couple of weeks after your talanoa session. Your talanoa session will be transcribed by one of our researchers or by a professional transcriber. The professional transcriber will sign a confidentiality agreement. For individual talanoa, once you receive the transcript, you will have a couple of weeks to review, edit and return it to us, should you wish to. For group talanoa, because changes requested by one person will affect the contribution of others, we cannot take requests for changes to group talanoa transcripts.

What are site observations about and what do I need to do?
You don't have to do much at all. If you are a talanoa participant who is okay for their workplace manager to be approached for site involvement, and/or you are the site manager for this workplace, the only imposition is the time it takes to consider our request, and if you agree, to show our researcher around the site.

The purpose of site observations is to gather 'real-time' on-site information about the physical context of the talanoa participants' workplaces. This will be read alongside publicly available literature about the site and/or service. This 'real-time' observation information provides 'real-time' context not necessarily available from literature sources.

The site observation exercise involves the researcher taking notes about their 'real-time' on-site observations of the:

1. Physical set-up of a talanoa participant's workplace/workspace; and
2. Physical evidence of Pacific values, frameworks and/or models in that workplace/workspace.

Sites for inclusion must have a staff member involved in the talanoa arm of the study. Talanoa participants will be asked to give permission (via their informed consent form) for their site manager to be approached for site involvement. Once this is received, the express permission of site managers will be sought. If permission is not granted by the site manager, the site will not be included.

Site managers will be given a copy of the draft observation notes taken by the researcher. They will have a couple of weeks to review the notes and provide feedback. The final version of the notes will take into account feedback from the manager and a copy will be forwarded to the manager as soon as possible.

We are looking for a minimum of four (4) or a maximum of eight (8) workplace sites to participate in this part of the study. All workplace sites are to be Auckland-based and will be visited in person.

Site managers have the right to withdraw their site from the study and site information from the site observation data-set, at any time, without reason.
What happens to the information you give us?
All project information will be kept for a maximum of six years for research purposes on password-protected computers and in a secure University of Auckland server. A record of your informed consent (both written consent and/or zoom electronic signature) and audio file will be retained in a secure and locked facility by the principal investigator at the Faculty of Arts and will be destroyed after six years.
Rights to participate and withdraw
Taking part in this study is voluntary. You are free to withdraw at any time, without giving a reason and without any negative consequences for choosing to leave. You can also choose to not answer any or all questions, or to leave the discussion whenever you like.
Confidentiality

Your name will not be used in the research unless you would like to be identified for your contribution in acknowledgement sections of research publications or reports. Your express consent or permission will be needed for this. If you consent to be identified, then you will be given the opportunity to review any reports or publications in which you are named before these are made public. You have the right to withdraw your consent to be identified at any time.

If you do not want to be identified explicitly, it is still possible (because of your role, responsibilities, or relationship as a Pacific professional or SV worker) that you could be identified. To minimise this possibility, we will give you a pseudonym and/or code any references to you.

With group talanoa sessions, there are no guarantees that participants will not disclose what other participants have stated or who participated. But to help with this, before any group talanoa session begins, we will ask all members to sign a confidentiality agreement.

Disclosure
We do not expect this study will present any significant risk to you. However, talking about your experiences and stories regarding working with Pacific peoples affected by sexual violence may trigger vicarious trauma. If this happens, you can stop taking part in the interview at any time and not give a reason for doing so. If there is a significant health or safety issue detected during the study, we (the researchers) will discuss this with you to see what professional support may be available to you from your professional organisation, clinical, external or cultural supervisor/s, and/or GP. If you want to talk to someone who is more independent, to be accessed through your general practitioner, we can discuss this with you.

We note that this study is an All of Government (AOG) funded project led by the Ministry of Social Development (MSD).

Contact details – who do I go to with any queries?
If you are interested in taking part in this study, please contact our two main research staff, Dr Fuafiva Faalau f.faalau@auckland.ac.nz or Sarah McRobie s.mcrobie@auckland.ac.nz. They will ring you to organise the best way to meet up with you or to answer any queries you have.

If you specifically wish to seek Māori cultural support, you may want to talk with Māori whanau in the first instance. But you may also contact the administrator for He Kamaka Waiora (Māori Health Team) by telephoning 09 486 8324 ext 2324, or contact the Auckland and Waitemata District Health Boards Māori Research Committee or Māori Research Advisor by phoning 09 4868920 ext 3204 to discuss any questions or complaints or complaints about the study.

It is your right and choice to take part or not in the study. We really hope you do. You have an important contribution to make. If you have any questions about the aims of the study please contact me on the details below. Thank you for your kind consideration.

For any concerns of an ethical nature, you can contact the: The Chair of the Auckland Health Research Ethics Committee (AHREC) at ahrec@auckland.ac.nz or at 3737599 x 83711, or at Auckland Health Research Ethics Committee, The University of Auckland, Private Bag 92019, Auckland 1142.

Faafetai tele. Warm regards,

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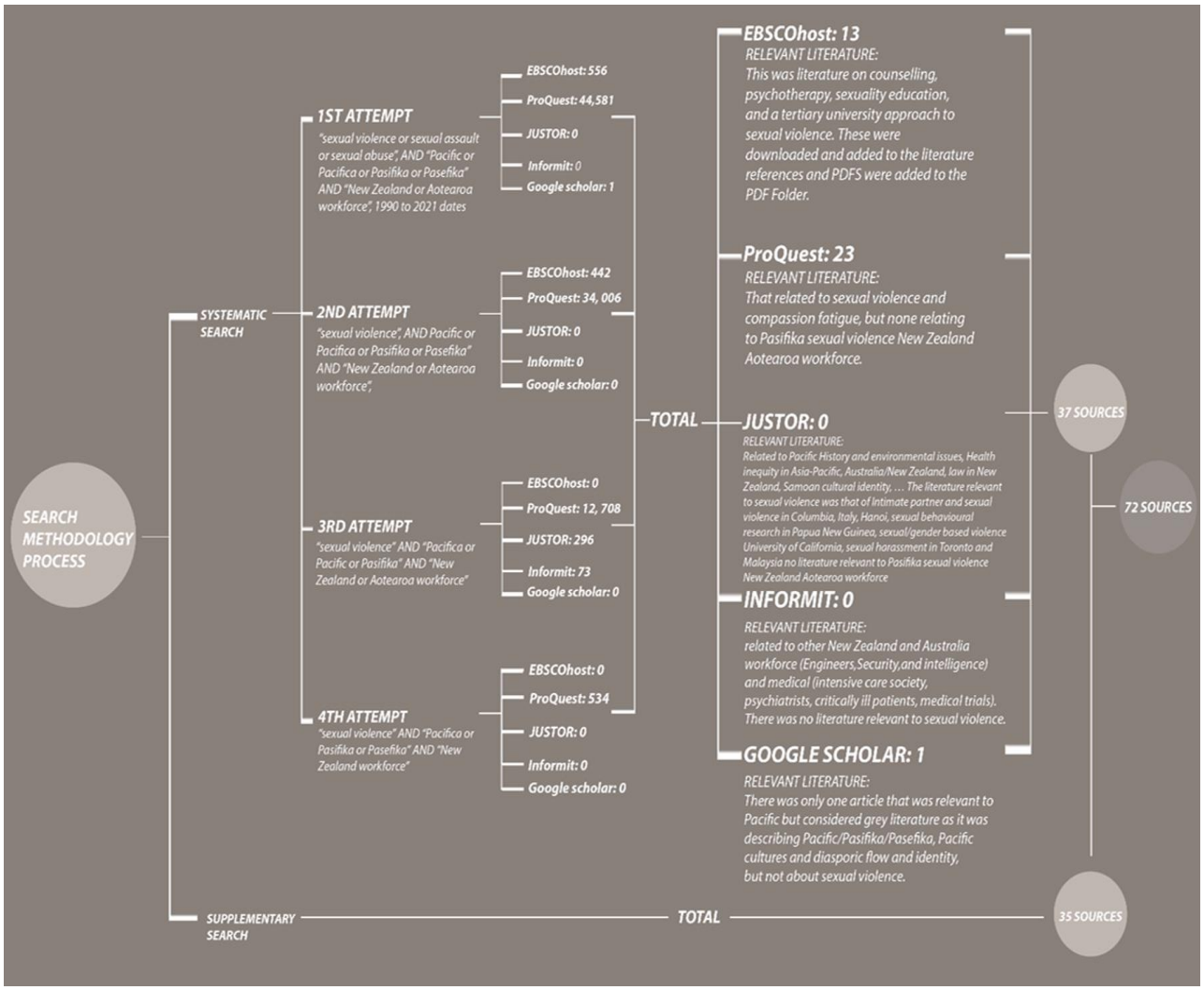
APPROVED BY THE AUCKLAND HEALTH RESEARCH ETHICS COMMITTEE ON 15 July 2021 for three (3) years. Reference Number 22334.

Appendix 8.4 *Literature review search methodology flow-chart*



Appendix 8.5 *Copy of the Pacific Steering Group (PSG) & Pasifika Workforce Network Sexual Violence (PWNSV) of Tauiwi Caucus at Te Ohaakii a Hine National Network Ending Sexual Violence Together (TOAHNNEST)*

MISSION ON THE NATIONAL STRATEGY FOR FAMILY VIOLENCE AND SEXUAL VIOLENCE

Part 1

Executive Summary

This submission is presented by the Pacific Steering Group of Tauiwi Caucus(TC) at Te Ohaakii a Hine-National Network Ending Sexual Violence Together (TOAH-NNEST). This submission is a collection of feedback from some voices in the Pasifika Sexual Violence workforce throughout New Zealand Aotearoa. This submission is put together by the Pacific Coordinator of TC at TOAH-NNEST and presented to Joint Venture by the Pacific Steering Group of TC at TOAH-NNEST. The feedback in this submission focuses on the sexual violence sector and sexual violence specifically, in relation to Pasifika communities.

Consultation on the National Strategy for Family Violence and Sexual Violence with Pasifika sexual violence workers throughout New Zealand Aotearoa, only consisted of one meeting which was held via zoom on the 23rd of June 2021. This was hosted by the Pacific Steering Group and facilitated by the Pacific Coordinator. Joint Venture was present to provide context for the group, before a closed meeting continued without government present, to receive feedback.

Not all voices of Pasifika sexual violence workers are reflected in this submission. This is due to various contributing factors including but not limited to; availability; lack of prior existing relationships; Covid19 Alert Level changes on the 23rd of June 2021 and the transactional nature of information sharing called for due to government time constraints. Joint Venture was advised that the Pasifika sexual violence network was potentially not in a position to provide a fully formed submission on the 5th of June 2021.

For this reason, it should be advised that further consultation should continue with this group to eliminate potential barriers for gathering contributions. This group will continue to meet on a regular basis to encourage further engagement. Further consultation should be sought from this group at a date when the network is more established.

Introducing the Pacific Steering Group (PSG)

The Pacific Steering Group (PSG) is a small emerging group of specialists in the sexual violence sector who are of Pasifika descent. This group has been developed with the support of TOAH-NNEST. PSG members work for TOAH-NNEST membership agencies that sit under the Tauiwi Caucus umbrella within TOAH-NNEST. PSG meet on a regular basis to discuss issues relevant to sexual violence and Pasifika communities. Their main work at the moment centres around creating a network of Pasifika sexual violence workers around New Zealand Aotearoa with the main source of finding these people being through data provided by TOAH-NNEST membership agencies. PSG's work is supported by the Pacific Coordinator role at TOAH-NNEST National Office and is currently funded by the Covid-19 Response funding pool.

Introducing the Pasifika Workforce Network - Sexual Violence (PWN-SV)

The Pasifika Workforce Network- Sexual Violence (PWN-SV) in this document refers to the very much "emerging" network of sexual violence workers around New Zealand Aotearoa who are of Pasifika descent. This network met for the very first time, on the same day they engaged for consultation on this National Strategy for Family Violence and Sexual Violence. PWN-SV network structure allows for people who are not working for TOAH-NNEST membership agencies to participate. In this document, PWN-SV refers to those who were present at the first and (so far) only network meeting that has been held. All people present at this meeting, work in the area of sexual violence in varying degrees of proximity to client focused work. This network is emerging and does not yet have relationships established within it to make this particular consultation a thorough overview of the Pasifika workforce contributions. This network will continue to meet on a regular basis with support of the Pacific Coordinator and PSG of TOAH-NNEST to develop the nurturing relationships required to gather information on the sexual violence sector from a Pasifika perspective.

Key Recommendations

1. There is an urgent need for investment in research into Pasifika communities and relationships – particularly around healing methodologies
2. There is an urgent need for workforce development across the sexual violence sector that engages and sustains Pasifika pathways
3. There is an urgent need for investment in services and prevention initiatives that are appropriate and safe for Pasifika communities to engage with.

Part 2

Share Your Thoughts

What we know (from perspective of PWN-SV & PSG):

1. Evidence backs up that Pasifika communities are at a higher risk of experiencing sexual violence. Evidence backs up that Pasifika survivors/victims of sexual violence are not approaching mainstream social services to heal. Evidence backs up that Pasifika survivors/victims of sexual violence are not reporting to police to seek justice.

2. Pasifika communities spend lots of time together. Being together, sharing food operates as a preventative measure around safety and violence. Processes involved provide space for educating younger generations about safety within communities and relationships. Cultural structures and processes in these settings, educate on boundaries and building trust in relationships. These are enduring sustainable relationships that provide safety for our vulnerable. Thus, connection, relationship building and respecting the Vā (Tauhi Vā, Teu Le Vā etc) is an integral way Pasifika people maintain individual safety.
3. Sexual violence can often be invisibilised in Pasifika communities. Sexual Violence creates
disconnection and isolation for a survivor/victim. This makes long enduring relationships and connections difficult to maintain. The impacts of disconnection caused by sexual violence are long term and intergenerational.

4. As with any migrant community, Pasifika families and communities seek each other out and stick together. When a breach of the Vā occurs – such as sexual violence – survivors/victims and their support people can become isolated from their communities, making them more vulnerable and at a higher risk of further future trauma.

5. Pasifika cultures in their various homelands have preventative measures for sexual violence that are embedded into how society is structured. Cultural assimilation of migrant communities into New Zealand means that families do not have the time to teach these preventative measures because of economic demands and stressors.

6. Pasifika families are often experiencing multiple social and economic constraints that make addressing sexual violence through the justice system and social services an almost impossible task to navigate.

7. Pasifika families experience of trying to heal through the current justice system, is often referred to as a worse experience than the trauma itself.

8. Therefore, Pasifika families are dealing with this themselves. Sometimes by sitting down with each other and addressing the breach of the Vā. There is a wealth of untapped knowledge here, on what works and doesn't work for healing Pasifika families and communities.

9. Pasifika healing approaches align more closely with tangata whenua than with mainstream healing practices. The relationships between tangata whenua and Pasifika spans thousands of years in this Moana, and thus our modalities of healing are similar and closely related.

10. As far as we know, there are less than 50 Pasifika sexual violence specialists that make up the Pasifika sexual violence workforce.
11. There are so few Pasifika sexual violence workers in the country, that they experience compassion fatigue. Not only do they do they honour this deeply complex work in their daily paid practitioner space, but they also often end up being the person best equipped to deal with family and community disclosures of sexual violence where the family/community have decided the safest approach does not include pathways currently available like social services or reporting to police.

12. The same sexual violence workers who experience compassion fatigue in their work and personal lives, also end up being key advocates for the sexual violence sector in various positions. This model of practice is not a sustainable but it is deeply necessary to have strong advocates for Pasifika within the sector.

13. Pasifika leadership, and pathways to leadership for Pasifika, are lacking in the sexual violence sector.

14. Pay inequity – it is noted that Pasifika earn 8% less than their mainstream equivalents.

15. There is a reluctance from Pasifika practitioners in the sexual violence sector to claim their knowledge titles – always assuming someone else knows more - but also being aware through experience, that the sexual violence sector lacks the infrastructure to safely accommodate their career progression and support their leadership with Pasifika communities.

16. Without the infrastructure to support our Pasifika sexual violence workers, there is little space available for Pasifika people to respectfully and safely hold their communities accountable for sexual violence and for healing from sexual violence.

What we want (from perspective of PWN-SV & PSG):

1. It is imperative to educate, appropriately support and enable accessibility to services for, not only the survivor/victim, but also the families or chosen support people of the survivor/victim need appropriate and adequate access to services, education and support as well. There needs to be enough time allocated, skilled workers, and funding to support key relationships for the survivor/victim.

2. Comprehensive support for survivor/victims and their support networks requires investment and a commitment to building more capacity and capability in the Pasifika sexual violence workforce. This will come through targeted scholarships for Pasifika peoples to conduct research on sexual violence in Pasifika communities and indigenous healing approaches. This will come through targeted scholarships for Pasifika to train as specialists in the sexual violence sector. This will come through nurturing relationships amongst Pasifika peoples.

3. Commitment to developing a long term plan for a sustainable sexual violence workforce that includes pathways for Pasifika to build an engaging and economically sound career in the sexual violence sector. Healing from sexual violence is ongoing and life long, meaning there are many avenues for various support services and healing approaches throughout a survivor/victims life span and intergenerationally

4. Pathways for Pasifika sexual violence workers to fill their tanks as opposed to sitting in the reactionary, spitting while swimming, situation they currently sit in. We want to thrive, not just survive. “Filling their tanks” would include but is not limited to;

a. Adequate supervision provided for sexual violence specialists. This includes culturally specific supervision.

b. Equitable pay scales. Reliable and consistent wages/salaries that value the gravity of the urgent and complex work they deal with everyday

c. Pathways into leadership – education opportunities for management on appropriate pathways for Pasifika sexual violence workforce to upskill

d. More capacity in the workforce - invest in the Pasifika people already in the sexual violence sector, so that leadership opportunities can be engaged, without overloading the other, very few, Pasifika specialists in sexual violence sector

5. Research and investment into the healing approaches Pasifika communities are unofficially engaging with, to heal from sexual violence. This includes options for prayer support, as the church plays a vital role in our Pasifika communities

6. Research, investment and accessibility for Pasifika communities to engage culturally appropriate forms of justice and healing. We do not want more Pasifika families to be harmed through the justice system because they "did the right thing" by reporting to police in a failed attempt to find justice in the New Zealand Aotearoa justice system

7. Space, resourcing and funding for Pasifika to engage in rituals, spiritual practice and cultural processes that allow Pasifika to build safe and trusting relationships with each other

8. We do not want funding to be thrown blindly at Pasifika peoples. There needs to be research investment into appropriate upskilling pathways to build capability and capacity in the Pasifika sexual violence workforce.

9. "Fund Pasifika sexual violence services, then get out of the way. Trust the experts of our culture who are helping to heal our people. The solution for Pasifika will be by Pasifika, for Pasifika."

10. Acknowledgement and understanding that talking openly about sexual violence in Pasifika communities looks different to the way mainstream is informed about sexual violence

Where do we want to be?

PWN-SV & PSG reflections on the vision statement:

1. The vision statement doesn't acknowledge the intergenerational trauma that occurs when sexual violence is experienced. The vision statement is a long term goal, not a vision statement. It does not instil hope, it suggests ignorance of the breadth, gravity and urgency of the situation. It is far too long term to be productive.

2. "This statement is nice, but it sets us up for failure, it's unattainable"

3. Statistics suggest that violence is actually normal in New Zealand Aotearoa. This shouldn't be the case but it is. This vision statement is "nice" but it doesn't ground itself in reality.

4. It is like stating that the vision of Health NZ is to have no New Zealander suffering heart attacks or cancer, when in reality the government needs to be setting the standard for accountability and opportunity to be supported in your journey to end family violence and sexual violence in your communities, no matter where you sit on the spectrum of that journey eg. HSB, LTR, survivor, support person, etc.

5. As a sexual violence specialist, in the social services sector, this vision statement effectively means working yourself out of a job and it sets up specialists for failure. The

underscore of this message then suggests that the soft skills of the social services sector are not valued.

6. As a sexual violence specialist, it makes no sense for family violence and sexual violence to be lumped together. They are different issues, that can cross over, but have very separate pathways to elimination

7. When you are living in violence, it is impossible to imagine a world without violence – as a statement it essentially invisibilises survivor experiences of sexual violence.

8. As a survivor of sexual violence – it can be impossible to imagine a world without violence. This vision statement results in feeling isolated and vulnerable. Why would a survivor feel encouraged to reach out for help when the governments vision is so out of touch with their reality?

How will we work together to achieve the vision?

PWN-SV & PSG reflections on how we work together to achieve the vision:

1. Government continues, not to sufficiently fund or listen to Kaupapa Maori sexual violence services. In terms of the relationship building with Pasifika communities, Kaupapa Maori services need to be adequately resourced and listened to on how to heal from sexual violence. Pasifika people see the broken relationship between the Crown and Kaupapa Maori. Constant undermining of Kaupapa Maori creates glass ceilings for what and how Pasifika can consider real partnership to look like. Te Hau Tangata has a good definition of violence for us to work with.

2. Sexual violence services need to be for Pasifika and by Pasifika. Encouragement, accessibility, resourcing, and funding needs to be in place from the government to upskill Pasifika people who are currently in the sexual violence sector. This will enable appropriate healing approaches to be developed and delivered to Pasifika communities. To put it bluntly, “fund us, and get out of the way”

3. Enable Pasifika leaders to heal our Pasifika people “Trust the experts of our culture who are helping to heal our people. The solution for Pasifika will be by Pasifika, for Pasifika.”

Where should we focus to make our vision a reality?

PWN-SV & PSG reflections on the focus areas:

1. Workforce development in the sexual violence sector is vital to serving the urgency of extremely high waitlists in the sector safely.

2. There is past research that has been conducted on the area of sexual violence and Pasifika communities. This needs to be taken into account to develop healing practices that are culturally appropriate for our Pasifika peoples. Advocates in this area

are growing tired of repeated consultation and repeatedly not being heard. This results in burn out and the sector not being able to retain a Pasifika workforce.

3. Funding, resourcing and investment for the right indigenous approaches to heal our Pasifika communities. This includes enabling accessibility for Pasifika people to engage with these healing approaches.

4. Please work on a vision statement that actually provides hope, attainable goals and accountability for the urgency of violence in our communities.

5. Pasifika communities need to be encouraged and educated around social services and pathways available for healing and seeking justice from sexual violence safely. Officially, these options do not currently exist. The current system set-up does not work for Pasifika people. Exploration and research needs to be conducted into Pasifika communities to find out what has been working for their healing. Before this, relationships need to be built and established to conduct this work. For Pasifika, by pasifika is the only way this will work.

6. Practitioner spirituality is key in healing our Pasifika people. There need to be a variety of healing modalities available for our Pasifika communities. This needs to acknowledge that spirituality in healing may mean something different for future generations of Pasifika

7. There needs to be a family based approach to healing from sexual violence. This means wrap around services for families or chosen support networks. These services need to work together which will only happen when they aren't forced into bidding against each other for funding pools, and when sustainable long term funding is achieved.

8. The important role of the church with Pasifika communities needs to be acknowledged. Churches are often a hub for Pasifika communities, as with many migrant communities, spiritual practices engage and retain their people. Power roles within church services and other indigenous healing modalities, need to have accessible education on sexual violence, be encouraged to engage with these tools and appropriate pathways need to be available for healing.

9. Invest in Pasifika people building relationships with each other safely and sustainably. There is a wealth of knowledge in our people, when our people are resourced to connect with each other, knowledge and expertise on safety around sexual violence will spread.

10. Developing a skilled and cultural specific sexual violence workforce that reflects the reality of the issue in the community.

11. Due to the reality that violence already exists in our communities –research needs to be trauma informed. A one size fits all will not work within Pasifika communities. A variety of healing modalities needs to be researched, funded and resourced to provide better opportunities for people to heal from sexual violence.

"We want to thrive, not just survive!" (PSG & PWNSV, 2021, p.6)

"… [I want] **to see sexual violence be discussed safely in our Pacific community**, **to see education shifts** from just about being a safe talk [to be] also about the impacts and effects/affects, both emotionally and psychologically; [what] it does when sexual violence occurs; **what is consent in the Pacific context**? [I want it] to be really part of that. I work in family harm and will continue to do so". (Questionnaire respondent)

"I think **when it comes to the Pasifika models that I use, it is definitely something, sadly, I have had to implement personally**. My work environment is still very much a western system and so it has kind of been… especially when I've been going into classrooms, where like a lot of our content is very educational, but it can be placed in this [way]… is what we perceive to be right and wrong, which can really affect Pasifika's value systems that are really rooted from a young age" (Talanoa Session)

"…So how I took care of myself, I suppose; definitely, like, clinically you needed the critical cultural supervision, it is so important, and that is what I've emphasised with a lot of our Pasifika practitioners – keep up, maintain regular professional clinical cultural supervision. It is important that you keep doing that because you have to talk to somebody about these cases" (Talanoa Session)

"I made a decision to go into private practice so that I could apply cultural ways of working without mainstream expectations of delivering numbers, levels and outcomes. **I wanted to work holistically in a way that would honour Pasifika culture, in a way that seemed more authentic to me as a therapist**" (Talanoa Session)

Acknowledgements

As a research team we wish to acknowledge all survivors of sexual violence, past and present. We acknowledge your strength and courage to fight to survive and thrive notwithstanding. This is an inspiration to all.

We wish to acknowledge all the participants in this study who responded to our call to participate. We are humbled by your gift of time and expertise, your willingness to share knowledge and stories, some of which were painful and heavy, others warm and affirming, all of which were yours. We are in awe of your dedication to your work with and for our Pacific peoples affected by sexual violence.

We wish to thank the funders of this timely research project. In particular we thank Mariah Fagaloa-Time (Principal Advisor Pacific, Ministry of Social Development). Fa'afetai tele, Mariah, for your guidance, patience, editorial skills and endless collegial commitment to this project.

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Last, but not least, we give thanks and praise to our Heavenly Families, to all who came before us, are with us, and are yet to come. We thank you for your love, protection, support and guidance over us and this work.

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List of Acronyms

Acronym:	Meaning:
SV	Sexual violence
Aotearoa NZ	Aotearoa New Zealand
Pacific SV workforce	Pacific SV Workforce of Aotearoa New Zealand
CBT	Cognitive Behavioural Therapy
MSD or the Ministry	The Ministry of Social Development
NZCCA	NZ Christian Counsellors Association
NZAC	NZ Association of Counsellors
PCC	Pasifika Counsellors Collective
NZAP	NZ Association of Psychotherapists
NZPsP	NZ Psychological Society
ANASW	Aotearoa NZ Association of Social Workers
PIWHP	Pacific Island Women's Health Project
IPV	Intimate partner violence
TOAH-NNEST	Te Ohaakii a Hine – National Network Ending Sexual Violence Together
NGO	Non-government organisation
Corrections	Department of Corrections
ACC	Accident Compensation Commission
FV	Family violence
PSG	Pacific Steering Group
PWNSV	Pasifika Workforce Network Sexual Violence

Executive Summary

"We want to thrive, not just survive! (PSG & PWNSV, 2021, p.6)

This research project focused on understanding "the experiences and support needs of Pacific peoples in the sexual violence ("SV") workforce of Aotearoa New Zealand". There is no empirical baseline evidence available on who constitutes Aotearoa New Zealand's ("Aotearoa NZ") Pacific SV workforce. This is the first time this information has been collected and collated. Although there is considerable literature on who constitutes Aotearoa NZ's **Pacific health workforce,** their support needs and experiences (e.g., Perese et al, 2009; Pacific Perspectives Ltd, 2019; Pasefika Proud, 2016), very little within this has been about the specific support needs of the **Pacific SV workforce** (Percival, 2010; McRobie in Wharewera-Mika and McPhillips, 2016).

This project is timely given the current work of the *New Zealand Royal Commission of Inquiry into Abuse in Care* and the December 2021 launch of New Zealand's *Te Aorerekura – National Strategy* to eliminate family violence and sexual violence. This research employed the Talanoa research methodology to bring findings from a literature review, online questionnaire (quantitative data), and individual and group talanoa (qualitative data) together, to converse with each other.

The researchers conclude that:

1. While the Pacific SV workforce of Aotearoa New Zealand ("Pacific SV workforce") largely comprises women of Samoan ethnicity, Auckland-based, over 40 years of age, and who are very well qualified (in terms of higher formal NZ education qualifications), there are smaller representations within the workforce from across other Pacific ethnic groups, and from younger (under 40 years) age groups.

2. Although the Pacific SV workforce consists mainly of people working as social workers or counsellors, they also occupy a wide range of other practitioner roles. This includes pastoral and peer support workers, and those in health promotion, sex education, psychotherapy, and medical forensics. The workforce in general is likely to stay in the SV sector for up to two years, and for those who stay beyond two years, the data suggests that most are likely to stay for up to six years, with only a few staying beyond that. For those who have left the workforce, most leave for 'personal' reasons including family related reasons. For those who stayed in the workforce, most stayed because of a strong desire to make a positive contribution to the healing journeys of Pacific SV survivors.

3. The Pacific SV workforce uses Pacific principles and values (indigenous and faith-based), protocols, models, and frameworks to inform their work with Pacific SV clients. The organising principles of tapu and vā, and the Fonofale, Talanoa, and Teu le Vā models and frameworks were the most commonly cited Pacific principles and models used by respondents/practitioners. These values incorporated both Pacific faith-based and Pacific indigenous cultural interpretations of tapu and va.

4. Participants also acknowledged use of Western and Māori models and frameworks in their SV work with Pacific clients, such as the Cognitive Behavioural

Therapy (CBT) model and Te Whare Tapa Wha model. Pacific participants who chose not to specifically incorporate Pacific values, protocols, models, or frameworks in their practices did so because they found it irrelevant to what their Pacific client needed, or because they worked predominantly with non-Pacific clients.

5. The Pacific SV workforce is currently scattered, isolated, and fragmented. Strengthening the emerging national Pacific SV workforce network and establishing a Pacific multiservice agency that can bring members together from within the SV sector and across Aotearoa NZ to support each other, manage referrals, navigate systems, and advocate for Pacific SV support needs, is necessary.

6. The workforce is frustrated with current state systems and approaches to funding and reviewing Pacific SV cases. The current approach (especially that adopted by ACC) is considered culturally alienating, counterproductive, and potentially retraumatising for Pacific SV survivors.

7. A more holistic public funding, reporting, evidence-building, and assessment system that can respond constructively to Pacific approaches to SV work is needed. This will help reduce the need for Pacific SV practitioners to engage in voluntary pro bono work with Pacific SV clients who need help but are unable to afford it and ineligible for state funding support.

8. More specifically targeted and culturally nuanced workforce education and training initiatives around sexual harm prevention is needed, especially in relation to consent to sex issues in Pacific spaces beyond legal definitions.

9. Pacific SV practitioners need ongoing support from cultural and clinical supervisors well versed in Pacific cultural and clinical SV issues, frameworks, and models.

10. Pacific SV practitioners draw on informal and formal support networks to deal with self-care, including compassion fatigue. Pacific faith-based communities and families provide a significant amount of this informal support.

The researchers recommend that:

1. The emerging national Pacific SV workforce network be supported to bring the Pacific SV workforce together from across the SV sector and Aotearoa NZ, to advocate on behalf of the workforce and to explore the viability of a Pacific SV multi-service agency.

2. The findings of this research report be used to inform SV sector planning and investment in Pacific SV workforce development, bearing in mind the significant work already carried out by the Pacific health and Pacific family violence sectors on overlapping Pacific workforce support needs.

3. A review be undertaken of the impacts and/or effects of relevant state funding, reporting, evidence-building systems and evaluation processes on the productivity and

retention of Pacific SV practitioners and on their potential to re-traumatise Pacific SV survivors.

4. The SV sector invest in growing Pacific cultural and clinical supervision expertise, Pacific SV workforce career and/or professional development and/or leadership pathways and recognises the contribution that informal Pacific networks play in supporting Pacific practitioner self-care and workforce retention strategies.

5. Because of the high numbers of male Pacific sexual violence offenders, the paucity of information or knowledge on the support needs of Pacific LGBTQ+ peoples and Pacific youth affected by sexual violence, and on the positive value associated with peer support services, more work is needed by the SV sector to attract more Pacific males, youth and LGBTQ+ persons to the SV workforce.

1.0 Introduction

1.1 Background: Framing the project's Pacific focus

This project came about because the Ministry identified Pacific peoples as a priority group and identified the need for Pacific-led research into the Pacific sexual violence workforce space.

"In October 2019, the [Ministry of Social Development] Insights research team met with the Pacific Steering Group, which is facilitated by Te Ohaaki a Hine National Network Ending Sexual Violence Together (TOAH-NNEST, their Pacific Steering Group of Tauiwi Caucus).[1] … The Ministry found that:

(a) "*Pacific people are one of the priority groups* identified within the [All-of-Government co-designed sexual violence work] programme" (ibid, italics inserted), and,

(b) "[The] *Pacific workforce is key to providing culturally responsive support*. Previous research has identified that Western models of practice are ineffective and can be traumatic for Pacific peoples, contributing to a process of re-victimisation (Wharewera-Mika & McPhillips, 2016). Hence, *there is a need for a Pacific workforce that represents the range of Pacific Island groups, genders and age groups*; and that can appropriately draw on/use:

- *Pacific spirituality*, which is likely to be church based;
- Pacific culture, which is unique for different Pacific Island groups; and
- Pacific language, including specialist sexual violence terminology that may not translate; and use of informal terms that can support the engagement of subgroups, for example, men and young people (Tiatia, 2008b)" (ibid).

In this report the term 'Pacific' is used interchangeably with the term 'Pasifika'. These are terms commonly used by Pacific peoples and New Zealand government ministries and organisations to describe those peoples living in Aotearoa NZ who self-identify as belonging to one or more Pacific ethnic group (not including Māori).

The 2018 New Zealand census records 381,642 peoples living in New Zealand who self-identified as belonging to at least one Pacific ethnic group.[2] This constitutes 8% of the total New Zealand population. Of this eight percent, approximately 46% have lived in New Zealand for 20 years of more. Almost 60% belong to a single Pacific ethnic group. Sixty-six percent were born in New Zealand. Ninety-one percent speak English. While there is still a significant number of Pacific peoples who self-identify as Christian in 2018 this is a declining number (68% in 2018 compared to 80% in 2006). Those who self-identified as having no religious affiliation since the 2006 census rose from 14% in 2006 to 23% in 2018.

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1 The above quotes were drawn from the CSO contract section A1.

2 See: https://www.stats.govt.nz/tools/2018-census-ethnic-group-summaries/pacific-peoples.

Samoans are by far the largest single ethnic group (48%), followed by Tongans (21.5%) and Cook Islanders (21%), then a large number of smaller Pacific ethnic groups (14 in total), which include Niueans (8%), Fijians (5%, which is inclusive of Indigenous Fijians or i-Taukei, Fijian-Indians, and Fijian-Rotumans), Tokelauans (2%), Tuvaluans (1%), i-Kiribati (0.8%), Tahitians (0.5%), Papua New Guineans (0.3%), ni-Vanuatu (0.25%), Solomon Islanders (0.2%), and Hawaiians (0.1%).[3] Notwithstanding the number of ambivalences and complications associated with the Pacific/Pasifika identity labels and categorisations (see Teaiwa and Mallon, 2005), their continued and particular usage in Aotearoa New Zealand gives them relevance and currency for our purposes.

This background informs the project's scope and terms of reference.

1.2 Project Terms of Reference

In December 2020, the Ministry of Social Development ("MSD" or "the Ministry") contracted Auckland UniServices Limited to deliver an exploratory baseline-setting research project on the experiences and support needs of Pacific peoples in the sexual violence workforce ("the project").

The project's primary research question is: "What are the experiences and support needs of Pacific peoples in the sexual violence workforce"?

The following questions were used to guide primary data collection:

- Who constitutes the Pacific sexual violence (SV) workforce of Aotearoa New Zealand (NZ)?
- Where are they located (geographically and in terms of their workforce roles)?
- What is their demographic profile?
- What are their experiences of providing support to Pacific peoples affected by sexual violence in Aotearoa NZ?
- What are or were their support needs, work goals and aspirations?

The project began in April 2021 and ended in December 2021.

The exploratory baseline-setting nature of the project, together with time and funding constraints, limits data analyses to descriptive analyses only. More intricate analyses of any key discussion areas raised may be possible through academic articles published by the team after delivery of final report or through the procurement of further in-depth research building on project findings.

1.3 Report Structure

[3] Note that the overall percentage for total share of Pacific ethnic groups listed equals over 100% as respondents could self-identify as belonging to more than one Pacific ethnic group. This suggests that the size of Pacific peoples belonging to more than one Pacific ethnicity is probably around 8-10% but this does not account for those who self-identify as belonging to one or more Pacific and non-Pacific ethnic group, especially Pacific-Māori and/or Pacific-Pākehā/European ethnicities or both.

The aim of this report is to describe the project's key findings, conclusions, and recommendations. It includes summaries of key themes arising from three data sources: the literature review, an online questionnaire, and talanoa sessions. In sections four, five, and six of the report, the conclusions (in relation to the primary research question) are outlined, a summary discussion of key themes are provided, and recommendations for action suggested.

2.0 Research Philosophy, Methodology and Design

2.1 Talanoa, vā[4], tapu and noa

The project adopts the Talanoa research methodology (Vaioleti, 2006, 2013; Farrelly and Nabobo, 2014; Suaalii-Sauni and Fulu-Aiolupotea, 2014; Fa'avae et al, 2016; Prescott and Johansson Fua, 2016). This involves a framework for doing indigenous pan-Pacific research that draws specifically from indigenous Pacific research values (pan- and ethnic-specific), including the Polynesian concepts and practices of talanoa (storying), vā (spiritual relationality; see Iosefo., et al, 2021; Fa'avae, 2018; Koya Vaka'uta, 2017; Naufahu, 2018; Ofanoa et al., 2015; Stewart-Withers et al., 2017; Tecun et al., 2018), tapu (sacredness, see Enosa et al., 2019; Amituanai-Toloa, 2006) and noa (open, accessible and/or ordinary) and combining this with the sampling, recruitment, and transferable logics of quantitative and qualitative methods as used by social scientists and health researchers, especially those involved in outcomes research (Curry et al, 2009). Although the terms vā and talanoa derive from Polynesian[5] languages, the concepts of storying, respect, reciprocity, relationality, tapu, and noa that reside within, are concepts that resonate across different indigenous worldviews, language frameworks and cultures (Yunkaporta, 2021; Archibald et al, 2019; McRobie and Agee, 2017; Smith, 2012).

The vā as a term refers to the Polynesian idea and belief that space – all space – is relational, not empty; it is creative, dynamic, connecting, energising and sacred, and thus to be treated at all times with respect (Ka'ili, 2005; Mo'a, 2015; Suaalii-Sauni, 2017; Baice, T., et al., 2021). The vā sees that all things exist in relation to one another, that all things are interconnected and intraconnected in a vā relationship. There is a vā relationship between people, between people and their God/gods, their environments (physical, mental, spiritual, social), animals, and all of creation – rocks, cosmos, earth, particles, waterways – and their life forces, ideas, and so on and so forth. One creates and/or begets and/or interacts and/or is with another or many others at all times, at any time, at some time. As such one is always in a state of being in relationship. This understanding of the vā continues to influence, direct, define and care for how Pacific peoples in Aotearoa NZ *know* and *do* contemporary Pacific research, and is something that is implicitly assumed within the talanoa methodology we understand and use here.

Talanoa as a concept means to talk or story (tala), to engage in conversation, and even for some, to gossip. Talanoa also means to talk in accessible, ordinary (noa) ways or in ways that have no set purpose or direction, instead allowing for the act of reciprocal

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[4] The vā is variously spelt using either no macron over the 'a' or a macron over the 'a'. A macron over the 'a' is used here to assist non-Pasifika speakers recognise its elongated sound. Also, unless it is at the beginning of a sentence or a proper noun or within a direct quote, the term vā is not capitalised.

[5] The categorisation 'Polynesian' has been critiqued by Pacific indigenous scholars for its condescending settler colonial imperialist origins (Arvin, 2019). We recognise this critique and acknowledge it's validity. We find, however, that for the sake of clarity that when using contemporary English, it offers a less wordy and more easily accessible term to describe the group of Pacific Islands peoples and cultures of interest here for our targeted readership. The current alternative 'central Pacific' descriptor is considered for present purposes too vague. We understand the paradox this presents and see it as symptomatic of the ongoing challenges of languaging modern Pacific experiences.

sharing to shape the final story and determine the path for the talanoa.[6] This talanoa project as a whole sought to be sensitive to and deliberate about recognising Pacific diversity and the many different vā relations within. It draws on an interpretation of talanoa that seeks to avoid gossip, to focus instead on reflexive open-ended storying genuine in its pursuit of providing a clear narrative of the current state of knowledge of Aotearoa NZ's Pacific sexual violence workforce, about their experiences and support needs.

All face-to-face talanoa sessions held, questionnaire responses provided, and literature reviews conducted for this project involved the researchers *being in conversation*, *and in a vā relationship* with project participants and the information raised by relevant literature. The research team sought to bring these conversations into a dynamic with each other (i.e., to work through whether what the literature seemed to be saying resonated with what the questionnaire findings and talanoa session findings were saying, for example), and with the aims of the project. This was done both intuitively (based on relevant prior researcher knowledge and experience) and systematically (based on thematising processes). In this sense *talanoa as conversation* becomes metaphor not only for how information was gathered (framing the project's methods and methodology) but also for what the project hoped to create, i.e., a focused but open and culturally response-able[7] conversation - one that takes Pacific indigenous concepts of va, tapu and noa seriously (i.e., beyond token recognition), making them meaningful and visible in the designing and doing of outcomes research with Pacific peoples.[8]

Our initial study design also included site observations to gather real-time information on the physical environment of four Pacific SV services in Auckland. The assumption was that they could provide descriptive context to participants' physical workplace environments. However, because of the 2021 prolonged COVID-19 lockdowns in the Auckland area the site observation arm was cancelled. Site observations were considered a bonus, but not a pivotal data source. While they could add a further source for the triangulation of the outcomes of the literature review, questionnaire and talanoa sessions (in terms of relevant workplace information), its loss to the project was minimal as some relevant information was available from a review of service/agency websites and, although very minimal, also from participant narratives. The services/agencies reviewed were initially selected from MSD database lists and from a key word google search using the terms "Pacific" or "Pasifika" and "sexual violence" and "service", "programme", "agency", and/or "organisation".

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6 See Vaioleti (2006, 2013) for a Tongan understanding of 'noa' in relation to talanoa. Noa here relates to Polynesian ideas of ordinariness, to the profane and/or temporal and to . In Polynesian cultures 'noa' is often used in contradistinction to the notion of tapu. To tala-noa is to talk about things that may be either or both ordinary and tapu. If there are tapu elements involved, this is recognised and through use of appropriate ritual or ceremony can be made accessible by the ritual or ceremonial lifting of the tapu.

7 As per Karen Barad's idea of response-ability (c.f. Barad, 2012; Kleinman, 2012).

8 The cultural nuances of the concept of tapu are more familiar to the western mainstream mind than those of noa. Tapu in this context is used to refer to ideas of the extraordinary, the spiritual, sacred, beyond human understanding, and thus to that which ought to be protected and treated with care, caution, respect and humility.

2.2 Approach to Literature Review

The literature search comprised a systematic search of five open access academic literature databases – EBSCO Host; ProQuest; JSTOR; Informit; and Google Scholar – and supplementary searches of grey literature (see appendix 7.4). Grey literature is defined as sources not available via online open access sources, but through university library borrowing systems or direct contact with authors. They include, for example, literature produced by organisations outside usual commercial or government publishers, such as NGO submissions made to government or parliamentry committees.[9]

Key search terms included: "sexual violence", "sexual abuse", "sexual assault"; "Pacific", "Pacifica", "Pasifika", "Pasefika", "New Zealand", "Aotearoa", "New Zealand workforce", "Aotearoa workforce".

2.3 Online Questionnaire

The online questionnaire contained three sections: a demographic section, a section for those who at the time were current members of the Pacific SV workforce, and one for those who were past members (see copy of online questionnaire at appendix 7.1).

Questionnaire items consisted of a mixture of open and closed ended questions. A total of 29 items were provided. The questionnaire was structured into seven parts:
(1) Demographics,
(2) Employment history,
(3) Pacific clientele,
(4) Pacific values, beliefs, practices, models, and frameworks,
(5) Workforce support,
(6) Personal work goals and aspirations, and
(7) Closing comments.

The questionnaire was anonymous, and pilot tested with TOAH-NNEST's Pacific steering group members. A link to the final version of the questionnaire was sent to potential participant groups across Aotearoa NZ via third parties (i.e., by people outside the research team). These third parties were:
(a) MSD's project management team,
(b) TOAH-NNEST's Pacific steering group networks, and
(c) the following professional associations:

- NZCCA (NZ Christian Counsellors Association),
- NZAC (NZ Association of Counsellors),
- PCC (Pasifika Counsellors Collective),
- NZAP (NZ Association of Psychotherapists),

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[9] For example, we are indebted to the Pacific Steering Group (PSG) & Pasifika Workforce Network Sexual Violence (PWNSV) of Tauiwi Caucus at Te Ohaakii a Hine National Network Ending Sexual Violence Together (TOAHNNEST) alliance for permission to sight and read their submission and to append it to this report. See appendix 7.5. Please note that to align to the formatting of this report the pagination of the original PSG & PWNSV submission document has been removed. The page numbers referenced in this report when citing this document relates to the original document.

- NZPsP (NZ Psychological Society), and
- ANASW (Aotearoa NZ Association of Social Workers).

Participants (or respondents) were recruited in two phases. First, through a third-party email process using the above networks and professional associations. Then, because this produced a very low response rate (only 13 responses received a month after it was released), a second proactive follow-up phase was conducted. This involved the MSD project management team and TOAH-NNEST Pacific steering group chair inviting representatives of Pacific SV agencies to two online zoom sessions where a project presentation and 'Q and A' session with research team was held. One session was coordinated and facilitated by the Cause Collective and involved a coalition of frontline providers for Pacific peoples affected by SV. The other session was organised and facilitated by TOAH-NNEST's Pacific steering group coordinator. Both sessions were held via zoom and were well attended (both had approximately 8-10 representatives from different services). The second phase increased the number of respondents to the questionnaire significantly.

The questionnaire did not require participant names or organisational affiliations, to ensure the questionnaire data was anonymous. The online questionnaire was voluntary and at no point were participants required to disclose identifying information. The first page of the online questionnaire provided detailed information about the aims of the study and key sections of the questionnaire. This included contact information for the research team should questionnaire participants wish to participate in the talanoa sessions. The onus was on them to make contact in order to protect their anonymity.

This is the first questionnaire of its kind for this workforce. Therefore, there was no 'gold standard' to aim for regarding an ideal response rate. Notwithstanding, a recent study by PSG & PWNSV (2021, p.5) suggests that currently there are approximately fifty (50) "specialised Pasifika workers" working in the Aotearoa NZ SV sector. The literature review and project findings' discussion sections address the issue of who and what constitutes a 'specialised Pasifika SV worker'.

After two months when the questionnaire closed, there were 50 online responses recorded by the Qualtrics platform. However, 10 of those responses were not useable (i.e., they had answered no questions). The final data set for the questionnaire is therefore based on a total of *40 responses* only.

The project's time and budget constraints meant that the questionnaire design was kept simple and analyses descriptive only.

2.4 Talanoa Sessions

Individual and focus group talanoa sessions were conducted with 13 participants to explore their experiences as members of the Pacific SV workforce of Aotearoa NZ (see copy of talanoa topic guide at appendix 7.2).

Participants were recruited through the same third-party recruitment method employed for the questionnaire respondents. Talanoa participants were sent email

invitations through the third parties listed earlier. The expectation was that the third party would forward the email invitation to all members of their organisation or agency. The onus was on participants to make first contact with the research team. However, similar to the online questionnaire, because of the very low response rate to the first approach (i.e., after two months there were less than 10 participants secured), a second more proactive recruitment approach was used. This consisted of a combination of the snowball recruitment method[10] whereby (a) the team reached out to potential participants recommended by existing participants, or (b) because members of the research team were also part of the Pacific SV workforce, they were drawn on to approach and invite their networks to participate. The latter was considered ethically appropriate within the Pasifika talanoa and vā frameworks described above, where existing trust-relationships and response-able researcher practice was brought to the fore to contextualise, counteract and/or make transparent potential power-relations, bias, or undue obligations between researcher and participant.

Due to Covid-19 lockdown restrictions, all talanoa sessions were facilitated via the online zoom platform. Seven individual talanoa sessions and two group talanoa sessions of three participants each were conducted. This brought the total number of talanoa participants to 13.

A talanoa topic guide was designed and piloted (see appendix 7.2 for copy of talanoa topic guide). Three research team members facilitated one or more of the talanoa sessions. Two were experienced talanoa researchers, the other was a novice who received training in the talanoa method before carrying out their session. All talanoa sessions were transcribed verbatim and transcripts were kept securely on password protected electronic files held by the project's two lead researchers.

The main aim of each of the talanoa sessions was to explore the following topic areas:

1. Participant's personal working background,
2. Participant's practice approach,
3. Participant's experience of support to implement their practice approach, use of sexual violence trauma care, recovery and resilience models, and self-care, and
4. Participant's own work goals and aspirations.

2.5 Approach to writing recommendations

As part of our Pacific talanoa research methodology the project team felt it important to include Pacific SV workforce stakeholder representatives in a talanoa on the preliminary findings to encourage active and meaningful interactions between Pacific SV researchers and Pacific SV frontline, policy, and advocacy workers. This meant holding off on writing the recommendations until after this sense-making talanoa exercise. This talanoa meeting was held in 23 November 2021. The outcomes from this

[10] The snowball method is a common method used for recruitment of participants for qualitative studies. It involves current participants who have already agreed to participate in the study suggesting new participants for involvement in the research. These new participants would be assessed for eligibility and if they meet the criteria their contact details would be sought, and then they would be approached. See Parker, C. (2020). *Snowball sampling.* London: Sage.

talanoa helped nuance the final version of this full draft report, especially the recommendations. This approach to checking sense-making and to writing the recommendations proved beneficial for all - the research team, MSD oversight team, and Pacific SV Stakeholder participants in that it helped to further triangulate the baseline findings of this report and foster meaningful conversations. It also gave Pacific stakeholders another opportunity to re-emphasise the urgency of this Pacific research work and its significance, to better understanding the needs of the Pacific SV workforce. Below are some comments raised by participants at this sense-making talanoa session, expressing their sense of urgency for this research and highlighting what they see to be some key issues for address.

"It is critical that research reflects the crisis nature. We want Pacific specific services but at the same time can't let mainstream off the hook. We need to force the sector to do better and ensure there's a Pacific lens over all work that happens."

"Pacific staff leaving are such a big loss to services. A lot of Pacific people who have left the workforce do so with their experiences of encountering racism and systemic barriers, then those aren't captured."

"This research can help [un]cover experiences about how Pacific staff members aren't being invested in for leadership opportunities. Pacific staff are often very committed but let down by organisations who don't understand the value they bring".

2.6 Approach to managing confidentiality concerns

The research team acknowledges that where there are small numbers of participants from small, connected communities or population groups the risk of participants being identified, and of the study breaching confidentiality, is high (Damianakis and Woodford, 2012). We also acknowledge that with politically sensitive topics like sexual violence, risking identification may have serious negative ramifications for participants. However, we also recognise Juan Tauri's caution (2018, p.9) around hegemonic universalised institutionalised ethical codes that misunderstand and marginalise Indigenous 'cultural consent' factors.

While our participants' rights to confidentiality are important to us, those rights must be understood within the specific cultural contexts to which they and the researchers belong. For us this meant carefully balancing the concerns of our Pacific cultural ethics that informed the informed consent of our participants, our talanoa methodological approach, and our vā relationships, alongside the wider concerns of the universally applied research confidentiality principle. We decided on balance that it was appropriate in the interests of transparency and honouring 'cultural consent' to information (such as in Table 12 on the ethnicity, age and job status (practitioner or managerial) of our talanoa participants, and that to honour the protective aspects of the principle of confidentiality, we removed from quotes any specific reference to who the quote belongs to. This significantly reduces the risk of identifying participants from our small and connected Pasifika community in Aotearoa NZ while at the same time makes transparent the overall breakdown of the ethnicity, gender and practitioner/manager status of participants. The same balancing principle was applied to the decision to (a) not suppress small respondent numbers, and (b) include non-sensitive but specific

qualitative references made by questionnaire participants (as in Table 1 reference to health promoter on radio) as they were in their original questionnaire comment or response.

2.7 Ethical Approval

The project received full ethical approval from the University of Auckland's AHREC (Auckland Health Research Ethics Committee) in July 2021.[11]

[11] See participant information sheet at appendix 7.3 for how the project addressed research ethical concerns.

3.0 Research Findings

This section describes the research project findings by source type: literature review findings, online questionnaire findings and qualitative talanoa findings. These are described in that order.

3.1 Literature Review Findings

The information generated from our literature review is organised into ten (10) thematic finding areas, listed as statements below.

1. Levels of reporting of Pasifika SV offending and victimisation is low as are the levels of Pacific engagement in SV research.
2. Pasifika SV prevention approaches are culturally nuanced or specific, strengths-based, healing-focused, and family and/or community-led.
3. Māori and Pasifika sexual violence workforce development concerns and modalities of healing are aligned and connected.
4. Family violence, sexual violence, and sexual harm are interconnected.
5. The ambiguities of sex, sexuality and consent make sexual violence a complex issue to address.
6. There is a dearth of evidence-based information on who constitutes the Pacific SV workforce and why, their experiences and support needs, and this should be addressed.
7. A co-ordinated national Pasifika SV workforce network is needed, is emerging and is currently made up of less than 50 Pasifika SV 'specialists' of Pasifika descent.
8. The current Pasifika SV workforce experience significant 'compassion fatigue'.
9. Workforce inequities, inappropriate supervision and a lack of leadership and promotion pathways have negative implications for Pasifika workforce retention.
10. There is a need for a new Pasifika acumen, one that is agile and creative but also grounded, that can keep up with the constantly changing dynamics of Pasifika sexual violence work without losing the integrity of Pasifika values.

3.1.1 Levels of reporting of Pasifika SV offending and victimisation is low as are the levels of Pacific engagement in SV research

Surveys over the years have attempted to ascertain rates of family and sexual violence incidents in Pacific women and Pacific youth. "The 2001 New Zealand National Survey of Crime Victims found that 23% of Pacific women had experienced family and intimate partner violence (IPV), and 12% had experienced violence from people they knew" (Percival et al, 2010, p.6). The survey also asked participants of their experience of sexual interference or sexual assault over their lifetime, and before the age of 17. Although some Pacific respondents in this 2001 crime victims survey did respond to this question, the response rate was very low[12] (Morris and Reilly, 2003). For Pacific

[12] Five percent, although not as low as Māori women at one percent.

youth, “The New Zealand National Youth 2007 survey found that 13 per cent of Pacific female secondary students and six percent of Pacific male students had experienced one or more episodes of unwanted sexual behaviour from another person in the last 12 months. Of those, 27% said the abuse was severe and more than half had not told anyone” (Percival et al., 2010, p.6).

Our review of violence studies with New Zealand-based Pacific respondents found that men are more likely to commit sexual violence offences than women, and women are more likely to be victims of sexual violence than men (see McPhillips et al, 2002; Percival et al., 2010; Malungahu & Nosa, 2018). However, women, though few, are also perpetrators of sexual violence, and men and LGBTQ+ peoples are also victims (Anae et al, 2000; Wharewera-Mika and McPhillips, 2016). Carswell et al (2019) find that very little research exists on the impact of sexual abuse on Pasifika men. Kingi et al. (2009) note that while few Pacific women report sexual violence, even fewer male and transgender sexual violence victims will report to the police (see also Dickson, 2017; Brown-Acton and Peteru, 2014).

Some findings reflect an overlap between family violence and sexual violence within Pacific communities. The Pacific Island Women’s Health Project (PIWHP, in McPhillips et al. report, 2002) stated that “Within Pacific communities in Auckland/Tamaki Makaurau, sexual abuse is mostly perpetrated by family members, acquaintances and people within the community. Perpetrators often span the range of male relatives, including uncles, grandfathers, and cousins. There may be multiple incidents of sexual abuse by multiple perpetrators within the family. Abuse is usually not reported to authorities even if disclosed” (p.98; see also Siataga, 2011; New Zealand Royal Commission of Inquiry, 2020).

Between the years 1997 and 2006, New Zealand police apprehension percentages for sexual violence offending in Pacific youth revealed a disturbing increase in levels compared to the same statistics for Pākehā and Māori groups. Pacific youth sexual violence offending was 0.42% in 1997 and 0.66% of their overall violent offending apprehensions for the study years compared to 0.27% and 0.44% for Māori, and 0.69% and 0.77% for Pākehā. These statistics suggest that there is both low reporting of Pacific sexual violence offending in Aotearoa NZ and low Pacific engagement in sexual violence research. A breakdown of different Pacific offending and victimisation patterns by gender, age and other variables is not yet fully or easily available (see Ioane, et al., 2013).

McPhillips et al. (2002) found significant underreporting of Pacific sexual abuse or violence in their study of sexual violence in Tamaki Makaurau/Auckland, especially where the abuse or violence happens within family or interpersonal contexts. This was affirmed by Kingi et al.’s study (2009) which found that Pasifika victims of sexual violence were the most reticent to report to police compared with Māori and New Zealand Europeans. There remains an information gap as to why this is so.

“In this study, Pacific participants were least likely to report to the Police (1 out of 8), followed by Māori (9 out of 21). New Zealand European participants were most likely to report (19 out of 37)” (Kingi et al., 2009, p.57).

In relation to reporting sexual violence within families, namely sibling incest, McPhillips et al (2002) found that brother/sister incest is the most commonly reported and is usually perpetuated by the older sibling (Araji and Boesk, 1997, cited in McPhillips, 2002, p.93). Araji and Boesk (ibid) identified four main factors contributing to the underreporting of incest, all of which have analytical value for assessing the underreporting of Pasifika incest cases. Namely:
(a) a tendency by parents (especially in sibling or close cousin incest) to label sexual behaviour as experimentation or exploratory, and therefore not serious enough to report,
(b) family members are generally more tolerant of incestuous relations between siblings when siblings are young, close in age, and where violence is not a factor – putting it down to natural experimentation that is not harmful,
(c) parents who discover brother/sister incest are unlikely to report a sexually abusive child, and/or
(d) an assumption that trauma is minimal because generational boundaries have not been violated.

Some underreporting is a result of personal beliefs about violence. Koloto and Sharma (2005) noted a case involving a Pasifika woman who did not report marital rape because she thought that rape was not possible within a marriage situation. Additionally, she believed that if she did report her husband that this would adversely affect her children and the possibility of that was enough to deter her from reporting him and leaving him. The PIWHP (in McPhillips et al., 2002) noted that for some of the Pacific women they worked with, many believed that sex was a wife's "marital obligation" (p. 99). Hand et al. (2002) similarly noted that Pacific women in their study considered violence within marital or marital type relationships as normal.

Moreover, McPhillips et al. (2002) have recorded migrant scepticism of the principle of professional confidentiality. They suggest that because of this, along with the low rates of Pacific sexual violence reporting and high prevalence of religious and cultural beliefs preventing migrants from talking openly about sex (even in a professional setting), reporting numbers are kept low. Disclosure of sexual violence happens usually only after the victim/survivor has established a trust relationship with those they disclose to (ibid). For SV victims/survivors, once a disclosure is made it can take many therapy sessions before healing begins and much depends on the trust relationship between survivor/victim and the SV worker (McPhillips et al., 2002; Wharewera-Mika and McPhillips, 2016; PSG & PWNSV, 2021; see also Vaka et al, 2016; Earl et al, 2014; Te Pou o te Whakairo nui, 2009).

3.1.2 Pasifika SV prevention approaches are culturally nuanced or specific, strengths-based, healing-focused, and family and/or community-led

PSG & PWNSV (2021), Pasefika Proud (2020) and *Te Aorerekura* (New Zealand Government, 2021), each find that because Pasifika continue to live in closely knitted communities in Aotearoa NZ, where traditional cultural understandings of family prevail, they are more likely to respond positively to prevention strategies and crisis and justice approaches that give due regard to traditional or indigenous Pacific values and foundations. The newly emerging Pasifika SV workforce network currently led by

Te Ohaakii a Hine – National Network Ending Sexual Violence Together (TOAH-NNEST)'s Pacific steering group draws a link between these foundations and those within Aotearoa's tangata whenua or Indigenous kaupapa Māori approaches (PSG & PWNSV, 2021).

Pacific approaches to sexual violence prevention and intervention differ from mainstream approaches in that they are culturally informed and nuanced, strength and healing-focused, and led by the family or community. This is reflected in the Pasefika Proud the *Pathways for Change 2019-2023* framework, which envisions "Pacific families and communities [that] are safe, resilient and enjoy wellbeing" (Pasefika Proud, 2020, p.4). Its theory of change centres on the Pacific family and their communities of support, noting that this is where "identity, belonging and sacred relationships are nurtured and protected" (ibid). However, as noted in the earlier section, violence can and does occur within family spaces. To make proactive positive changes away from family violence, capable of preventing the reoccurrence of violence, the framework contends that there exist Pacific cultural values with unique transformative powers that can be harnessed to create or inform preventive strategies and interventions that disrupt and heal intergenerational Pacific cycles of violence (ibid; see also Fa'alau and Wilson, 2020; Ministry of Social Development, 2012; Crichton-Hill, 2001). Vā and tapu are examples of such concepts, which are recognised in the recently launched *Te Aorerekura* family violence and sexual violence strategy.[13]

"For example, in different Pacific cultures, violence is understood as a fundamental disruption of the va (sacred space) or violation of tapū (forbidden and divine sacredness) of people that require actions to protect, heal and restore them. It is essential that responses to family violence and sexual violence are grounded in the culture and experience of the people, family or whanau who need support" (New Zealand Government, 2021, p.14, diacritics in original).

The literature reviewed suggests that the transformative power of Pacific concepts like tapu and vā lie in their abilities to make Pacific worldviews visible and comprehensible in mainstream policy spaces. The mere use of non-English Pacific indigenous words signals a different worldview. This is a necessary first step in the fight for policies and interventions that can recognise Pacific solutions that are values-based, community-led, and family-oriented (Pasefika Proud, 2020; McRobie in Wharewera-Mika and McPhillips, 2016). Author use of these concepts seek to bring about appropriate recognition to Pacific family violence and sexual violence frameworks, models or approaches that use and have long advocated for Pacific family-oriented, community-based solutions to violence that privilege Pacific concepts, values, methodologies and worldviews (e.g., use of the *Fonofale* name and model – cited in Ministry of Health, 1998; Thomsen and Tavita, 2018; Suaalii-Sauni, et al., 2009; the various *Vā* approaches – cited in McRobie in Wharewera-Mika and McPhillips, 2016; Ministry of Health and Le Va, 2014; and the *Nga Vaka o Kainga Tapu* frameworks – detailed by the Pacific Advisory Group, Ministry of Social Development, 2012).

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[13] The strategy, titled "Te Aorerekura: the enduring spirit of affection: the national strategy to eliminate family violence and sexual violence" (New Zealand Government, 2021), was launched on7 December 2021.

At present there is no specific Pacific sexual violence service model or workforce development framework in use in Aotearoa NZ (McRobie in Wharewera-Mika and McPhillips, 2016). According to McRobie (2016) the current Pacific SV workforce draws predominantly from the Fonofale model. It is also the most cited Pacific framework/model of health in the literature, created by Fuimaono Karl Pulotu-Endemann (see Ministry of Health, 2008, appendix pp.29-30). The model uses the image of a Samoan fale (house) as metaphor to depict and name what is important to Pacific peoples' health in Aotearoa NZ, and how they draw connections between key concepts common across Pacific value systems to frame Pacific wellbeing.

"The Fonofale model incorporates the values and beliefs that many Samoans, Cook Islanders, Tongans, Niueans, Tokelauans, and Fijians had told Fuimaono Karl during workshops relating to HIV/AIDS, sexuality and mental health from the early 1970s to 1995. In particular, these groups all stated that the most important things for them included **family, culture and spirituality**. The concept of the Samoan fale, or house, was used as a way to incorporate and depict a Pacific way of what was important to the cultural groups as well as what the author considered to be important components of Pacific peoples' health. The Fonofale model incorporates the metaphor of a house, with a roof, [posts] and foundation" (Ministry of Health, 2008, p.29, bold inserted).

Other Pacific models/frameworks/approaches cited by the literature reviewed, though less frequently, included:

- Seitapu Pacific clinical and cultural framework (Le Va, 2009),
- Teu le Va approach (Anae, 2016),
- Te Vaka model (the canoe model; Agnew et al., 2004, p.11; Suaalii-Sauni and Samu, 2009),
- Faafaletui model (a Samoan dialogue model; Agnew et al., ibid; Tamasese et al., 2005),
- Traditional healing treatment models (Agnew et al., ibid),
- Fonotaga a le Aiga approach (a Samoan meeting; Chauvel, 2012, p.12),
- La'u Puletasi model (utilising the Samoan metaphor of a traditional female dress; ibid),
- Aiga model of care (Samoan family model of care; ibid),
- Vaka Atafaga model (a Tokelauan canoe model; Kupa, 2009).

Each of the above models/frameworks/approaches affirm the importance of family, culture and spirituality to Pacific peoples. They assume an ethos of collective and familial care and responsibility, principles of never-ending service and reciprocity, of love and compassion, all implicit in the vā. These principles are understood and practised in culturally-nuanced ways specific to the ethnic Pacific group at hand. As Malatest International (2018) attests, the need to understand differences as well as similarities across Pacific groups is important when de-escalating or preventing violence.

"When we look at Pacific family violence interventions, programmes, understandings and activities to address this [family violence] phenomenon – such as Pasefika Proud

and the Nga Vaka o Kāiga Tapu (conceptual frameworks and training programmes) – we know that culture matters and understanding Pacific family violence within ethnic-specific and cultural worldviews provides **critical insights** to strengthen prevention and interventions that resonate with Pacific peoples." (Malatest International, 2018, in Pasefika Proud, 2020, p.20, bold inserted).

Vā and tapu are concepts embedded in frameworks developed for different Pacific professions, from health and education to social work and justice (Mafile'o, 2006; Airini, 2010; Pacific Advisory Group, 2012; McRobie in Wharewera-Mika and McPhillips, 2016; Ravulo et al., 2019; Redman-McLaren and Veukiso-Ulugia, 2019; Suaalii-Sauni et al., 2021; Wartzburg et al., 2003). The prevalence of sexual violence within Pacific families means that core vā relationships within the family have been violated and brought into tension with each other. Here the family space can and does become for victims of sexual violence a space "of terror and dysfunction", one that engenders confusion, pain, "loss of belonging and identity" (Pasefika Proud, 2020, p.4). Critically exploring the conceptual and practice parameters and nuances of different Pacific understandings and practices of the vā has potential to facilitate deep access to the 'critical insights' suggested by Malatest International (2018), and into the complexities of the terror and dysfunction, and by extension into the rethinking of appropriate interventions, implied above.

Pulotu-Endemann et al.'s (2007) point, that cultural awareness and sensitivity to Pacific cultural contexts when working with Pacific peoples affected by mental health problems in clinical and organisational contexts, applies equally to sexual violence. In the Pulotu-Endemann et al. (2007) report they reflect on a story told by a health service's matua (elder) advisory group member about incest in a traditional Indigenous Fijian context. The incest, she explained, was seen by some as 'normal' among the aristocracy or high born. Such occurrences were considered and promoted not as sexual violence but as cultural duty. Should anyone object, the objections would be dismissed or silenced on these grounds. Here, explaining how to navigate between protecting practices considered 'traditional' on the one hand, and individual human rights and freedoms on the other becomes messy and emotionally volatile (see also Robertson et al., 2007). In such contexts, stigma, shame, and silence abound, and understandings vary on how and where sex, consent, tapu and vā (ought to) operate. Pulotu-Endemann et al's report (2007) states:

"…Although traditionally shunned by most families, incest and/or familial rape was commonly practiced in traditional Fijian society by men of chiefly rank. Victims would include both women and children, many of who were usually members of the same nuclear or extended family as the chief. … Single female victims who became pregnant as a result of such incest or familial rape were often immediately married off to one of the high chief's subjects within the same clan or mataqali before the pregnancy was widely known. This was to prevent shame and retribution upon the perpetrating chief. The link between the impact of incest and familial rape of this kind on the various parties involved and any mental health issues suffered by them is speculative at this point. The common occurrence of such a practice in traditional times raises similar speculation over the prevalence of related mental health conditions. It was common for women who endured these circumstances to become mentally unwell from the shame incurred. The shame invariably remained with her despite her nuptials. Child victims

of incest and/or familial rape were similarly believed to become mentally unwell" (p.48-49).

Although speculative, the quote indicates a context worth following up on in terms of the acceptability and/or prevalence of this alleged chiefly privilege. No up-to-date information was found in the literature reviewed on this specific point. The quote makes visible a suggested context of sexual power dynamics, and of associated shame and stigma, from within an indigenous Pacific society not often written about. It highlights the kinds of overlapping issues extant within.

Because of the respect that Pacific cultures give to the family institution and their chiefs or leaders, when sexual abuse occurs it is often shrouded in secrecy (Percival et al., 2010; UN ESCAP, 2009; Sumeo, 2004). To deal with the stigma, shame, and silence, Mataia (2016) finds that because sexual violence is potentially demeaning of a person's mana (both the victim's and the offender's) and that of their respective families, knowing how to talk about sex and sexual violence requires cultural knowledge and competence (see also Pulotu-Endemann and Falefa, 2017). Humour, when used appropriately, is seen as a useful tool to combat the awkwardness of approaching sex-related topics with Pacific families (McPhillips et al., 2002). One source describes how in Niuean and Samoan cultural norms, humour, metaphors, allegories and storytelling (faagogo) are used to help address sex and sexual abuse matters. They report:

"In the Niue culture, sex is also not discussed openly, and similarly it is discussed only by way of humour…. [For Samoans] messages are also conveyed through falea'itu (Samoan=comedy)(sic). Strong messages about rape can be presented in that medium. A further example of a way for raising awareness is the use of fa'agogo (Samoan=bedtime story)(sic). This is a metaphorical way of conveying the message… There is no one word for rape. The Niue words that have been used in relation to sexual abuse include, fakapilo, takiva (to dirty something). Samoan words include fa'amalosi (to force) and pule le uma ([lit. 'authority that does not end' for] child sexual abuse)" (McPhillips et al., 2002, p.100).

According to Mataia (2016), when working with Pacific sexual violence cases, social workers must be prepared to address, speak to, negotiate and work through the gravity of unspeakable sexual violence acts committed but without necessarily naming them. This is, as Pulotu-Endemann et al (2007) have noted, at least in part, because of the tapu and gendered sensitivities or taboos ascribed to sex and to talking about sex by Pacific cultures (see also Griffen, 2006).

"The issue of sex is tapu and sensitive in the Pacific context. In particular if the discussion involves both men and women especially if they are from the same family (e.g., brother and sister or son and mother). The specialist worker should have the ability to ensure discussions on issues of sex and sexuality are done in a sensitive manner and in a culturally safe environment. [This] can be achieved by doing it in a gender specific forum or if there is a mix of genders and age groups (young and old) that the appropriate respectful and less graphic language is used" (Pulotu-Endemann et al, 2007, pp. 36-37).

Carmel Peteru (2012) refers to how the 'culture of silence' around sex in the Pacific discriminates against Pacific women and children, and particularly those living in situations of social and economic deprivation. Peteru (2012) suggests that sadly the low status of women and children in the Pacific increases the likelihood that they will be exploited and/or abused, physically and/or sexually. Peteru notes that because are at the bottom of most modern Pacific Christian social hierarchies, and males at the top, they are expected to accept roles of submission to 'senior' males, from husbands to fathers, brothers, chiefs and/or family elders. Where this is the case, Peteru argues that "girls may have difficulty rejecting [their] sexual advances and are less likely to recognise that they are being abused or exploited" (Peteru, 2012, p. 18; see also McPhillips, 2002).

Te Paa Daniel (2018) bravely calls out exploitative male behaviour within the Pacific church and clergy hierarchies, arguing that they have been either active or complicit in perpetuating male violence against Pacific women for too long. The Pacific church (largely Christian) plays a significant role in the lives of many Pacific peoples in Aotearoa NZ (see Census 2018 statistics, see also section 1 of this report; see also Alefaio-Tugia and Havea, 2016; Makasiale et al., 2007; Filemoni-Tofaeono and Johnson, 2006). Pacific women from cultures with strong religious beliefs in the subservience of women to men have had considerable pressure put on them to forgive their perpetrators. Offender remorse and preventing family disunity are cited as reasons for Pacific victims to forgive their assailants (McPhillips et al., 2002; McRobie in Wharewera-Mika and McPhillips, 2016). While forgiveness may be appropriate in some cases, in others it may not, at least not straight away, which is something that even Indigenous Pacific restorative justice approaches can find difficult when families want immediate resolve (McRobie in Wharewera-Mika and McPhillips, 2016). This is something Pacific sexual violence frameworks will need to address.

3.1.3 Māori and Pasifika sexual violence workforce development concerns and modalities of healing are aligned and connected

The Pacific Steering Group and Pasifika Workforce Network Sexual Violence submission to government (PSG & PWNSV, 2021) notes a historical relationship between Pasifika and Māori, evident in the claim that they have a relationship that "spans thousands of years in this Moana", share "modalities of healing" that are "similar and closely related" and "align more closely …than with mainstream healing practices" (p.5). The submission also notes that the historical relationship between the Crown and Māori serves as a useful lesson to Pasifika about the challenges of gaining due recognition for Pacific values and paradigms in public policy settings.

"Pasifika people see the broken relationship between the Crown and Kaupapa Māori (sic). Constant undermining of Kaupapa Māori creates glass ceilings for what and how Pasifika can consider real partnerships to look like. Te Hau Tangata [circa, 2019] has a good definition of violence for us" (ibid, p.8).

Formal recognition of a shared Polynesian heritage between Māori and Pasifika that at the same time honours Māori as tangata whenua of Aotearoa NZ, enables opportunity for Māori and Pasifika to share in the strengths in their Indigenous healing models

without compromising the vā between them as tangata whenua and tauiwi in Aotearoa NZ.

3.1.4 Family violence, sexual violence, and sexual harm are interconnected

Te Aorerekura (New Zealand Government, 2021) assumes that where sexual violence or harm is present, other forms of violence or harm are most likely to also be present. Given the high incidences of sexual violence occurring in family settings across cultures and countries (World Health Organisation, 2013; Cripps and McGlade, 2014; Gavey and Farley, 2021; New Zealand Government, 2021; Paulin et al., 2018) the coupling of family violence or domestic violence with sexual violence makes sense. This is even more so for Pacific peoples who consider sex and family relations sacrosanct (Percival et al. 2010; Pacific Advisory Group, 2012; Pasefika Proud, 2020).

Cripps and McGlade (2008) remind us that context is everything and that there is no single cause for family violence and sexual violence, but rather "a multitude of inter-related factors" (p.242). In exploring the case of Indigenous peoples in Australia, and in Canada, they contend that strengthening victims'/survivors' and offenders' community and family help systems will be more effective than sending family violence and/or sexual abuse offenders to prison (ibid, p.234). The implication is that families and communities or support people know their people best and are more likely to care about what happens to them in the short and long term. This is of relevance to all peoples, including Pacific.

Robertson et al.'s (2007) comprehensive and moving reports (volumes 1 and 2) on women's experiences of protection orders in New Zealand included Pasifika participants. Their findings support an analysis of how family or domestic violence (including intimate partner violence) intersects with child abuse and sexual violence. They found that "men's violence against women is often accompanied by violence against their children", even sexual violence (ibid., p.247, volume 2). They note how in one of their Pasifika case studies, Mele (a pseudonym) was sexually and physically abused by her father and witnessed horrific physical violence against her mother since she was at least seven years old. In analysing the gaps between law and practice, Robertson et al. (2007) identified that there exists a serious gap between "women's experience of violence, intimidation and abuse and the way the system respond[s]" (p.6, volume 1).

3.1.5 The ambiguities of sex, sexuality and consent make sexual violence a complex issue to address

Robertson et al (2007) note that in relation to violence against children in Aotearoa NZ , the Care of Children Act 2004 limits violence against children to physical and sexual violence. However, as Gavey and Farley (2021) and Robertson et al. (2007) discuss, sexual violence also includes psychological and emotional violence, online stalking, distribution of photographs without consent for sexual purposes, and sexual harassment and grooming, where no physical sexual assault occurs. With most members of Pacific families today having easier access to cell phones and online platforms, especially to social media (Brimacombe, 2017), and many still unfamiliar

with how online systems work, opportunities to be unknowingly exploited by sexual predators, known and unknown, have increased, putting Pacific peoples at considerable risk.

Gavey and Farley (2021) also caution policymakers against being too quick to replace 'sexual violence' with 'sexual harm'. They argue that sexual violence is used as "an umbrella term for a wide spectrum of different forms of sexual exploitation, coercion, abuse, and violence" (ibid, p.229) and is flexible in ways that 'sexual harm' is not. They found that over the last twenty years sexual violence has gained significant currency, coherence and presence in New Zealand policy and decision-making spaces, giving "community-based advocates and service providers significant voice at the policymaking table" (ibid, p.231). They cite the important involvement of community networks like TOAH-NNEST and conclude against the need to move away from the term sexual violence; advocating that sexual violence, unlike harm, keeps systemic and structural violence – the 'unseen' or hard to see violence – on the table. This is important for all Indigenous, minority, vulnerable and/or marginalised peoples who are as much affected, if not more so, by systemic and structural bias or violence as by physical, psychological, and emotional violence.

Pacific cultural constructs relating to sexually abusive behaviour can be complex and that complexity is often left underexamined because of the taboos associated with sex. This creates situations where these myriad ambiguities surrounding sex, sexuality and consent act to hinder the effectiveness of interventions and the achievement of true healing. An example of an ambiguous Pacific sexual offending construct can be found in the notions or phenomena of moetolo ('sleep crawler') and toso teine (a person who 'pulls' – toso – girls for sex). These were discussed by the male participants of Anae et al's (2000) study of Samoan men's roles and responsibilities in reproduction. The moetolo is commonly described as someone (usually a male) who crawls "at night to a woman's house with sexual malintent" (Percival et al. 2010, p.11). Percival et al. (2010) point out that the moetolo of Samoa is similar to the motoro of the Cook Islands, the moetotolo of Tokelau, and the tolopo of Niue (ibid). Margaret Mead, in her famous 1928 text, *Coming of Age in Samoa*, describes the moetolo[14] as "the curious form of surreptitious rape… sleep crawling, resorted to by youth who find favour in no maiden's eyes" (1928, p.88). This is a reading of the moetolo that Seiuli (2016) draws on and privileges to help explain the sexual deviance and offending of his Samoan client Fa'asala (a pseudonym), who is imprisoned in New Zealand for his "hands-off" sexual violations against young girls in his neighbourhood while they slept.

However, Sailiata (2014) records a relatively recent discussion of the moetolo by Samoan academics from the National University of Samoa who presented at the Pacific History Association conference in Wellington. These academics claimed that the moetolo is a phenomenon wider than that suggested by Margaret Mead (1928), Seiuli (2016) and others.[15] They claimed that there are different moetolo scenarios, not just that involving a 'surreptitious rapist' with clear intent to commit rape. One such

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14 She uses the longer spelling *moetotolo*.

15 See Seiuli's (2016) article for references to Tuvale's (1968) and Bradd Shore's (1975) accounts of the moetolo, for example.

alternative scenario involves males engaging in a male bravado game, like a dare, where the intent was not to rape anyone but more to see if they could crawl into a girl's bed chambers without getting caught. This scenario is arguably alluded to in the words of the moetolo song, known to the above Samoan academics and commonly sung in 1950s-1970s Samoa, and supported by Samoan male informants. Another scenario involved couples who are having a clandestine relationship and decide to rendezvous in her fale (house) but are almost caught by her male kinfolk had it not been for her cry of 'moetolo' which distracted them from identifying her beau. In this case the moetolo label is used as a ruse. These scenarios show how cultural constructs of sexual deviance like the moetolo might be a lot more fluid or multilayered than at first presumed. The different applications highlight the need for more rigorous research into the complexities and multiplicities of meaning potentially present in Pacific sexualised constructs that captures nuance and can draw relevant links to policy and practice imperatives.

The issue of consent is pivotal to criminal proceedings against sexual violence or abuse (Robertson et al., 2007). Modern criminal codes or laws stipulate a minimum age of consent to sexual relations. In New Zealand sexual relations with a person under the age of 16 years is considered statutory rape regardless of custom or cultural convention and offenders are strictly liable if caught, even if the minor allegedly consented or had parental consent to get married before 16 (as is sometimes the case with arranged marriages or traditional cultural betrothals outside of New Zealand).[16]

The jurisprudence of modern strict liability crimes includes the view that there are certain crimes (such as the sexual violation of a minor or 'driving while under the influence'[17]) where intent and/or consent is believed irrelevant. In these situations, the argument is that cultural relativism is to be avoided in order for legal standards to be met and fairness and justice for all to be seen to be upheld (ibid; see also Kim, 1997; Percival et al, 2010). However, migrants bring with them attitudes to sex and patterns of sexual behaviour that are shaped by the social, religious, and political contexts of the countries they came from. Understanding these attitudes and behaviours can help nuance Pacific sexual violence prevention strategies and crisis intervention approaches.

Understanding age of consent across the Pacific, for example, can help give some context to Pacific sexual offender attitudes. The age of consent varies slightly from country to country in the Pacific Islands or Oceania, with most, like New Zealand, currently setting their age of consent at 16 years, with some countries going as low as

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16 In New Zealand s128-134 of the Crimes Amendment Act 2005 defines acts of sexual violation using the language of 'rape', 'incest' and 'unlawful sexual connection'. Section 134 of the Act relates to "sexual conduct with young person under 16" and subsection 1 says that "sexual connection with a young person [under 16 years] is liable to imprisonment for a term not exceeding 10 years". See: https://www.legislation.govt.nz/act/public/2005/0041/latest/DLM346175.html. In New Zealand marriage before 16 years is illegal. The age of consent to marry without parental consent in New Zealand is 20 years. Seventeen-to-nineteen year-olds who wish to marry must have the consent of their legal guardians.

17 "In November 2013, Cabinet agreed to lower the adult limit to 250mcg of alcohol per litre of breath and 50mg of alcohol per 100ml of blood. The change was put in place through an amendment to the Land Transport Act 1998. The new limit came into effect on 1 December 2014." See: https://www.transport.govt.nz/about-us/what-we-do/queries/regulation-of-drink-driving-limits/

14 years and as high as 19 years.[18] Child marriages are also not unheard of in the Pacific.[19] And what constitutes a child, legally speaking, depends on which Pacific country one is in. Moreover, in most Pacific Island countries, same sex marriages and same sex sexual relations is illegal no matter the age.[20] Indeed, except for Aotearoa NZ and Australia, heterosexuality within most of the Pacific Islands is considered fixed with any public suggestion to the contrary condemned, i.e., ideas of sexuality being fluid, bi or polyamorous for example. This is not to say, however, that same sex sexual relations do not happen in the Pacific Islands or that same sex cohabitations are not accepted among Pacific peoples and cultures. McMullin and Kihara (2018) with respect to the fa'afafine and fa'afatama of Samoa suggest that same sex relations have been present in Samoa and part of Samoa's cultural fabric for centuries. Claims of public acceptance in Samoa of fa'afafine could arguably be reflected in the fact that Samoa's Fa'afafine Association is quite active in Samoan public life (in Samoa and in the diaspora) and has been for some time, and in the fact that Samoa's former Prime Minister Tuilaepa Sailele was not afraid to express public support for the Association despite his country's stance against homosexuality.[21]

What all situations of sexual violence and abuse have in common is the issue of consent. Namely, the lack of consent. However, as Tuulia Law (2020) explains, anti-rape culture campaigns and interventions that merely replace 'no means no' with 'yes means yes' slogans miss the point about the active and passive ambiguities around sex, sexuality and consent that lie within both 'rape culture' and 'positive sex culture'. If these are not interrogated and honestly reflected on, it can potentially derail intervention efforts regardless of intention. Learning about sexuality, about what one likes in sex or not, what one believes is their sexual orientation or not, at any particular time, is dependent on so many different variables and combinations of variables that wading through the myriad qualifications and disclaimers can become counterproductive. Because of this Law (2020) notes that activist campaigns that flipped the 'no means no' to 'yes means yes' slogan, using the 'consent is sexy' idea to shift the narrative away from the defensive, run into the same problems of ambiguity faced by 'no means no' campaigners.

In cultures and societies where talk of sex in public is highly taboo, made secret, and punished (like that within many Pacific cultures), the natural ambiguities surrounding consent are misunderstood, feared, and/or left underexplored, creating overly simplistic and reductionist thinking that will favour dogmatic certainty in policy over

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18 See: https://www.ageofconsent.net/continent/oceania. FSM at14 years, Kiribati and Solomon Islands at15 years, Nauru at17 years, Northern Mariana Islands at 18 years, and Niue at 19 years. The rest of the 12 Oceania countries listed in the website set the age of consent at 16 years, including Samoa, Tonga, Fiji, Cook Islands, PNG, Australia and New Zealand. The point is that there is variability in the Pacific Islands or Oceania, and that variability depends on the dominant cultural and religious beliefs of each country at any given time and on the sexual and religious politics of the day.

19 See: https://pacific.unfpa.org/en/news/editorial-pacific-can-become-global-leader-ending-child-marriage

20 See: https://antigaylaws.org/regional/pacificoceania/.

21 See: https://www.rnz.co.nz/international/pacific-news/397872/understanding-the-pacific-s-alternative-genders; see also the SFA Facebook page for evidence of public activities: https://www.facebook.com/sfainc/; see also https://www.rnz.co.nz/international/pacific-news/319827/samoa-pm-praises-fa'afafine-association.

dynamic fluidity if pushed. This will confound rather than help resolve the problem. Researchers have found that ambiguity around sexual violations occur in situations where 'bad sex', including grooming and 'hands-off' sex, is normalised or condoned and can, as shared by some of the participants of Robertson et al.'s (2007) study, be erroneously seen as 'good sex'. If these ambiguities are left uninterrogated overly simplistic assessments of sexual violence (Pacific or otherwise) that don't quite hit the mark will continue to mislead sexual violence prevention policy and practice.

"[We must acknowledge that there is] a vast expanse of bad sex – joyless, exploitative encounters that reflect a persistently sexist culture and can be hard to acknowledge without sounding prudish – has gone largely uninterrogated" (Wodda and Panfil, 2017, p.10 in Law, 2020, p.272).

3.1.6 There is a dearth of evidence-based information on who constitutes the Pacific SV workforce and why, their experiences and support needs, and this should be addressed

Our literature search revealed a continued dearth of specific information about the Pacific SV workforce of Aotearoa NZ – information about who constitutes the workforce, their experiences, and their support needs. Percival et al.'s (2010) report noted that among its aims was the aim to "Examine Pacific cultural sexual violence prevention approaches that could be further developed by the *sexual violence workforce in New Zealand*" (ibid, p.5, italics inserted). They suggest that a "Pacific workforce related to sexual violence" is present in New Zealand (2010, p.19) and argued that there is a need to increase its "capacity and capability", especially in "policy making, service delivery, community organisation, research and evaluation" (ibid). But they did not elaborate on the scope or makeup of this workforce. They recommended that the workforce ought to be supported, however, through:

- "Strategies to increase ethnic-specific Pacific services and [the general] workforce to ensure Pacific families receive appropriate services",[22]
- "Cultural safety training for the existing anti-violence workforce to ensure Pacific families receive appropriate services",
- "Particular focus on workforce development for Pacific men working with Pacific sex offenders", and
- "Particular focus on training and upskilling of Pacific counsellors to increase the numbers who are ACC accredited" (ibid).

The inferences are, in relation to a Pacific SV workforce, that (a) it is a workforce that is involved in the prevention of sexual and other associated violence, (b) it is a workforce that is (or ought to be) knowledgeable about relevant Pacific cultural matters (or have easy access to this knowledge and have those whose knowledge is accessed appropriately recognised) and that these matters continue to be of importance to Pacific families in Aotearoa NZ, (c) that it is a workforce that works closely with Pacific survivors/victims and their families or support people, (d) is lacking in Pacific male workers who can work with Pacific sex offenders (presumably Pacific male sex

[22] Alongside the call for ethnic-specific services is a call for more gender-specific services or programmes the recognise the different needs of different gender groups within Pacific, such as the work carried out by the Pacific team at SAFE Network, Auckland, with Pacific male sexual offenders.

offenders), and (e) is a workforce that has a significant need for but lacks sufficient numbers of ACC accredited Pacific counsellors. Here we catch glimpses of who, according to the literature, constitutes (or ought to constitute) the current Pacific SV workforce of Aotearoa NZ and what some of their experiences and support needs might be. These findings are also supported by McRobie (2016) and PSG & PWNSV (2021).

Most recently, in their submission to the national strategy for family violence and sexual violence, the newly emerging network of Pasifika sexual violence workers led by TOAH-NNEST's Pacific steering group (PSG & PWNSV, 2021) argued for:

1. the urgent need to invest "*in research* into Pasifika communities and relationships – particularly around healing methodologies",
2. the urgent need to invest in "*workforce development* across the sexual violence sector that engages and sustains Pasifika pathways", and
3. the urgent need to invest in "*appropriate and safe* [SV services and prevention initiatives] for Pasifika communities" (PSG & PWNSV, 2021, p.3).

What both PSG & PWNSV (2021) and Percival et al. (2010) imply is that the Pacific SV workforce is not only not well understood but that this has a lot to do with it being under-researched, under-theorised and not empirically researched and/or tested enough. Detailed studies such as those conducted by Percival et al. (2010), Pacific Advisory Group (2012), Wharewera-Mika and McPhillips (2016), Carswell et al. (2019), and Malatest (2021), provide useful insights into the cultural belief systems of Aotearoa NZ's Pacific population and into what practitioners see as some key Pacific 'good practice' concerns and frameworks for working with Pacific survivors/victims and offenders of sexual violence, their families, communities and support people.

What is not available within the current literature found is detailed information on the workforce itself, the scope of professions and/or job types within it, demographic and other descriptive profiles, specific discussion on workforce experiences and concerns (NZ Human Rights Commission, 2020; EEO Trust, 2011). Malatest International (2021) suggests that more research is needed on Pacific young peoples' perspectives of family violence and sexual violence, while Carswell et al (2019) and Wharewera-Mika and McPhillips (2016) find that there is also a need to pay specific attention to the impact of sexual violence on Pasifika men and LGBTQ+ peoples, and on the need for services that can work specifically with them.

3.1.7 A co-ordinated national Pasifika SV workforce network is needed, is emerging and is currently made up of less than 50 Pasifika SV 'specialists' of Pasifika descent

In June 2021, TOAH-NNEST's Pacific steering group (PSG & PWNSV, 2021) coordinated an online zoom fono (meeting) with some members of the Pasifika SV workforce network from throughout Aotearoa NZ to discuss the government's national strategy to eliminate family violence and sexual violence. The feedback received from fono participants formed the basis of their submission, presented by the TOAH-NNEST Pacific steering group on behalf of the fono to government. While the submission served as a catalyst for potentially establishing a more formal and representative national

Pacific SV workforce network complete with its own governance and membership, it is clear that to get the idea of a national Pasifika SV workforce network started, coming together to author the submission was important.

"The network is emerging and does not yet have relationships established within it to make this particular consultation a thorough overview of the Pasifika workforce contributions. This network will continue to meet on a regular basis…to develop the nurturing relationships required to gather information on the sexual violence sector from a Pasifika perspective" (PSG & PWNSV, 2021, p.3).

From the feedback received from fono participants, the submission claims that "As far as we know, *there are less than 50 Pasifika sexual violence specialists that make up the Pasifika sexual violence workforce*" (PSG & PWNSV, 2021, p.5, italics inserted). From the literature surveyed this is the only source that makes such a claim, albeit qualified. This offers a concrete baseline starting place for determining workforce numbers and potential members. When analysed further, alongside information from other sources within the literature (e.g., McRobie in Wharewera-Mika and McPhillips, 2016; Percival, et al., 2010), the reference to 'specialists' may be understood as referring to those considered 'professionals' (i.e., a qualified member of an existing caring profession such as social work, counselling, therapy, psychiatry, general medical practice, sexual violence policy, research and evaluation). However, PSG & PWNSV (2021) is not clear whether the workforce ought to be limited to these 'specialists' or can be broadened to include other job titles, including peer or community support workers, voluntary or paid. PSG & PWNSV's reference to those who attended the fono as constituting people who "work in the area of sexual violence in varying degrees of proximity to client focused work" may be read as including peer support workers (2021, p.3).

Of importance for the workforce is the question of ethnicity. That is, whether to limit the Pasifika SV workforce network to members who are of Pacific descent only or not. Those who participated in the PSG & PWNSV submission were described as "sexual violence workers [from] around New Zealand Aotearoa who are of Pasifika descent" (PSG & PWNSV, 2021, p.3). McRobie (2016) suggests that there are a significant number of sexual violence sector workers not of Pasifika descent who work with Pasifika clients. This is a question with political and practical implications for the emerging national Pasifika SV workforce network and is one that concerns all Pacific and other ethnic-specific workforce initiatives across Aotearoa NZ.

3.1.8 The current Pasifika SV workforce experience significant 'compassion fatigue'

PSG & PWNSV (2021) contend that because of the paucity of Pasifika practitioners with the requisite cultural and/or clinical and/or peer support skills needed, those currently servicing the needs of Pasifika clients can experience significant amounts of 'compassion fatigue'. The factors leading to that fatigue, she contends, are as much cultural as they are work-related and impact workforce retention and wellbeing. Moreover, addressing this concern will require better understanding of the overlaps between the clinical and cultural in professional and/or organisational practice.

"There are so few Pasifika sexual violence workers in the country, that they experience compassion fatigue. Not only do they honour this deeply complex work in their daily

paid practitioner space, but they also often end up being the person best equipped to deal with family and community disclosures of sexual violence where the family/community have decided the safest approach does not include pathways currently available like social services or reporting to police. …The same sexual violence workers who experience compassion fatigue in their work and personal lives, also end up being key advocates for the sexual violence sector in various positions. This model of practice is not sustainable, but it is deeply necessary to have strong advocates for Pasifika within the sector." (p.5).

'Compassion fatigue' is a risk factor for workforce 'burn-out' and thus a significant barrier to workforce retention and job satisfaction (Devilly et al, 2009; Pross, 2006; Gilbert and Proctor, 2006). There is a moral 'response-ability' on governments and employers to ensure that the workforce is properly protected from such risk factors. PSG & PWNSV (2021) suggest that for Pacific SV workers, compassion fatigue involves the stress of not only having to deal with the heaviness of sexual violence disclosures but also the burden of representing Pacific concerns in a sector that tends to marginalise them.

3.1.9 Workforce inequities, inappropriate supervision and a lack of leadership and promotion pathways have negative implications for Pasifika workforce retention

PSG & PWNSV (2021) raise a list of workforce needs that participants of their fono identified as important to growing and retaining Pasifika sexual violence workers. These included:

- "Adequate supervision…includes culturally specific supervision",
- "Equitable pay scales",
- "Pathways to leadership – educational opportunities for management on appropriate pathways for Pasifika sexual violence workforce to upskill",
- "More capacity in the workforce – invest in the Pasifika people already in the sexual violence sector, so that leadership opportunities can be engaged, without overloading the other, very few, Pasifika specialists in sexual violence sector" (ibid, p.6).

The fono advocated strongly for the establishment of a sexual violence infrastructure to support the proper and safe development of a Pasifika sexual violence workforce, complete with culturally informed processes for career progression and community leadership development.

"There is a reluctance from Pasifika practitioners in the sexual violence sector to claim their knowledge titles – always assuming someone else knows more – but also being aware through experience that the sexual violence sector lacks the infrastructure to safely accommodate their career progression and support their leadership with Pasifika communities. …Without the infrastructure to support our Pasifika sexual violence workers, there is little space available for Pasifika people to respectfully and safely hold their communities accountable for sexual violence and for healing from sexual violence" (ibid, p.5).

PSG & PWNSV (2021) record a list of recommendations from the fono for the development of this infrastructure. It includes the establishment of appropriate educational and service support for Pasifika survivors/victims, their families, and chosen support people. And a long-term investment plan to build and grow a Pasifika workforce, building capacity and capability. They argue for investment in "targeted scholarships" (ibid, p.6) and in "research [and education] on sexual violence [and 'right' Pacific indigenous healing approaches] in Pasifika communities" (ibid, p.6, 9).

3.1.10 There is a need for a new Pasifika acumen, one that is agile and creative but also grounded, that can keep up with the constantly changing dynamics of Pasifika sexual violence work without losing the integrity of Pasifika values

Jean Mitaera (cited in Pasefika Proud, 2020, p.6) and Carmel Peteru (2012) speak of the need for Pacific leaders to develop a new acumen, one that can "unshackle ourselves from the safety of the 'known'" and "recast our [Pacific] vision with imagination and possibilities" so that "we do not … run the risk of fulfilling every negative prediction that has already been cast about us" (Mitaera, ibid). Peteru (2012) pushes for this new acumen in the hope that it can better articulate for mainstream sensibilities the relationship between 'culture' and 'offending', and 'culture' and 'victimisation' from a Pacific perspective. Pacific victims, perpetrators, and their families each have their own experience of culture and its impacts on offending and victimisation. Working effectively with them requires first acknowledging this. Mitaera and Peteru believe that it is time to delve more deeply into the methodologies, ontologies, and epistemologies of Pacific modalities of healing, to harness their potential to redefine and recast Pacific futures as futures that are, by definition, abuse free.

In conclusion

"We want to thrive, not just survive!" (PSG & PWNSV, 2021, p.6).

Our review of the literature suggests that there is much work to be done to better understand and support the needs of Aotearoa NZ's emerging Pacific SV workforce. The literature surveyed expressed a clear need for such a workforce but was less clear about how best to develop it. What was clear was that while there exists such a workforce in Aotearoa NZ, it is currently fragmented and stretched, and in urgent need of infrastructural support to grow and thrive. And though it is still taking form and is currently seen to be made up of workers with specialist professional, clinical, cultural and/or peer support skills, supporting the establishment and growth of such a workforce is invaluable for both Pacific peoples and Aotearoa NZ as a whole.

For over 70 years Pacific peoples have migrated and settled in Aotearoa NZ (Mallon et al, 2012). Today they constitute 8% of the total New Zealand population (New Zealand Census, 2018). The literature we accessed suggests that while there continues to be large gaps in SV workforce knowledge of SV in Pasifika spaces, there is a small but informative body of Pacific focused literature that is useful, particularly when it is brought into meaningful conversation with wider research knowledge on sexual violence, sex, sexuality and consent (NZ Royal Commission of Inquiry, 2020; Simon-Kumar, 2016; Abrahams et al., 2014; Coles et al, 2013; Fanslow and Robinson, 2014;

Fanslow et al, 2010; McGregor, 2011; Mossman, et al., 2009; Powell and Henry, 2014; Schluter et al, 2007; Triggs et al., 2009). We conclude that the main challenge suggested by the literature for building the kind of specialised acumen and leadership needed to guide Aotearoa NZ's Pasifika SV workforce forward lies not, as mama Jean says, in Pasifika and Aotearoa merely recreating "the known" (Pasefika Proud, 2020, p.6), but in Aotearoa and Pasifika being able to recast and reimagine that known, and have meaningful vā-filled conversations with it, together.

3.2 Online Questionnaire Findings

These questionnaire findings are descriptive only.

3.2.1 Summary of respondents' demographic profile (by ethnicity, place of residence, age, gender, and highest formal New Zealand education qualification)

(a) Ethnicity and Place of Residence

The overall ethnicity and place of residence profile of our questionnaire respondents reflects that of the 2018 New Zealand Pacific population census (New Zealand Census, 2018). Participants self-identified their ethnicity and had the option of selecting more than one ethnic group. For single ethnicity counts, Samoans make up 48% of the total Pacific population of Aotearoa NZ and are 50.9% of our respondent population.[23] The other single ethnic categories represented in our overall respondent population include those who self-identify as Tongan (7.3%), Fijian (7.2%, which is evenly split between i-Taukei or Indigenous Fijian and Indo-Fijian)[24], Niuean (3.5%), Solomon Islander (1.8%), Tokelauan (1.8%), Cook Islander (1.8%), and Tuvaluan (1.8%).

Of interest, in terms of implications for the delivery of Pacific-specific or ethnic-specific approaches when working with Pacific peoples affected by SV, is the number of respondents of mixed ethnicities (18.2%, counting both respondents of mixed Pacific ethnicities, and mixed Pacific and non-Pacific ethnicities). Furthermore, 5.5% of respondents noted not being of any Pacific ethnicity. This latter statistic is of interest in terms of understanding the scope of the ethnic make-up of practitioners who work with Pacific SV clients who may also benefit from Pacific practice guidelines and access to a Pacific SV workforce support network.[25]

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[23] According to the 2018 New Zealand population census, 60% of Pacific peoples belong to a single Pacific ethnic group. Samoans are by far the largest single ethnic group (48%), followed by Tongans (21.5%) and Cook Islanders (21%), then a large number of smaller Pacific ethnic groups (14 in total) include Niueans (8%), Fijians (5%, which is inclusive of Indigenous Fijians or i-Taukei, Fijian-Indians, and Fijian-Rotumans), Tokelauans (2%), Tuvaluans (1%), i-Kiribati (0.8%), Tahitians (0.5%), Papua New Guineans (0.3%), ni-Vanuatu (0.25%), Solomon Islanders (0.2%), and Hawaiians (0.1%). (Note that the overall percentage for total share of Pacific ethnic groups listed equals over 100% as respondents could self-identify as belonging to more than one Pacific ethnic group. This suggests that the size of Pacific peoples belonging to more than one Pacific ethnicity is probably around 8-10% but this does not account for those who self-identify as belonging to one or more Pacific and non-Pacific ethnic group, especially Pacific-Māori and/or Pacific-Pākehā/European ethnicities or both).

[24] We acknowledge that there is debate within different Pacific sectors surrounding reference to or inclusion of Fijian Indians or Indo-Fijians within the Pacific peoples or Pasifika category in Aotearoa New Zealand. As a baseline study of the Pacific SV workforce in Aotearoa New Zealand, we have included Indo-Fijians or Fijian Indians in this project as participants who responded to the call to participate in our online questionnaire and talanoa sessions self-identified as Fijian and Fijian Indian or Indo-Fijian. This is in itself a key finding.

[25] We have included non-Pacific peoples here for two reasons: because 1. the anonymous questionnaire was distributed through national organisations whose membership were made up of Pacific and non-Pacific ethnic groups, and so was likely to attract all peoples who worked with Pacific SV survivors, and 2. the definition of a 'Pacific SV workforce' could arguably include all peoples who work with Pacific SV survivors regardless of ethnicity. See the Discussion section of this report for further comment on this issue.

In terms of place of residence, 63.9% of the total Pacific population of Aotearoa NZ live in the Auckland area[26] compared with 62.5% of our respondent population.

Figure 1: Pie-graph of ethnic breakdown

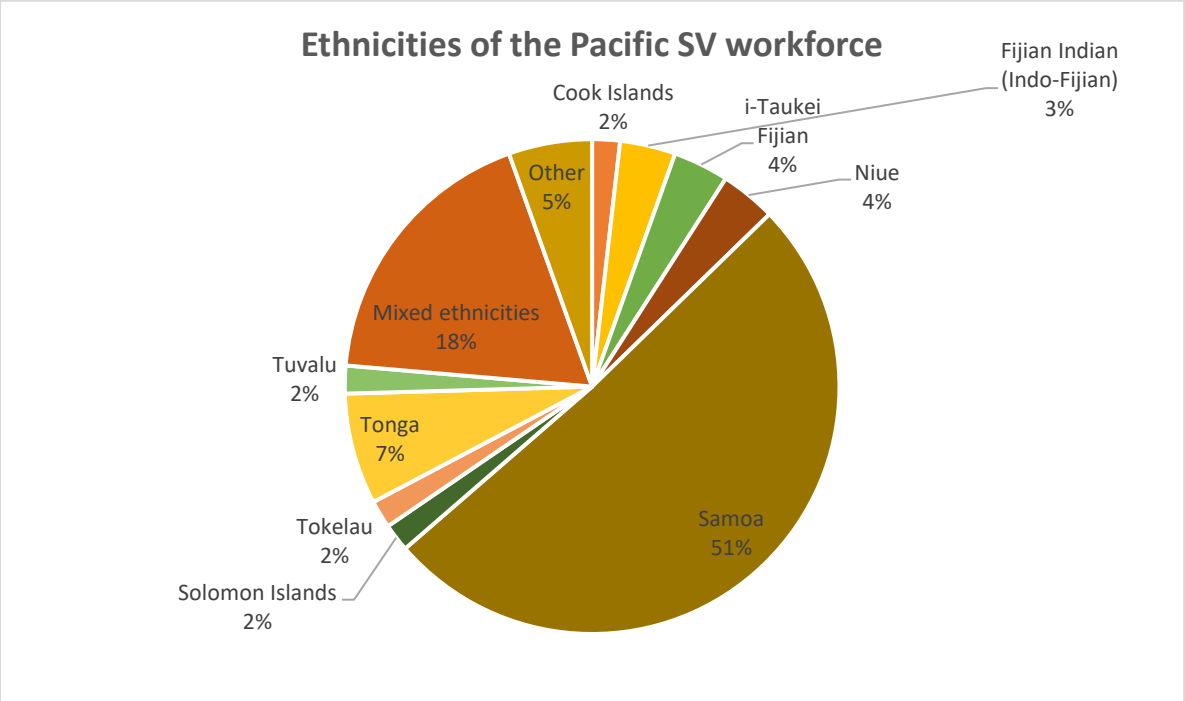
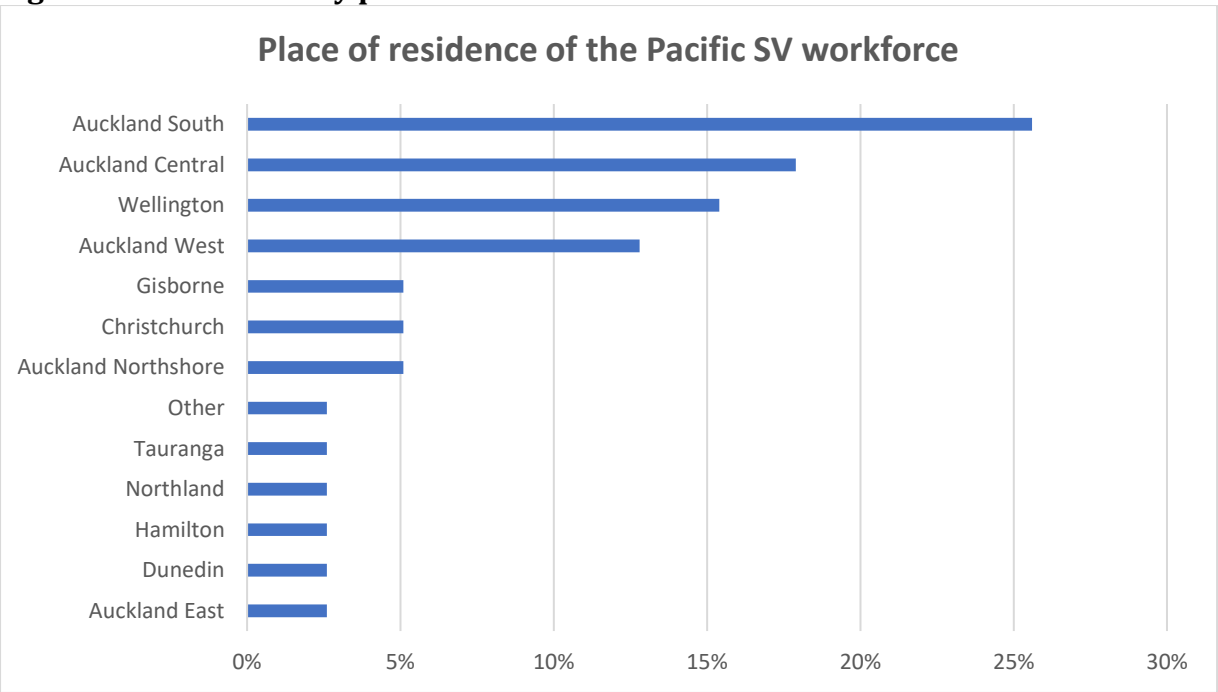


Figure 2: Breakdown by place of residence

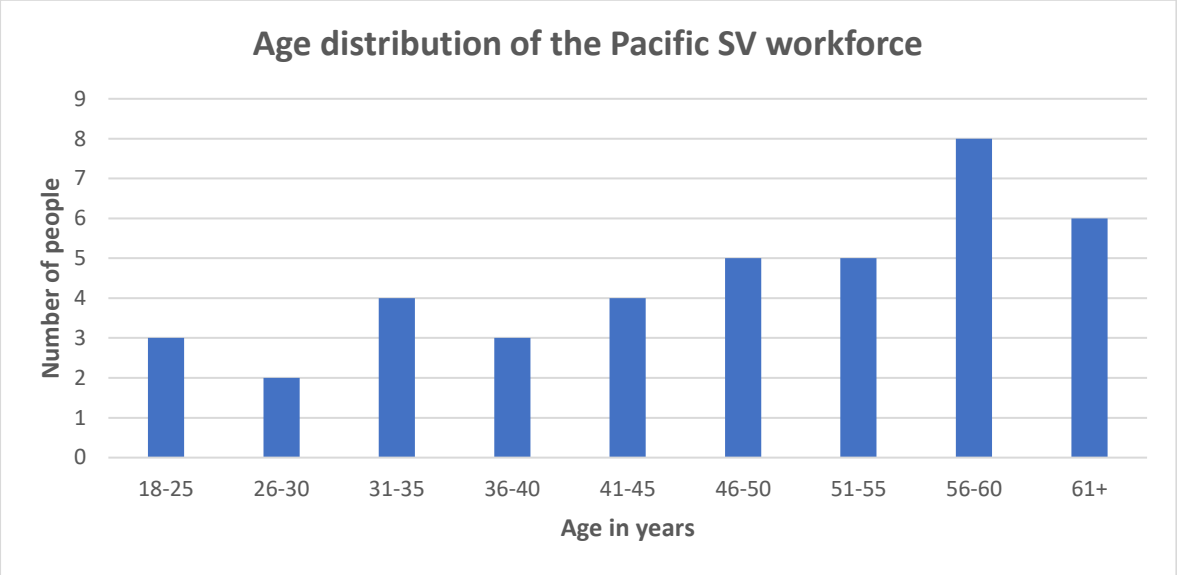


26 See: https://knowledgeauckland.org.nz/publications/2018-census-results-pacific-peoples-in-auckland/

(b) Age

In 2018 the median age for Pacific peoples in Aotearoa NZ is 23.4 years, compared with the median age of our respondent population, which is 21.5 years. However, most of our respondent population (70%) were 40 years or over. This suggests that statistically the Pacific SV workforce is largely an 'older' (i.e., over 40 years of age) workforce.

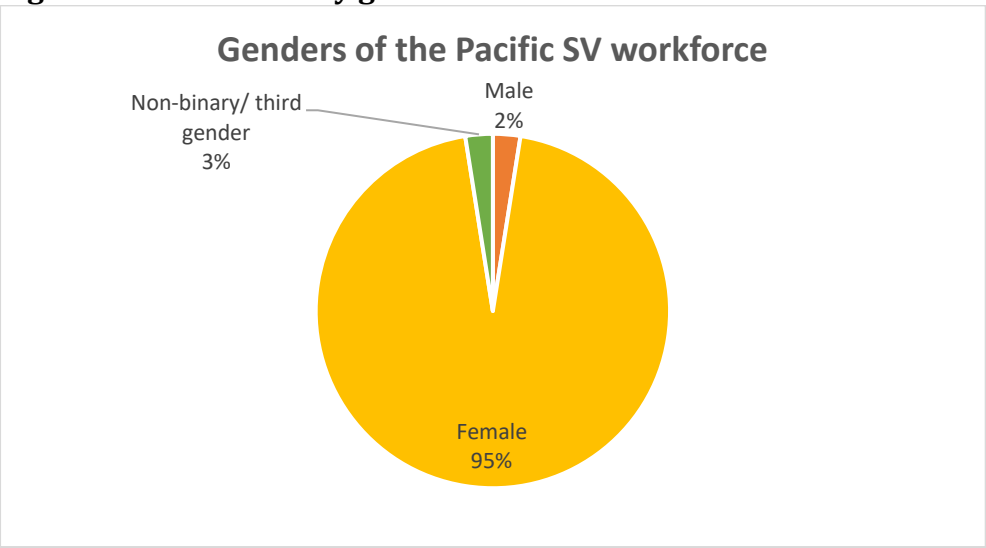
Figure 3: Breakdown by age range



(c) Gender

According to the 2018 census, women and girls make up 49.8% of the total Pacific population in Aotearoa NZ. Our respondent population is, however, 95% women. This suggests that the Aotearoa NZ Pacific SV workforce is at present overwhelmingly women. The remaining five percent consist of respondents from the other two gender categories offered, male and non-binary/third gender.

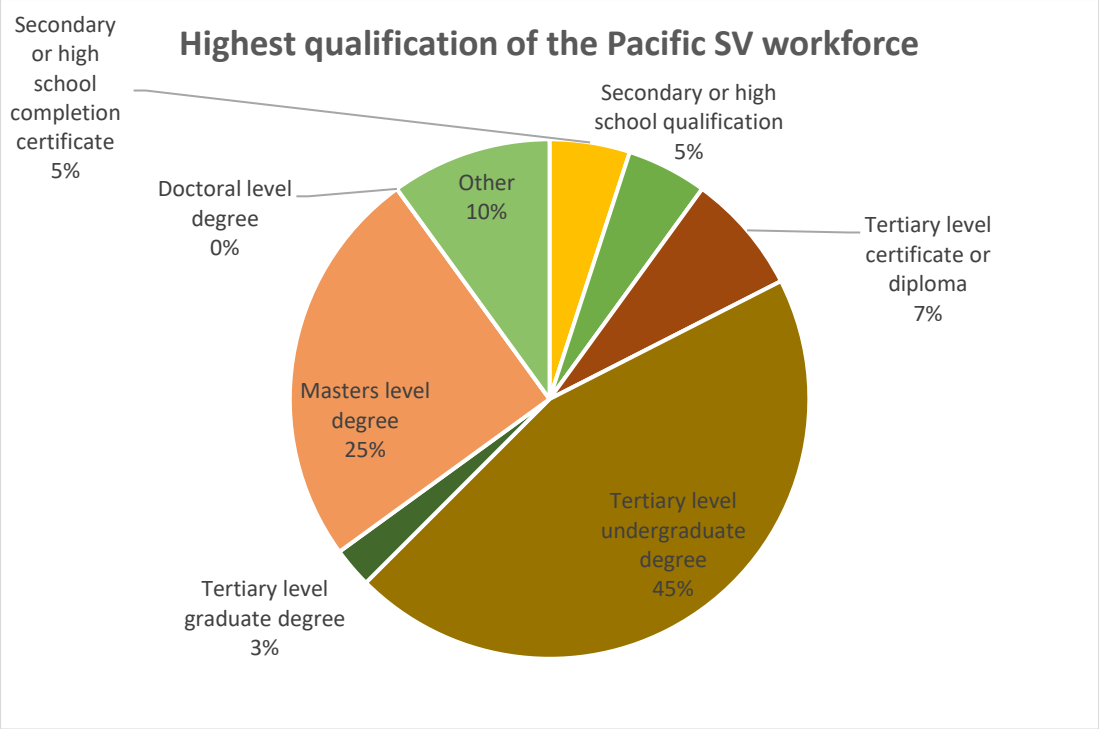
Figure 4: Breakdown by gender



(d) Highest Formal New Zealand Education Qualification

Lastly, in terms of the highest formal New Zealand (NZ) education qualification variable, 80% of our respondent population had an undergraduate degree or higher as their highest formal education qualification. This sits in stark contrast to the recent 15% statistic for those in the Pacific 25-to-64-year-old adult population of Aotearoa NZ who hold an undergraduate degree or higher as their highest formal education qualification (Ministry of Education, 2021, p.4).[27] This suggests that the Aotearoa NZ Pacific SV workforce is, in formal education terms, well qualified, something that is perhaps to be expected given that the SV field is a 'specialist' (PSG & PWNSV, 2021) field where most of its practitioner positions require at entry level a tertiary qualification.

Figure 5: Breakdown by highest formal NZ education qualification



These findings suggest that the demographic profile of the Pacific SV workforce of Aotearoa NZ is overwhelmingly well qualified women aged 40 years and above, and while made up largely of practitioners based in Auckland and of Samoan ethnicity, also includes – though in smaller numbers - practitioners from a wide range of richly diverse Pacific ethnic backgrounds, who are located across different parts of Aotearoa NZ.

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[27] See, www.educationcounts.govt.nz/govt.nz. Ministry of Education. 2021 (March). *Education Indicator, Education and Learning Outcomes.* Wellington, pp.1-5.

3.2.2 Summary of Employment History Findings

This subsection describes the results of section two of the questionnaire relating to respondents' employment status and context, including workplace details.

(a) Percentage of those currently employed and no longer employed by an SV agency

Most (80%) of questionnaire respondents are currently employed in the SV sector and work for an agency that provides support to Pacific peoples affected by SV. The remaining 20% are past employees of an agency that provided (and may still provide) support to Pacific peoples affected by SV.

(b) A breakdown of the characteristics of those 'currently employed' or 'were employed' by an SV agency

(i) Type of SV agency employed by

Most respondents (87%) who are currently employed within an SV agency are employees of a Non-Government Organisation (NGO). The remaining 13 percent are employed by a government agency.

Of the 20% who are past employees of an SV agency, 62.5% of them responded to the question of type of agency they worked for. From this, just over half (60%) worked for an NGO and the rest for a government agency.

What these findings indicate is that the current Pacific SV workforce are employed either by an NGO or government agency, and most work for an NGO.

The NGO and government agencies listed by all respondents included:

- A Sexual Assault Care Service [in a DHB],
- Department of Corrections ("Corrections"),
- Accident Compensation Commission ("ACC"),
- Child Youth and Family Service (known today as Oranga Tamariki or Ministry for Children),
- Educational institutions,
- Faith-based or Church-based social services
- Sexual Abuse HELP Foundation,
- Rape Crisis
- STOP services
- A private practice or consultancy
- Māori health or social service

(ii) Workplace locations of present and past employees of SV agencies in Aotearoa NZ

Of those who responded to this question[28] of main workplace locations, the majority (74%) indicated working mainly in Auckland. Almost three quarters (74%) of current employee respondents and exactly three quarters (75%) of past employee respondents work in the Auckland area.

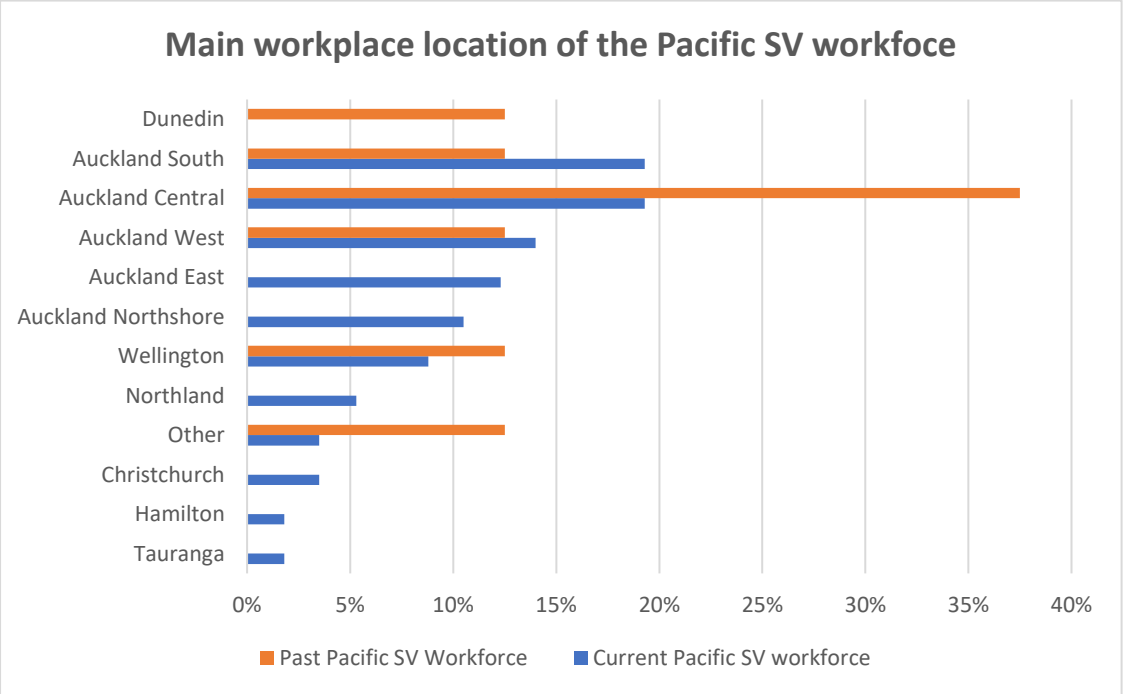
For the remaining respondents who indicated working outside of Auckland locations, the Wellington areas (which includes the areas of Kapiti and Porirua noted in the 'Other' locations) rated the next highest main workplace location site. Twelve (12.3%) percent of current employees and 12.5% of past employees indicated working mainly in Wellington areas (including Kapiti and Porirua).[29]

The remaining responses to the question of main workplace location are spread across the following areas outside of the Auckland and Wellington regions.

These are:

- Northland,
- Christchurch,
- Dunedin,
- Hamilton,
- Tauranga.

Figure 6: Workplace location



These findings suggest that the respondent population represents a range of different geographical workplace sites across Aotearoa NZ. It also suggests a connection between

28 See Q.8 of the questionnaire (see copy of questionnaire in the appendix 1).

29 The 12.3% of current Pacific SV workers whose main workplace is located in a Wellington area includes the respondents who selected the 'Other' category.

the high concentration of Pacific SV workers working in urban centres (particularly the Auckland and Wellington areas), and the fact that both the Pacific population of Aotearoa NZ resides in largely urban-based centres as do our overall respondent population.[30]

(iii) Workplace Roles

The most popular roles held by current and past SV employee respondents were social workers or counsellors. Fifty percent of current employee respondents and 43% of past SV employee respondents held one of these roles. The workplace roles or positions mentioned by the current and past Pacific SV workers are noted in Table 1 below.

Table 1: Workforce roles or positions held by current and past Pacific SV workers

Current Pacific SV Worker Roles & percentage of total current respondents	Past Pacific SV Worker Roles & percentage of total current respondents

• Church leader (2.6%)
• Nurse (2.6%)
• Pastoral support (2.6%)
• Psychotherapist (2.6%)
• Translator/Interpreter (2.6%)
• Youth leader (2.6%)
• Community support worker (5.3%)
• Counsellor (23.7%)
• Social worker (23.7%)
• Other (31.6%)
  ○ General manager
  ○ Crisis support worker
  ○ Office manager
  ○ Educational facilitator
  ○ Probation officer
  ○ Crisis counsellor
  ○ High school programme facilitator
  ○ Service manager/programmes provider
  ○ Forensic examiner
	• Church leader (7.1%)
	• Community support worker (7.1%)
	• Psychotherapist (7.1%)
	• Youth leader (7.1%)
	• Peer support (14.3%)
	• Social worker (14.3%)
	• Counsellor (28.6%)
	• Other (14.3%)
	  ○ Crisis support
	  ○ Health promoter on radio

These findings suggest that respondents are or were employed in a wide range of roles for the Pacific SV sector overall, with most working as either social workers or

[30] This has implications for how and where to target or distribute workforce development programmes and resourcing

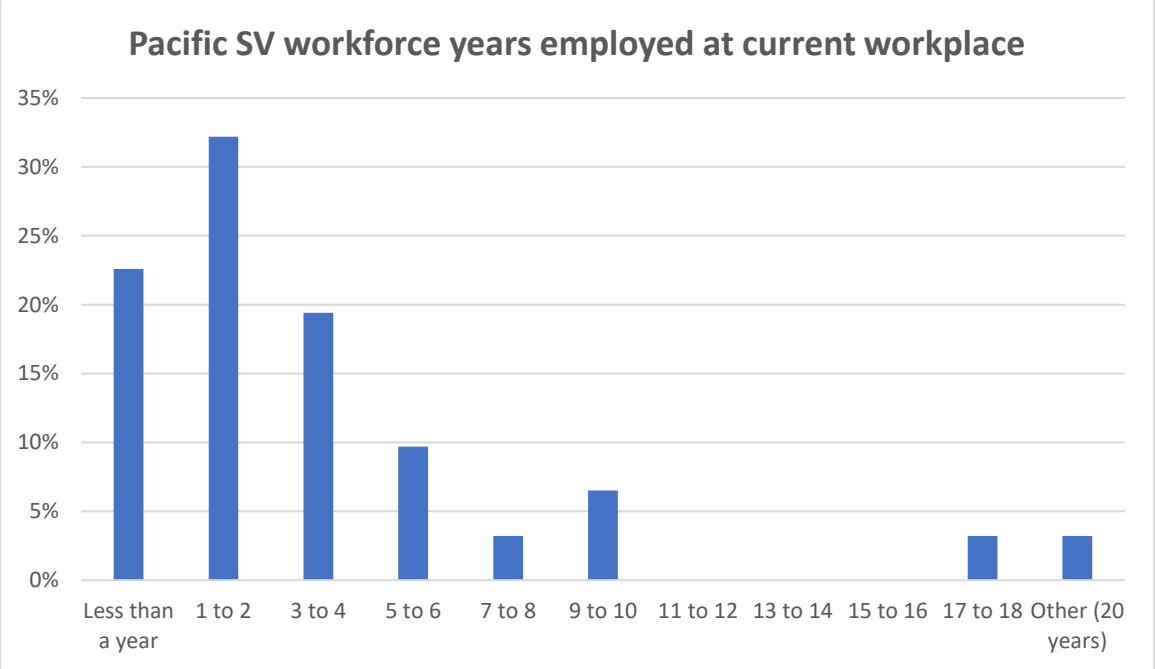
counsellors. The kinds of roles identified suggest that there exists a high level of 'specialised' knowledge and professional competency (including cultural and clinical competencies) within the Pacific SV workforce.[31]

(iv) Total Years Employed in Current Workplace

Of the 31 current employees, one third (32% or 10/31) have been at their workplace between 1-2 years, followed by those who have been there for less than one year (22.6% or 7/31) and then by those who have been there between 5-6 years (19.4% or 6/31).

Only a few respondents (12.9% or 4/31) indicated having worked at their current workplace for 9 years or more, with 6% currently employed at their present workplace for over 16 years.

Figure 7: Years employed at current workplace



These findings suggest that most of the Pacific SV workforce have been with their current SV agency for no more than two years.[32]

(v) Total Years Employed (Past & Present) in the SV Workforce

For those respondents who are still currently employed in the SV sector, 29% (or 9/31) indicated being employed there for 10+ years, and 25.8% (or 8/31) for 4-9 years. Most

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31 Because of the low numbers of participants per position or role identified in this list, the roles are described in the plural to help preserve participant anonymity.

32 One might further surmise from these findings that only a few stay with an agency beyond six years.

currently employed respondents (32% or 10/31) indicated having been employed in the SV field, thus far, for a total of between 1-3 years. And only a handful (12.9% or 4/31) indicated being employed in total, thus far, for less than a year.

For those respondents who are past employees of the SV sector, 50% worked in the SV sector for 10+ years. No past respondent worked for less than a year in total. Only 16.7% worked for a total of between 1-3 years, and 33.4% for a total of between 4-9 years.

Table 2: Total Years Employed in Pacific SV Workforce

Years	CURRENTLY EMPLOYED IN PSV WORFORCE		PREVIOUSLY EMPLOYED IN PSV WORKFORCE	
	Count	Percentage[33]	Count	Percentage
< 1	4	12.9	0	0
1-3	10	32.3	1	16.7
4-6	6	19.4	1	16.7
7-9	2	6.4	1	16.7
10-12	1	3.2	1	16.7
13-15	1	3.2	1	16.7
16-17	0	0	0	0
18-19	1	3.2	0	0
20+	6	19.4	1	16.7
Total	31	100	6	100

These findings suggest that at least half of the Pacific SV workforce of Aotearoa NZ (approximately 59%) have worked for the SV sector for at least a total of six (6) years, and that only a few (approximately 32%) have stayed beyond 10+ years.

(vi) Reasons for continuing to work in the Pacific SV field

In answer to the statement: "Please identify the reason(s) why you continue to work in the Pacific sexual violence workforce",[34] 47.5% of the responses (or 29/61 responses) received from current employees centred on the reason – "I want to contribute to making a positive difference to those affected by sexual violence in the Pacific community".[35] There were six specific reasons to choose from and an "Other" response category or option if participants felt that their reasons were not adequately covered by the six listed. The six listed are mentioned in Figure 8.

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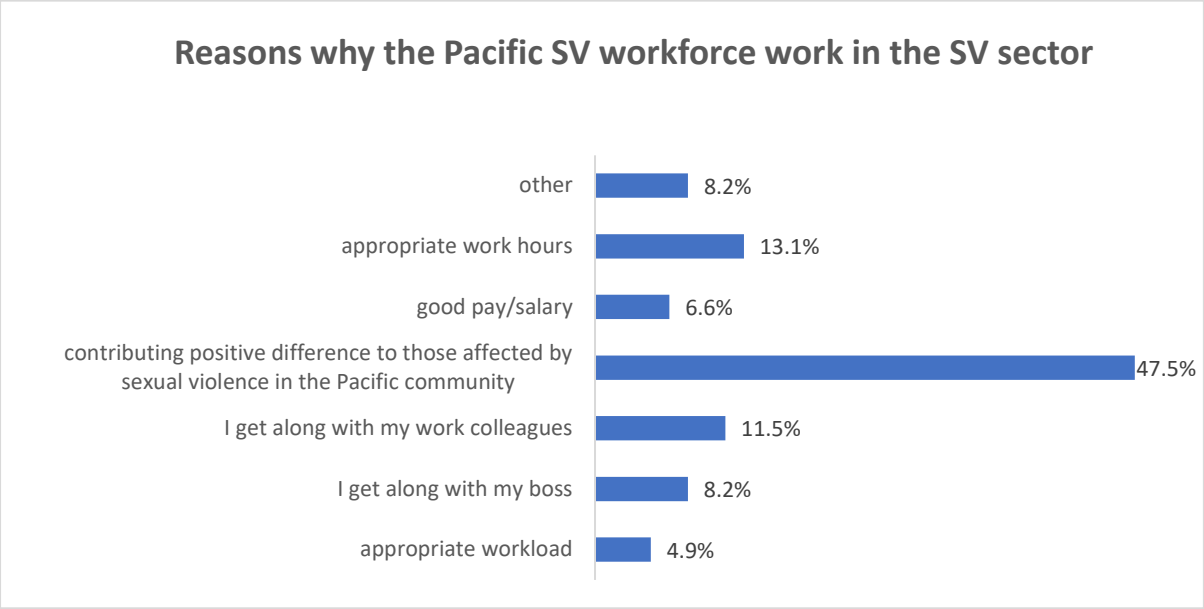
33 These percentages have been rounded down to one decimal point only, which may bring the total percentage to a little over 100%.

34 See Q.12 of the questionnaire.

35 The list of reasons offered for selection in Q.12 were initially composed by those in our research team who are practitioners in the Pacific SV workforce. They drew on both professional and personal experiences in the workforce and in research studies such as that led by Julie Wharewera-Mika and Kathryn McPhillips (2016). The final list of questions was affirmed by the research team's questionnaire leads and by the MSD research oversight team before release to potential participants.

Figure 8: Reasons for continuing to work in the Pacific SV field



The reasons offered by those employees who selected the "Other" category option for why they continue to work with their SV agency include the following:

- "I want Pacific communities affected by SV to be able to see more Pacific workers who are part of the group providing help/support for survivors",
- "There is a great need and a lack of workers",
- "[I] love to work with Pasefika people, families who involve with Family Violence including Sexual Violence",
- "Caseload more manageable in specialist service".

These findings suggest that respondents currently employed with a SV agency continue to work there because, more than anything else, they aspire to make a positive difference in the lives or healing journeys of Pacific peoples generally, and Pacific peoples affected by sexual violence specifically.

(vii) Reasons why past employees left the Pacific SV field

In answer to the statement, "Please identify the reason(s) why you left the Pacific sexual violence workforce",[36] six reasons were offered for selection with an "Other" category option for those who felt that their reasons for leaving were not included in these six.[37] Interestingly, similar to the findings relating to reasons for continuing to stay with their current SV agency, most (though marginally so at 21.4%) centred on the reason: "Personal (including family) reasons". But this is then followed by an even spread of 14.3% of respondents who indicated each of four following reasons as important. That is,

- "Cultural safety and/or competency issues",
- "Professional safety and/or competency issues",

[36] See Q.18 of the questionnaire.

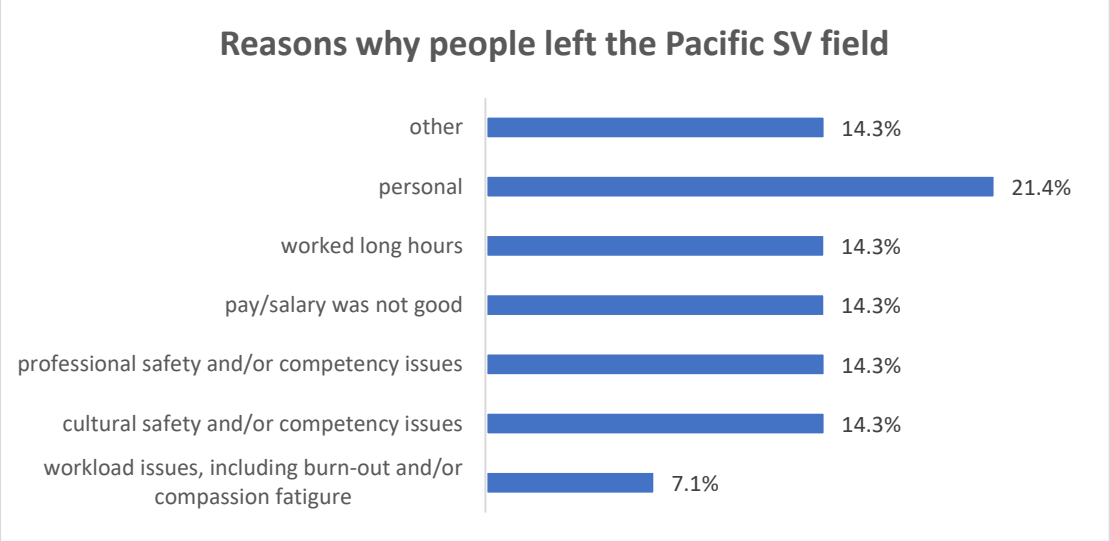
[37] The process for compiling the final list of reasons offered for selection in Q.18 was the same as that adopted for Q.12.

- "Pay/salary was not good", and
- "Worked long hours".

The remaining percentage of responses to this question identified the option or reason category: "Workload issues (including burn-out and/or compassion fatigue)".
For those who identified "Other reasons" for leaving the Pacific SV field, these included:

- Leaving to work in private practice because it provided "greater flexibility and better pay", and
- Leaving to take up further tertiary level studies.

Figure 9: Reasons why those not currently working left the Pacific SV field



These findings suggest that respondents who have left the SV workforce or field did so for a range of different reasons or combinations of reasons, from "personal (including family)" reasons to reasons involving taking up further tertiary level studies, workload issues, pay or salary issues and/or cultural or professional safety or competency issues. While the "Personal issues" reason featured most, it was closely followed by the other reasons listed as depicted in Figure 9.

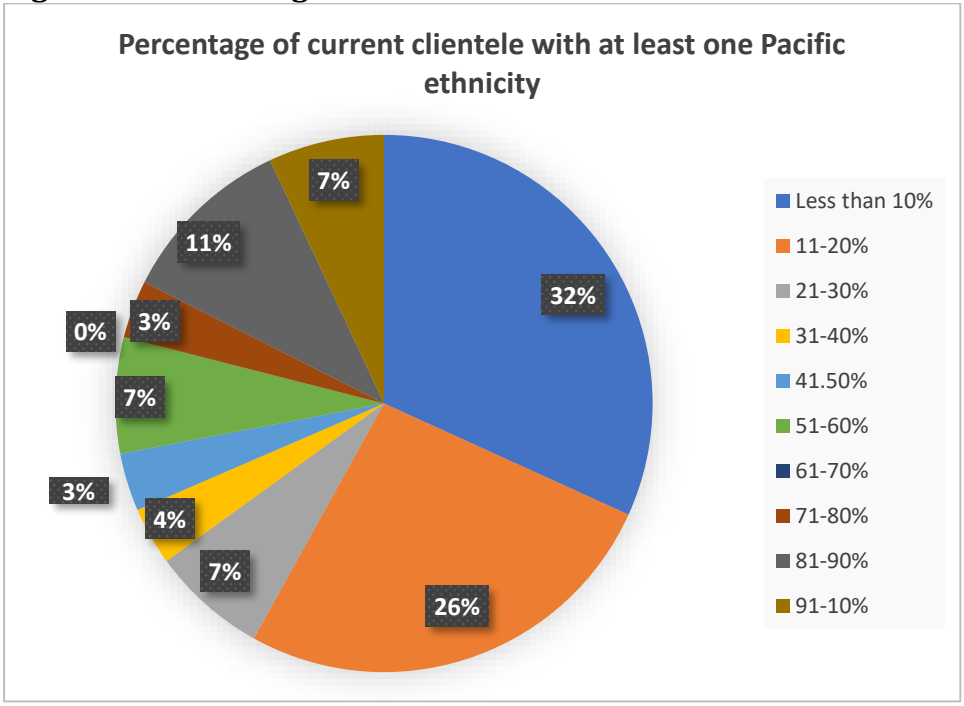
3.2.3 Pacific Clientele

This subsection presents the results of section three of the questionnaire relating to the ethnic make-up of respondents' Pacific clientele. Participants were not directed to reveal how they came to decide on their percentage range. Although this presents a limitation to determining accuracy, the participant's own perception of how many Pacific peoples they work with is in itself of value to the exercise of baseline data building.

(a) Percentage of current clientele with at least one Pacific ethnicity

Of the 29 respondents currently employed by an SV agency and who responded to the question, "What percentage of your clientele are of at least one Pacific ethnicity",[38] most (32% or 9/29) noted that less than 10% of their clientele were of at least one Pacific ethnicity. This is followed closely (at 26% or 8/29) by those who noted that only 11-20% of their clientele were of at least one Pacific ethnicity. These two groups combined constitutes the majority (58%) of the total responses to this question. Only 14% of these respondents had a current clientele list that was made up predominantly (i.e., over 80%) of Pacific clients.

Figure 10: Percentage of current clientele with at least one Pacific ethnicity



These findings suggest that while most of our current employee respondents (29 out of 32) do work with Pacific clients, overall, their Pacific clients make up a small percentage (20% or less) of their current caseloads.

(i) List of Pacific ethnicities of current Pacific clientele

Table 3 lists the different Pacific ethnicities of the Pacific clients of current employees, in order of highest to lowest by number of responses per ethnic category.

Table 3: Ethnicities listed for Current Employee Respondents' Pacific Clientele

Ethnic category	% of responses
Samoan	20.0
Tongan	18.0
Cook Islands	15.8
Fijian Indian or Indo-Fijian	11.7

[38] See Q.19 of the questionnaire.

Niuean	7.5
i-Taukei Fijian or Indigenous Fijian	5.8
Tokelauan	5.8
Tuvaluan	5.8
I-Kiribati	3.3
Ni-Vanuatu	3.3
Mixed ethnicities	3.3
Solomon Islands	1.7
Other	1.7
Total	100

The largest single ethnicity identified among the clientele group is Samoan at 20%, followed closely by the Tongan and Cook Islands groups at 18% and 15.8% respectively. The Indo-Fijian group is the next significant group with the only other double-digit percentage figure of 11.7%. "Mixed ethnicities" and "Other" ethnicities groups include a mix of Pacific ethnicities, and of Pacific and non-Pacific ethnicities.

These findings affirm the wide range of Pacific ethnicities present among Pacific peoples in Aotearoa NZ affected by SV that seek the support of SV help services, and that the distribution of ethnic proportions reflect the general ethnic make-up or proportional representation of Pacific peoples living in Aotearoa NZ.

(b) Percentage of total clientele that were of at least one Pacific ethnicity

All past and current employees were invited to respond to the question, "Throughout your time in the sexual violence workforce, what percentage of your total clientele were of at least one Pacific ethnicity"?[39] The majority (87.5% or 35/40) of the total questionnaire respondents answered this question. Most of these 35 respondents (i.e., 83% or 29/35) were current employees, and 17% (or 6/35) were past employees. As illustrated in Figure 11, just over half of these 35 respondents noted that their Pacific clients made up less than 21% of their total SV clientele lists. The two next largest percentage ranges were equal at 11.4% of total responses and were almost at opposite ends of the continuum. That is, as noted in Table 4, 11.4% of total respondents noted that their Pacific clients made up either 21-30% of their total clientele or 91-100%.

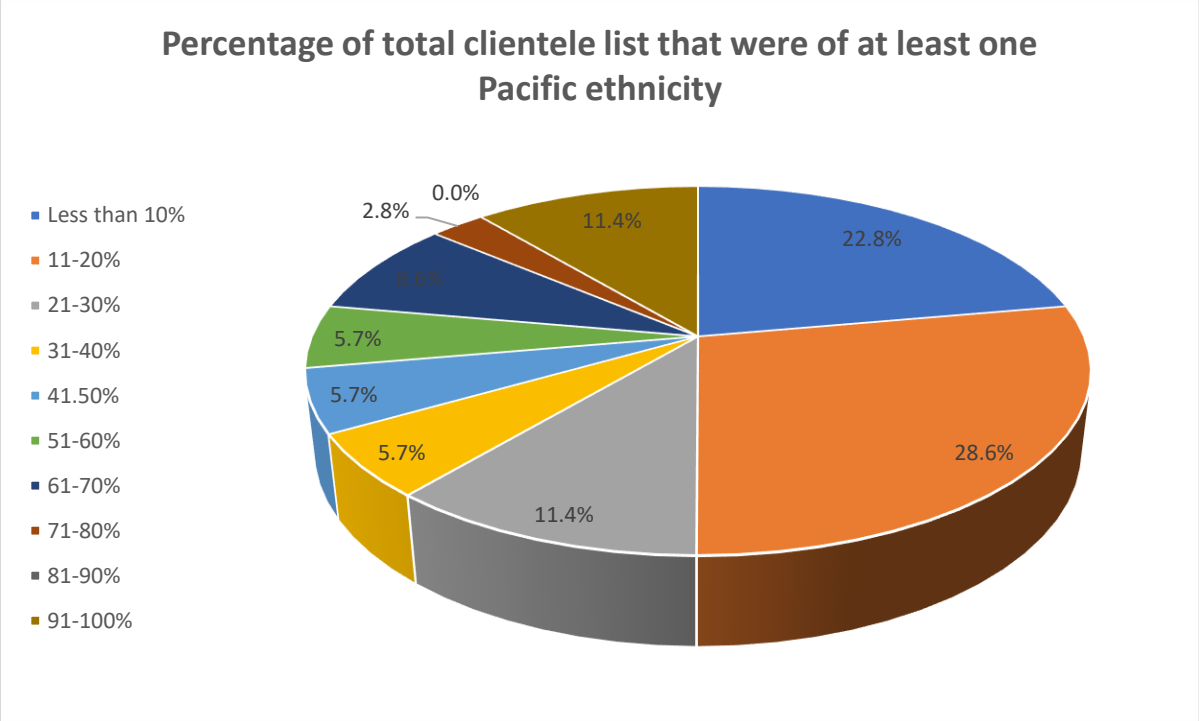
Table 4: Percentage of total clientele of Pacific ethnicity for Past and Current Employees

Percentage of clientele of Pacific ethnicity	Current employees, total no. of responses	Past employees, total no. of responses	Current + past employees, total no. of responses	% of past & current employee total responses
Less than 10%	8	0	8	22.8
11-20%	8	2	10	28.6
21-30%	3	1	4	11.4
31-40%	2	0	2	5.7

[39] See Q.21 of the questionnaire.

41-50%	2	0	2	5.7
51-60%	1	1	2	5.7
61-70%	3	0	3	8.6
71-80%	1	0	1	2.8
81-90%	0	0	0	0
91-100%	2	2	4	11.4
Total	29	6	35	100

Figure 11: Percentage of total clientele list that were/are of at least one Pacific ethnicity



These findings suggest that for just over half (51.4%) of the respondents who answered this question, Pacific clients make up less than 21% of their total (past and present) SV clientele lists. This group of respondents, however, also reported that 11.4% of them had clientele lists (past and present) that were predominantly (91-100%) Pacific. This raises questions for further study about how client distributions happen across different agency, organisation and/or profession-based settings and on what basis.

(i) List of Pacific ethnicities of all respondents' total Pacific clientele

All respondents (current and past employees) listed as follows the different Pacific ethnicities of their total Pacific clientele lists. Table 5 orders these from highest to lowest number of responses given per ethnic category.

Table 5: Pacific ethnicities listed for all respondents' total Pacific clientele

Ethnic category	% of responses
Samoan	33.7
Tongan	16.8
Cook Islands	14.5

Fijian Indian or Indo-Fijian	9.7
Niuean	4.8
Tuvaluan	4.8
Mixed Ethnicities	4.8
i-Taukei Fijian or Indigenous Fijian	3.7
Tokelauan	2.4
I-Kiribati	1.2
Ni-Vanuatu	1.2
Solomon Islands	1.2
Other	1.2
Total	100

Like Table 3, the results of Table 5 find that the three larger single ethnic groups within the general Pacific population – the Samoan, Tongan and Cook Islands ethnic groups – make up a significant proportion (65%) of the ethnicities of all respondents' total list of Pacific SV clients. In the remaining percentage, however, there is a rich diversity of other Pacific ethnic groups present, including those of mixed ethnicities. The "Mixed ethnicities" group is made up of both mixed Pacific and a mix of Pacific and non-Pacific ethnicities. Responses to the "Other" group did reference specific ethnicities.
These findings are similar to those suggested for the ethnic distribution of Pacific clients for current clients of Pacific SV employees currently working for an SV agency. That is, that the findings affirm that while there is a wide range of Pacific ethnicities present among those Pacific peoples in Aotearoa NZ affected by SV who seek support from an SV agency, most are either of Samoan, Tongan or Cook Islands heritage.

3.2.4 Pacific Values, Practices, Protocols, Models and Frameworks

This subsection presents the results of section four of the questionnaire relating to respondents' use of Pacific values[40], practices[41], protocols[42], models[43] and/or frameworks[44] in their SV work or practice.

(a) Intentional Use of Pacific Values, Practices and Protocols

[40] A 'value' is understood here to be similar to a principle.
[41] A 'practice' is understood here to include personal, informal, customary or everyday behaviours or ways of being and doing adopted by individuals or groups, that may be associated or linked to but may also be differentiated from and not dependent on those 'practices' that are established and regulated by formal organisations such as village councils, governments, NGOs, and/or professional bodies.
[42] A 'protocol' is understood here to refer to those rules, procedures, processes and/or practices commonly associated with different rituals and ceremonies performed across various formal and informal, cultural, spiritual and professional spheres. For discussion on spirituality and trauma see McRobie and Makasiale (2013).
[43] 'Model' is identified here when the term is expressly used by respondents to describe a Pacific 'model'. Where it is not expressly used, the research team adopts the meaning of 'model' as a theoretical or physical representation of a method or product.
[44] Similar to 'model', a 'framework' is identified when the term is expressly used by respondents to describe a Pacific 'framework'. Where they do not, the term is understood to refer to a theoretical structure that both frames and provides the foundation for an approach, idea, concept, or system.

A total of 32 respondents (out of 40) responded to the question, "[Do] you intentionally use or [have you intentionally] used Pacific cultural or ethnic values, practices and/or protocols to inform your work with Pacific peoples affected by sexual violence".[45] Almost all who responded (30 out of 32) responded in the affirmative, the remaining in the negative.

When asked to specify or name these Pacific cultural or ethnic values, practices and/or protocols they provided the following list, detailed in Table 6.[46]

Table 6: Pacific Values, Practices and Protocols Identified[47]

Values	Practices	Protocols
• Vā feiloa'i[48] • Aiga (family) • Family • Hospitality • Spirituality • Trust • Vā • Cultural values • Respect • Forgiveness • Boundaries • Communities of support • Cultural sensitivity • Cultural competency across different cultures • Faith-based values • Lotu (Christian church, spirituality, faith-based) values • Alofa (love) • Tatalo (prayer)	• Vā feiloa'i • Vā • Talanoa (storying; conversational method) • Use of legends, bible stories, pese (songs) • Use of alagaupu (proverbs) • Use of gafa (genealogical knowledge) • Understanding of 'demigods'[50] • Aiga • Family • Hospitality • Spirituality • Trust • "Cultural space" • Authentic connections • Uses lived experiences • Use of Pacific languages • Cultural practices	• Vā feiloa'i • Vā • Fa'asamoa • Aiga • Hospitality • Spirituality • Trust • Appropriate use of Pacific languages • Cultural protocols • Cultural sensitivity • Cultural competency across different cultures • Faith

45 See Q.23 of the questionnaire.

46 Only those responses that related directly to the "values, beliefs and practices" focus of the question have been included in this list. Those responses that relate more to "Pacific practice models and frameworks" have been included in Table 6.

47 The contents of Table 6 have been drawn directly from respondent answers and only where necessary for reasons of clarity are responses edited. Whether the 'response' constitutes a value, practice or protocol was determined by the research team. As is consistent with many Pacific indigenous cultural norms, some concepts may be both noun and verb, and could fit – culturally speaking – in one or more category. In line with this norm, where appropriate, the team may have placed a 'response' in more than one category. All values, practices or protocols referred to using the same terms are listed once (e.g., family values or faith-based values), even though they may have been mentioned by more than one respondent.

48 "Vā feiloa'i" refers to Samoan relational concepts, values and protocols of encounter, meeting and engaging.

50 This infers use of cultural knowledge and wisdom relating to the heroes and characters of Indigenous Pacific oral histories, creation stories and legends.

• Ethnic-specific values • Fa'aaloalo (respect) • Tautua (service) • Pasifika values[49] • Fonofale concepts • Lalaga (weaving) and malaga (journeying) • Aga faatamālii (chiefly values; dignified values) • Soalaupule (the sharing of decision-making) • Saogalemu (safety) • 'Fofo le alamea le alamea' (Samoan proverb – 'solutions lie within') • Fesoota'iga lelei (good relations/relationships)	• Community of support • Cultural sensitivity • Acknowledge cultural diversity and complexity across and within Pacific cultures within practices • Cultural competency practices across different cultures • Uses faith-based practices • Uses biblical word-based scriptures • Ethnic specific practices • Acknowledging the collective • Pasifika modalities • Lalaga le ato (basket weaving)	

This list shows a predominance of Samoan-specific language terms, reflective of the number of Samoans in this respondent population group perhaps, and of the influence this may have on Aotearoa NZ's Pacific SV workforce's frames of reference. Notwithstanding, the list also presents other features worth noting. For example, respondents suggest the importance of faith-based values, practices and protocols and imply that these either sit alongside or within Pacific cultural values, practices and protocols. This raises interesting questions about the relationship between "culture" and "faith" (or religion) for both Pacific peoples and Pacific SV practitioners *in* Aotearoa NZ and has implications for how clinical and secular public policy models for the family violence and sexual violence sectors ought to respond to this relationship.

Secondly, as depicted in Table 6, in organising the respondents' answers into the three categories of "values", "practices", and "protocols", it is apparent that because of the nuances of Pacific grammar, Pacific terms and concepts can belong to more than one of these three categories depending on use and context (e.g., the Samoan term "vā feiloa'i" could refer to a value as well as a practice or protocol). The portability of language terms is context dependent and while this may be clear to fluent speakers of Pacific languages, may not be so clear to those in the workforce whose fluency levels are low or variable.[51] This may have implications for cultural and professional competency training assumptions (from content material, and communication style, to teaching and learning approaches).

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[49] The "Pasifika values" and "Pasifika modalities" responses were transferred here from responses to Q.24 as the team felt that the terms were better placed here.

[51] The 2018 New Zealand census records that Samoan is New Zealand's third most commonly spoken language. It also records that 91.8% of Pacific peoples in New Zealand speak English, and only 37.8% speak two languages.

A few participants took the time to elaborate on their reasons for drawing on Pacific values, practices, and protocols to inform and guide their SV practice with Pacific peoples affected by SV. The importance of family and cultural values to Pacific SV practitioners, and their perceived 'response-abilities' to the needs of their Pacific clients are key reasons offered.

"It makes it more relevant to our paihere (people in our care) and aligns with our current strategy for [mentions agency], which is Hokai Rangi – engaging with our paihere, their aiga and communities to reduce harm and risk of reoffending".

"[My] personal values instilled by my parents of respecting my elders, respecting relational 'spaces', working with the collective and inclusion of important familial relationships, unbiased and non-judgemental practice and respecting difference within the different cultural values and beliefs".

"When working with Pacific people in all spaces I acknowledge the vā between the two, the survivor and support worker. When working with Pacific peoples it is important to me to also be culturally sensitive and cross-culturally competent, acknowledging the diversity between each Pacific group and the complexities with each group's roles, protocols, etc., not approaching every Pacific person in the same manner, and always being aware of these underlying complexities that each survivor carries on top of their trauma".

For the six percent (6%) who indicated that Pacific values, practices, and protocols did not inform their SV practice, a couple of specific reasons why were provided and are worth noting. These were the non-inclusion of specific Pacific values in work programme because they were seen as irrelevant, inappropriate, or too ethnic-specific, and preferring a more client-focused approach. That is:

"[Our] programme does not have Pacific cultural or ethnic values in[cluded] in the programme".

"I talk with my clients about **their** practices/protocols – talk about what they would like, to support them in our work".

"We are predominantly a Kaupapa Māori service and use tikanga Māori concepts and values in treatment, however, we do have a number of Pacific peoples referred to us".

Overall, these findings suggest that a significant proportion of the Pacific SV workforce use Pacific values, practices, and protocols in their work with Pacific SV clients. And, that these values, practices, and protocols are informed both by Pacific cultural (including indigenous) and faith-based concepts and belief systems.

(b) Use of Pacific practice models or frameworks

Compared with the previous question on Pacific values, practices, and protocols, more respondents answered the question, "Do you use or [have you] used Pacific practice

models and/or frameworks?"[52] in the negative (i.e., 15.6% compared to 6%). This still means that a large majority 84.4% (or 27/32) answered in the affirmative.
When respondents were asked to name the Pacific models or frameworks they used, they provided the following responses, noted in Table 7.

Table 7: Practice models and frameworks identified[53]

Pacific Models	Pacific frameworks	Non-Pacific frameworks or models
• Fonofale model[54] • Hauora wellbeing model • Talanoa model • Tivaevae model • Kuti model • Vaka model • Fonua model • Teu le Vā model • Le Vā model • Fauina o le Fale model (Ara Poutama's version of Fonofale model) • Pacific models of wellbeing • Seitapu model[55]	• Pasifika modalities • Pasifika frameworks • Talanoa as a tool of engagement • Ifoga (public apology ceremony) • Matai (chiefly) • Fakatupuolamoui conceptual framework • Vā fealoaloa'i framework • Lalaga (weaving) framework • Nga Vaka o Kainga Tapu frameworks – ethnic specific	• Whare tapa wha model • Oranga Tamariki[56]

Participant responses suggest that the most well-known and cited of the Pacific models listed here is the Fonofale model, followed by the Talanoa framework or approach and the Teu le vā model.[57] This is not surprising given how long these models/frameworks have been formally used by New Zealand's Pacific health, research, education, social services, and policy sectors. Within this list of models and frameworks are the inclusion of a range of different ethnic-specific Pacific models and frameworks, such as, for example, use of the Tongan Fonua, Niuean Fakatupuolamoui, Cook Islands Tivaevae

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52 See Q.24 of questionnaire.

53 As noted in the footnote accompanying Table 6, the content for Table 7 have been drawn directly from respondent answers to Q.24 of the questionnaire, and from those responses from Q.23 considered more relevant to Table 7. Only where necessary for clarity were responses edited. In this editing process the team made sure to use as much as possible to original words in the response. All models or frameworks are referred to once in the list, even though the model or framework may have been mentioned by more than one respondent.

54 The fonofale model was the most frequently cited model by respondents (specifically mentioned twenty-four (24) times, followed by the Talanoa framework or approach (9 mentions) and Teu le vā model (4 mentions).

55 This model and the Teu le vā model were mentioned by respondents answering Q.23.

56 This was mentioned by a respondent. It is not clear whether it refers to models or frameworks used by Oranga Tamariki. We have included it here on the assumption that it does.

57 The Fonofale model was first introduced into Aotearoa New Zealand health sector in 1995. The Talanoa methodology and framework was introduced to the New Zealand research and education sector in 2006. The Teu le vā model was introduced to the New Zealand research and education sector in 2010.

models listed, all of which are Polynesian in cultural orientation, including the Māori Whare tapa wha and Hauora models.

For those questionnaire respondents who indicated that they did not use or have not used any Pacific practice models or frameworks in their work, some elaborated on the reasons why. Two main reasons were offered. These were a lack of available training in Pacific models or frameworks and a lack of perceived relevance for the inclusion of Pacific models/frameworks into programme content.

"We do not utilise official or potentially definitive models as such. This is because we are a program (sic) that goes into schools to teach a sexual harm prevention program. I utilise my skills and world view as a Pasifika person to connect and produce sessions that connection (sic) to our young people".

"Lack of training around these practices, models/frameworks".

These findings overall suggest that there is a wide range of Pacific models and frameworks that inform the work of Pacific SV practitioners. The model most well-known to Pacific SV practitioners is the Fonofale health belief model. While not all SV programmes target Pacific clients specifically, some general programmes do receive Pacific referrals and/or take on Pacific clients. Respondents suggested that in those circumstances where they received a Pacific referral or their programme is likely to attract Pacific participants, being aware of Pacific models and frameworks, and how they could be applied in practice could be useful.

3.2.5 Workforce Supports

This subsection presents the results of section five of the questionnaire relating to respondents' views on supports available to them in their work with Pacific peoples affected by SV.

(a) Available Supports

Seventy-two percent (72% or 29/40) of questionnaire respondents provided a response to the question on "What kinds of supports are or were available to you to carry out your services to Pacific clients"?[58] Table 8 records the number of responses received per response category. Respondents could choose from four different options or categories and/or could use the "Other" category should they feel that the supports available to them did not adequately fit within the four options provided.

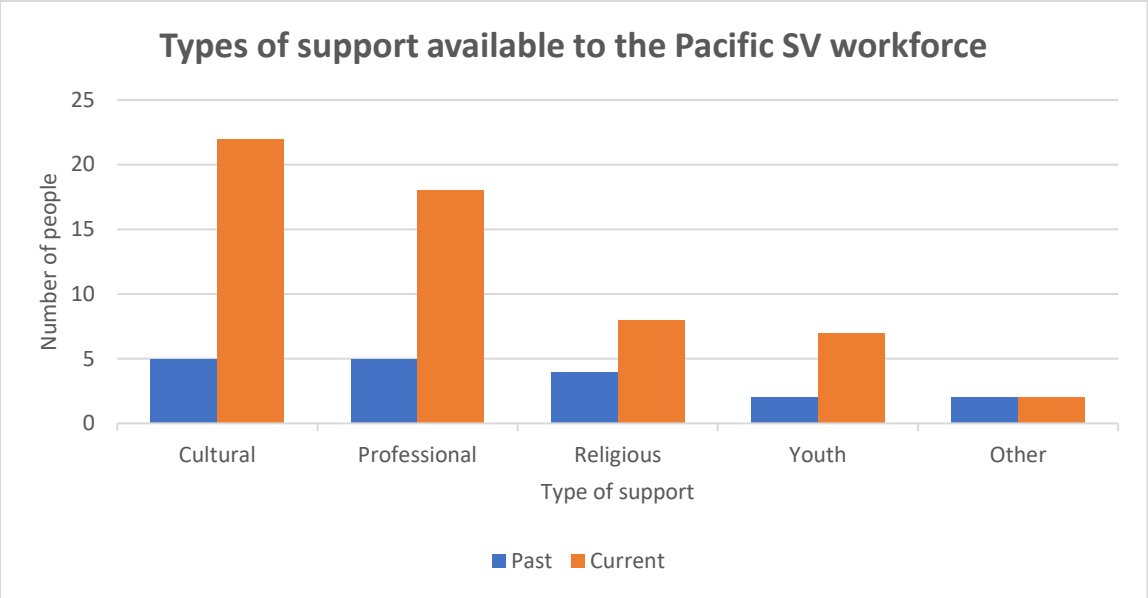
Table 8: Total quantitative responses to type of supports available to them

Response Option/Category	Percentage (Current Employees)	Percentage (Past Employees)	Total
1. Cultural (e.g., supervision, peer support, referral services support, etc.)	38.6%	27.8%	36.0%

[58] See Q.25 of the questionnaire. The question provides four response options to choose from plus an "Other" response category. Respondents could choose more than one response option.

2. Professional (e.g., supervision, peer support, referral service support, membership in a disciplinary or interdisciplinary association, such as Pasifika Counsellors Collective, etc.)	31.6%	27.8%	30.7%
3. Religious (e.g., pastoral support)	14.0%	22.2%	16.0%
4. Youth (e.g., supervision, peer support, referral services support, etc.)	12.3%	11.1%	12.0%
5. Other	3.5%	11.1%	5.3%
Total	100%	100%	100%

Figure 12: Available Supports to the Pacific SV workforce



(i) "Cultural" and "Professional" Supports Available

As suggested by the findings in Table 8 and Figure 12, "cultural" and "professional" supports were the main kind of supports respondents identified as important and were accessible or available to them. Respondents were invited to elaborate further on what these "cultural" and "professional" supports were for them. Table 9 details their responses.

Table 9: List of qualitative responses about the 'cultural' and 'professional' supports available[59]

Cultural	Professional
• [Support received] about language, life experiences, professional background…"	• Pasifika professional supervision • Linkages to key Pasifika services

[59] Where respondents provided the same answer, this is only noted once, unless it fits as both a 'cultural' or 'professional' support.

• Cultural supervision • Cultural support from other PI colleagues and regional Pasifika advisors • Leadership advice and support • Referral support • Support from Pasifika community leaders • Translation services • Ethnic-specific services support • Advocacy support • External supervision • Pasifika support group at workplace, to talk about practice from a Pasifika lens and also check in with each other and support each other • Email and phone call support when required • Mentoring	• Access to a broad network for Pasifika referral agencies and supports • Referral support • Leadership advice and support • Peer support • Peer supervision • Translation services • Ethnic-specific services support • Advocacy support • External clinical supervision • Self-directed enquiry support • Internal case-load management supervision • Support from professional associations or collectives, national bodies, faith-based bodies, and Pasifika bodies • Email and phone call support when required • Mentoring

A few respondents provided a lot of rich detail in their explanations, such as the following four who emphasised the need for both cultural and professional support. One of them noting that access to professional supervision was made easier because "work pays for that". Moreover, while these respondents raised the importance of being a member of a general New Zealand national professional body for easier access to support services, they also noted, however, that, sometimes, Pacific voices or a Pacific presence is not visible within. They state:

"Pasifika counsellors and networks…these have grown over time and enriched my support for clients…But the reality is, it is not just cultural but professional cultural services needed".

"We are encouraged to meet with our professional supervisor once a term, and work pays for that. If we get disclosures, we can get additional support".

"I was a member of [mentions national professional association] but have been disappointed by their lack of genuine promotion and support of Māori and Pasifika cultural supports. I withdrew my membership from [this association] and was going to join [another national professional association] but joined [a Pasifika one instead]. …I am passionate about setting up a Pasifika professional [mentions specific SV field] body to more appropriately support our Pasifika communities".

"[I'm] unclear about where [mentions Pacific association/collective] was, [as it was] non-existent with [mentions the name of the national NZ professional association/collective]".

These findings suggest that cultural and professional supports go hand in hand and thus both must be available to Pacific SV practitioners in order for them to carry out their work effectively. The type and extent of the cultural and professional support required will depend on the roles occupied. Of note is the reference to the availability of faith-based professional association supports.

(ii) "Religious", "Youth" and "Other" Supports Available

Though less was said about these supports, respondents also elaborated on the kinds of "religious", "youth" or "other" supports available to them. These are listed in Table 10.

Table 10: List of qualitative responses about the 'Religious', 'Youth' and 'Other' supports available

Religious (e.g., Pastoral support)	Youth (e.g., supervision, peer support, referral services, etc.)	Other
• Support of church leaders for spiritual guidance…need spiritual guides in our job from my understanding, as it is a heavy job and a lot of unwanted spirit-bag vibes • Pastoral support • Support for contacts via emails or phone calls for clarity or advice • Prayer support from churches • Referrals • Practical help • Pastoral care and prayer from family and Church (Christian) pastors • Pastoral care from small group of women that I pray with • Support from varying Pasifika church links	• Free youth help lines • Youth resources from [mentions two Pasifika NGOs that target Pacific youth] • Professional supervision and peer support • Referral services • Pasifika youth links [from – mentions professional counselling and education networks] • Support for contacts via emails or phone calls for clarity or advice	• A diverse pan-Pasifika network • Informal community support services • Family/Aiga/Sibling support

'Religious' and 'other' supports identified by respondents related mainly to Christian church-based supports, and to the spiritual/pastoral support of family or other informal Pasifika community networks. "Youth" supports related to both professional and peer supports for youth workers, and to gaining access to resources specifically for Pasifika youth. The following comments by respondents suggest that Pasifika SV workers draw

on 'pastoral' type support for their personal wellbeing and professional development from these informal church-based and family support networks.

"Family/aiga support from my siblings who encourage me in this area of sexual violence, in the form of prayer for me or practical support like health and wellbeing care and going for walks and regular family lunches".

"I am a senior member of my church leadership, [I] am able to design pastoral programmes as needed by our faith community. I have brought a range of awareness of key Pasifika messages via seminar speakers, introducing the stopping violence themes; family first information to grow awareness…".

These findings suggest that for some Pasifika SV practitioners, informal support networks (such as family members, personal faith-based groups, church leaders, and/or peer support groups) are available to them and are used to help support both their professional work and their efforts at self-care.

(b) Agencies that respondents work closely with to service the needs of their Pacific clients

Twenty-six (26) out of 40 respondents answered the question, 'Please list up to three agencies (outside of your own) that you work closely with to service the needs of your Pacific clients".[60] Of this 26, over half (61.5%) listed three agencies, 23% listed two agencies, and the remaining percentage (15.5%) listed only one. The list in Table 11 presents a range of different government and NGO services or agencies.

Table 11: List of Government and NGO agencies that respondents work closely with

NGOs	Government agencies or affiliated teams
• Catholic Social Services • The Fono • Taulanga U • Counselling Services Centre • HELP • SAFE • Le Vā • Friendship House • Pacific [Health] Coalition Group • Family Start • Fonua Ola • Family Action • Grandparents raising grandchildren • K'aute Pasifika • Presbyterian Support Family Works	• Oranga Tamariki • Police • Hospital • Counties Manukau SR Team • Ministry of Social Development (MSD) Work and Income NZ • MSD social workers • Interpretation Agency

60 See Q.26 of the questionnaire.

• Taeaomanino Trust • Mapu Maia • Porirua Whanua Centre • Aviva • Tu Wāhine • Youthline • Stopping violence services • He Waka Tapu • Outline [Aotearoa] • Mentoa [Trust] • Anglican Women and Children's Trust • EAP Services • Pasifika Counsellors' Collective (PCC) • TOAH-NNEST • Penina Trust • Takanini Villa [Sexual Harm Service] • Interpretation Agency • E tu Pasifika • Tangata Atumotu Trust • Purapura Whetu Trust	

The responses suggest that most respondents have access to a network of at least three agencies or services (either an NGO or government-based agency), that they can and do draw on. And that this network covers a wide range of SV related agencies or services from across the country.

3.2.6 Personal Work Goals and Aspirations

This subsection presents the results of section six of the questionnaire relating to respondents' work goals and aspirations, and barriers. Seventy-two-point-five percent (72.5% or 29/40) of the total questionnaire respondents answered the first question about goals and aspirations.[61] And slightly more (30/40 or 75%) answered the second question about barriers.

(a) Respondents' goals and aspirations

Respondents' goals and aspirations ranged from personal professional development goals (such as seeking higher level formal educational qualifications) to developing clinical and cultural practices, skills, and competencies for themselves and their respective SV fields, to supporting community and workforce development. These included:

- *"Mentoring/coaching youth social workers"*

[61] See Q.27 of the questionnaire.

- *"I would love to be able to work with a specifically Pasifika focused caseload within my current capacity as a probation officer (or senior practitioner) and to help expand our Pasifika networks"*

- *"Working with Māori, Pasifika, Asian, Ethnic minority clients"*

- *"To be a clinical psychologist that specialises in working with rangatahi in our justice system"*

- *"To progress in my career – which will mean leaving the organisation"*

- *"[To] gain a new skill; further studies; professional development; boost networking abilities; become expert in this field"*

- *"To continue to learn more about my own ethnicity so that I can apply it more in my work; [for] example – learning gagana Samoa so that I can talanoa with aiga when they come through our services"*

- *"Continuing in developing my practice in trauma, related specifically to sexual harm, to work within an agency that is diversely Pasifika and is holistic in its meeting [of] the needs of the community"*

- *"To help non-Pasifika practitioners understand/learn effective ways of working with Pasifika clientele"*

- *"To gain a Masters in Forensic Medicine; to encourage other Pacific nurses and doctors to provide medical care to people following sexual assault or abuse; to improve Pacific representation at the national level in this space"*

- *"Complete a Master's in Social Work; develop Pacific focused programmes in our community addressing SV and safety measures for our young people, etc."*

- *"To continue to provide the excellent service and the best experience I can for our clients"*

- *"To set up a Pasifika service for sexual abuse education, aiming around youth"*

- *"To gain a qualification to enable me to provide therapy to offenders"*

- *"Professional development to support future graduates to encourage effective, culturally sensitive/appropriate practices that [are] trauma informed and safe for everyone, including Pasifika survivors of sexual violence"*

- *"To be a lawyer"*

- *"My hope is to do a postdoctoral research fellow or research to further obtain survivor perspectives"*

- *"To set up a Pasifika service for sexual abused education aiming around youth"*
- *"[To provide] a safe haven for vulnerable men"*
- *"To help others discover their true identity".*

Respondents also spoke of the kind of impact they wanted for their SV work. In their own words, they stated:

- *"To continue being impactful in the recovery and healing for survivors"*
- *"Helping and support the vulnerable people, etc."*
- *"To provide a more safer and healthier environment for our community"*
- *"[To] empower women by providing positive parenting strategies and tools; educate girls to be economically savvy; provide better education"*
- *"To be able to continue to support those in our Pasifika community who have been sexually, physically and emotionally abused. To help them build resilience, strength and heal from the abuse by providing a safe space for them to be able to be open about the abuse they have suffered. Also, to provide positive coping strategies and skills so that they can heal and be their best self with the help and support of their community of support or village"*
- *"To help non-Pasifika practitioners understand/learn effective ways of working with Pasifika clientele"*
- *"To continue to provide the excellent service and the best experience I can for our clients"*
- *"To see sexual violence be discussed safely in our Pacific community, to see education shift from just about being a safe talk but also about the impacts and effects/affects both emotionally and psychologically [as] it does when SV occurs; what is consent in the Pacific context? To be really [a] part of that. I work in family harm and will continue to do so"*
- *"To continue providing counselling for Pasifika clients by offering clients a choice".*

(b) Barriers to achieving goals or aspirations

Three-quarters of the questionnaire respondents (30/40 or 75%) responded to the question about barriers to achieving their goals and aspirations.[62] Respondents had the option of choose one or more of the three response options or categories provided in

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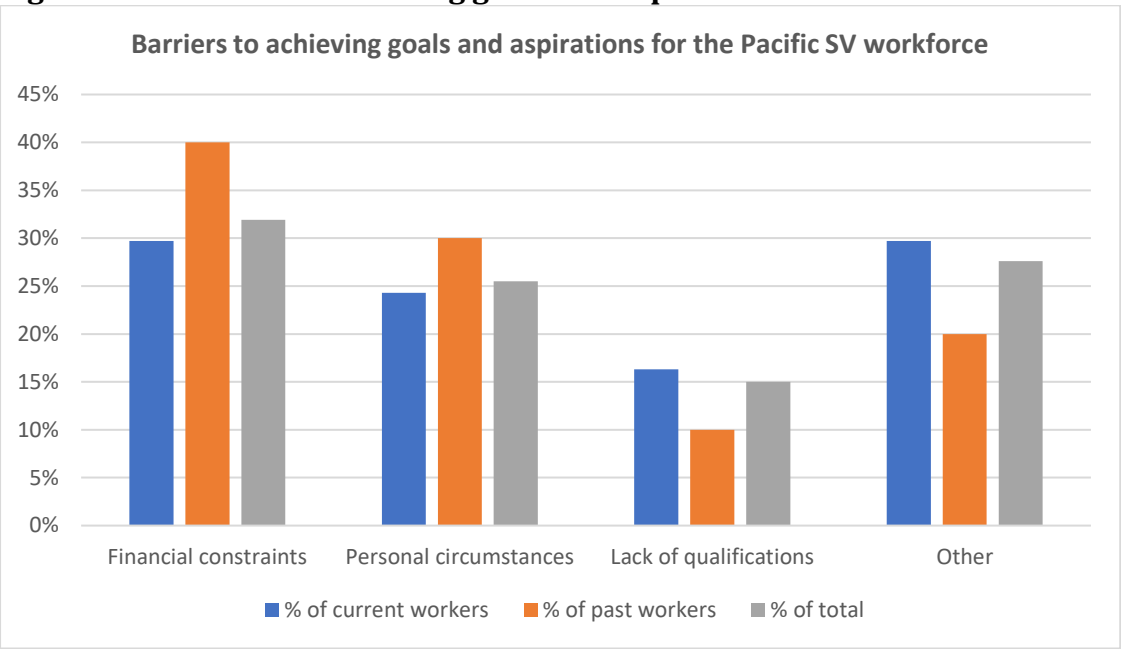
62 That is, Q.28 of the questionnaire.

the questionnaire, and if they were not satisfied with these options could also choose to respond to the "Other" category. As depicted in Figure 13, most of the respondents to this question (both past and current) identified the barrier category "Financial constraints" as the main barrier to achieving their goals and/or aspirations. This was then followed closely by the "Other" category, then "Personal circumstances" and "Lack of qualifications".

Figure 13: Barriers to achieving goals and aspirations



When invited to specify what "Other" barriers prevented them from achieving their goals and aspirations, respondents provided the following list:

- *"Exhaustion and burnout"*
- *"…lack of family support"*
- *"[Tertiary studies] – "I need to complete my [mentions tertiary qualification]"*
- *"[Child-care and family responsibilities] – "I have young children and am not interested in nannies or extended time in childcare, so I can only do this work at times that doesn't take away from my family"*
- *"[Lack of Pasifika providers] – "Lack of Pasifika providers in the wider [mentions geographical area], lack of Pasifika staff applying for jobs in this field of work, lack of opportunities for Pasifika in general to get into this workforce"*
- *"Time and support from different agencies e.g., funding"*
- *"[Lack of experience] – "New graduates need experience in working with sexual harm victims"*

- *"[Timing] – "Timing having just had my young children, now wanting to prioritise career aspirations"*

- *"A building – lease is so expensive; space and rooms are needed to facilitate workshops/groups"*

- *"[Cultural knowledge and understanding] – Sometimes inadequate cultural knowledge and understanding, language barriers"*

- *"[Lack of an agency that deals with Pacific serial abuse] – "No agency with serial abuse, Pacific Island, working in my area".*

These 'Other' barriers could be classified as relating to: 'workload causing burnout' issues, 'childcare and family support' issues, 'a lack of opportunity to gain appropriate formal experience or qualifications' issues, and a 'lack of opportunity to work for Pasifika providers in a geographical or specialist area' issues.[63]

While financial constraints were identified by respondents to be a considerable barrier to achieving their goals and aspirations, non-financial constraints were equally powerful barriers. The different goals, aspirations and barriers raised by respondents (past and present) provides interesting and useful qualitative insights into those things that matter or have mattered to workers and impacted their ability or desire to either reach their goals, stay on course or not.

3.2.7 Respondent final reflections and closing comments

This subsection presents the results of the final question and section in the questionnaire, i.e., section seven. This is where respondents were given the opportunity to share any final reflections or thoughts before the questionnaire ends.

Twenty-five respondents out of a total of 40 (or 62.5% of all respondents) took up the opportunity to make some final comments. These closing comments ranged from offering gratitude for the opportunity to provide input into this research, to requests for copies of the final report, to recommendations for the setup of a Pacific-specific or pan-Pacific service that would meet their perceived service gaps in the sector.

One comment reflects on the timeliness of the research given the impacts of the COVID-19 pandemic on Pacific families. Another provides an answer to a missed question. But all in all, these final responses offered further rich insights into the contexts and aspirations of respondents for the Aotearoa NZ Pacific SV workforce. The richness of the responses supports the use value of including this kind of open-ended question as a closing question in a questionnaire of this kind. The respondents share the following closing thoughts:

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[63] There are some possible overlaps between some of these "other' responses and the financial constraints and personal circumstances categories.

"I work for the only Kaupapa Māori sexual violence service in New Zealand and are not aware of any such service available to our Pacific peoples. I am pleased that my organisation does not turn away any Pacific peoples needing support and would like to see something like this available to the Pacific community."

"The need for more focused and dedicated interventions for Pasifika paihere (people in care) in SV is needed down here in [names location] and it would be great to see more of the providers from the [name of location] regions reach out to us here and share information about how we could possibly make that happen."

"I missed answering the question regarding Pasifika models or approaches and was unable to go back and complete this section. So, I am providing my answer in final comments. I find having an attitude of 'meaalofa'[64] and integrating 'talanoa' & 'whare tapa wha' helpful in working in crisis counselling".

"Private practitioners working with Pasifika are few. Our biggest financial struggle is high rents and overheads. We also do not qualify for many professional development workshops, grants etc., because we are not eligible. However, the benefit is that we get to practice culturally and authentically because we do not have targets and expectations of a western system to contend with".

"I would like to be more connected to the Pacific workforce in this space. I feel that many of us are siloed and don't know the landscape as much as we could."

"It would be great to have the option of attending cultural workshops online. I live in [location] where there are a few workshops, but majority are facilitated in Tamaki Makaurau. I have a small Pasifika clientele, but it is important for me to maintain professional development with challenges that affect the Pasifika communities. By contributing to this research, I feel that I'm helping in a small way."

"If we educate and address the abuse at an adolescent /youth age, we are giving them new tools or strategies for the future breaking the circle half-way thru life, so youth don't have to carry the blame and from young age."

"Sexual violence is a taboo to talk about in the Pacific cultures. So therefore, we need to inform the community how to access support, what is out there in the community".

"Doing this survey has highlighted for me the importance of accessing cultural supervision for working with my Pasifika clients".

These comments provide an apt closing for this section of our report. Overall, they raise comments in support of further developing and strengthening the Pasifika SV workforce of Aotearoa NZ and note the vital roles that government and non-government agencies, including research, could play in achieving that goal.

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64 "Meaalofa" is a Samoan word for gift.

3.3 Talanoa Findings

3.3.1 Talanoa Participants

Thirteen (13) participants took part in the talanoa sessions; 12 women and one man.[65] Five other participants had expressed interest but, in the end, could not participate due to health issues and/or work commitments. Most of the participants are New Zealand-born Pacific peoples.

Combining years of voluntary and paid work, the wealth of experience in SV sector among these participants vary from five to 40 years. A few of these participants started their journey as volunteers and then progressed into different roles by completing higher level formal NZ education qualifications. Table 12 indicates the ethnic, gender and practitioner or managerial status of our talanoa participants as an overall group. This at least provides information about three markers considered core to identifying the makeup of a Pasifika SV workforce.

Table 12: Demographic details of talanoa participants

Participant	Ethnicity	Gender	Role in Workforce
1	Samoan/ European	Female	Practitioner[66]
2	Fijian	Female	Practitioner
3	Samoan	Female	Managerial
4	European/ Fijian	Female	Practitioner
5	European/Māori	Female	Practitioner
6	Samoan/ Tokelauan	Female	Practitioner
7	Samoan/ European	Female	Practitioner
8	Samoan	Male	Practitioner
9	Samoan	Female	Practitioner
10	Cook Island Māori/ Māori	Female	Practitioner
11	Samoan/ Tongan	Female	Practitioner
12	Tongan	Female	Practitioner

[65] See section one, the background section of the report, specifically the subsection titled "Approach to reporting small numbers and specific participant roles and balancing confidentiality concerns". Here we decided on balance that it was appropriate in the interests of transparency and honouring 'cultural consent' to provide Table 12, that is to provide information on the ethnicity, age and job status (practitioner or managerial) of participants, and that to honour the protective aspects of the principle of confidentiality, to remove from quotes any specific reference to who the quote belongs to. This significantly reduces the risk of identifying participants from our small and connected Pasifika community in Aotearoa NZ while at the same time makes transparent the overall breakdown of the ethnicity, gender and practitioner/manager status of participants.

[66] For the purposes of this section 'practitioner' refers to someone who works primarily in a professional SV public or private practice or service/agency role as either a clinician, frontline crisis worker, educator, programme facilitator, and/or cultural advisor. 'Managerial' refers to participants who work primarily in a managerial, governance and/or administrative role.

13	Samoan	Female	Practitioner

Out of the 13 participants, a few are psychotherapists and are ACC registered and specialise in SV. The social workers working in public services interact with clients affected by SV largely through advocacy support.

Most of the participants in our talanoa sessions live and work in Auckland. There are also participants from the South Island, the central North Island and Northland.

2.3.1 Thematic Analysis: Eleven Key Themes[67]

Theme 1: Aotearoa NZ's Pacific SV workforce are isolated, scattered and do lots of voluntary or extra service

It was evident from most of our talanoa sessions that the Pacific SV workforce who participated are scattered and feel isolated across the country and within their respective services. Most participants spoke about working in silos within their workplace. Some participants used the opportunity to participate in this talanoa to connect, sometimes for the first time, with other Pasifika people working in the same area. The following participant provided a viewpoint typical among most participants who spoke about this:

"I think one of the things I really love about this project, this study, is getting to actually meet other Pacific providers because we are just so siloed and I don't know who is out there and we could be just so helpful for each other, but we don't even know the other one exists".

Doing voluntary or extra unpaid work for the sector is normal and ongoing for some participants, done on top of their paid work, and is largely invisible to the sector. This is driven in the main by their compassion and love for those who they believe are in need and suffering. The volunteering work varies from delivering food parcels after work to providing free therapy sessions for those who are either not eligible or no longer eligible for the ACC-sensitive claims. One participant shared, for example, that:

"My voluntary work has included work in the women's prison in Wiri, Auckland. I continue to work voluntary with clients who may not be eligible for ACC (e.g.) the historical abuse happened in the Islands, but they now live in NZ and do not qualify for financial assistance like ACC. I also work unpaid when needed for clergy".

Participants shared that doing work over and above their job requirements – doing extra – was because of a need to also support Pacific peoples unfamiliar with or overwhelmed by the state's systems and because often getting into this work was more than just a job, "it is a vocation". Another two participants explained:

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67 While the themes are numbered, the numbering does not indicate any level of prioritisation. Rather, they are used solely for ease of reading.

"Yeah, I've experienced it all, but it was not only working clinically, but it is voluntary, you know, church and community work, but I suppose for me [it] is how can you not share their pain, you know? And their heartbreak, and the heaviness of your people and your client. So, when you work from a place of love, of course your heart and your mind and soul is engaged in the story of that client, and that part of you that is empathetic, and I have always been one that tries to be authentic, you know, keep authentic as a [practitioner], keep real. So, you bring that into the room [because] it is not just a job, it is a vocation"

"Yes, that is my role, that we do pre, before court trial, court process, …it is extra work again, so we do all that emotional, all the things to set them up going through the court case…."

This voluntary work also extends to educational sessions offered to vulnerable families that some participants met outside of work through non-work avenues or contacts. One participant spoke of giving back to the community and providing for those who are more vulnerable and ineligible for other services. One participant volunteered, for example, her skill sets gained from other professional roles to offer language courses to support women and children who are survivors of abuse.

"I have always had a fulltime focus and then tried to have a give back if you like. I also did some groups in that time with women and children because I was also an English teacher. So they did a bit of a mixture with some language learning and we called it Shakti Super Heroes, so we did some children's courses around them being survivors of abuse and just getting some very careful introduction to different ideas around them being survivors and what they've overcome."

Theme 2: SV work is deep, layered, time-consuming and sometimes emotionally overwhelming, but can also be satisfying and a privilege

Participants shared that working in the SV area, with Pacific clients affected by SV, can be emotionally overwhelming, involve deep therapy work and take lots of time. All participants acknowledged that SV involves complicated, complex and multi-layered issues. One therapist sums up her experience of SV as filled with "lots of shame" for survivors but notwithstanding she found that to be involved in their healing is for her a "privilege and satisfying". Having trust between therapists and clients makes a huge difference to whether or how quickly the healing from SV journey can begin once disclosures of SV are made. This takes time.

"As SV is very deep, often with lots of shame, it is difficult for survivors to talk about it. To be in this work gives survivors an opportunity to have their story heard and validated. This begins the healing process. Being instrumental in that healing process is a privilege and satisfying as a practitioner."

Working with Pacific clients affected by SV requires appropriate time and a safe space to heal and to be supported in that healing. According to participants, Pacific SV is often a hidden issue, a historical problem, that remains buried deep for a long time. It is not until the top layers – usually relating to family or domestic violence, mental health, personal anxiety, anger and/or depression issues – are uncovered and addressed that

the SV or abuse surfaces. This is evident in the following quotes by three different participants.

"Quite often I find that with family violence the SV normally is in there. So, in that pattern of violence… so, in terms of trauma there is a lot of stuff that is hidden in there under family violence."

"So, as we know when you build emotion eventually it has to vent itself, it has to release itself and often these are done in those emotional times where whoa just flip the lid, bro, it didn't just start yesterday, it didn't start when your wife told you, you were useless and all that sort of thing. These are things that are really deep seated and unfortunately you haven't dealt with it."

"When they are getting fa'ali'i (angry)[68] they think they are just getting fa'ali'i because someone called them a brown so and so. But realising when we dig deeper [it] is actually connected to some of the blooming fa'ali'i that happened to them when they were young, and they have never dealt with it. And all they do is suppress it and they are getting older."

The implication raised implicitly by many and explicitly by a few participants, is that there were more participants taking extra time without support than with support. In other words, participants were 'taking the appropriate time' voluntarily in order to achieve the results desired by the process.

Participants spoke of how unpacking SV also depended on their client's readiness to deal with the issues once disclosed and the trust relationship built between them. This often meant they needed to be patient and careful not to rush their clients. It also meant for workers with their own histories of violence that they too have to constantly recheck themselves that they have sufficiently dealt with their trauma and have faced it and have accessed help for it. This is evident in the following quotes by two different participants.

"We need time and patience not to get in until clients are ready to get into it."

"It is also about your readiness to face it because [for] some people like revisiting their trauma, is like facing a lion. So, it is about their readiness to face it, and [for] people like myself, I was ready to face it, but I did not have time to digest it and reflect [on] it and when I allow myself to sit in that space, because it was part of work, it actually swept me off my feet. But at the same time… I needed support and help from those around me."

Theme 3: Pacific SV workers rely on Pacific practice models, frameworks, and approaches in their work

Participants used different techniques and approaches, and wove or brought together different practice models, frameworks, paradigms, to find what would work best for their clients. Some participants used metaphors to help communicate and discuss sensitive SV issues with their clients. Metaphors are used to also describe the way they

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68 In the context of this narrative, fa'ali'i is translated as angry.

saw and worked with "cultural and professional clinical values". As one participant shared,

"Using a metaphor of dancing, constantly weaving and moving in and out, creating a safe space with no boundaries – part of healing – and the dance is intertwining between cultural and professional clinical values."

Participants shared being familiar with both Pacific and western models of health, education and care, and that for many these were easily accessible in their workplaces. For others, most notably those who did not work in a Pacific specific programme, service or agency, finding the Pacific models they needed was something they had to do themselves.

"I think when it comes to the Pasifika models that I use, it is definitely something, sadly, I have had to implement personally. My work environment is still very much a western system and so it has kind of been… especially when I've been going into classrooms, where like a lot of our content is very educational but it can be placed in 'this is what we perceive to be right and wrong', which can really affect Pasifika's value systems that are [different and] really rooted from a young age."

Some participants acknowledged the use or integration of western approaches such as Narrative Cognitive Behaviour Therapy (or Narrative CBT) in their practice alongside their understandings of Pacific models and values in their work with Pacific SV clients. One participant implied that her Pasifika approach draws from her a "identity" as a Pasifika person. She explained:

"I work from a Narrative CBT approach (Cognitive Behaviour Therapy) to address [the] thinking and behaviour patterns of my clients. [And] If I know my identity in the "Pasifika" part of me (as I am also palagi), if I know how to connect back to myself on a personal level then I am well able to extend the spiritual values, mana, connection, language, culture, customs and vā into the therapeutic space when working with my Pasifika clients. I already am!"

Other participants noted bringing together different Pacific models or frameworks such as the Fonofale and the Teu le Va in their work with their Pasifika SV clients. One explained that they integrate different relevant frameworks to help their clients:

"The Pacific models that I use are Fonofale and Teu Le Vā frameworks. Yes, I use an integrated approach and [this] integrative approach is a combination of two or more theories or two or more models or frameworks that can help understand a client's problem."

Yet another participant noted trying to weave together the western/Pākeha/Palagi models and Māori and Pasifika models, concepts and values they have to work with, but implying that the integration is not always successful or necessary.

"Yes, I was not happy with what I had to present to the [group] when [my SV service] gave me their so-called programme, it was …very, very kind of like, here are the …topics, just talk to them about it. I was [like] wow, surely, it is a very Pākehā or Palagi based…so I not

trashed it, I started off with it, but I was real fortunate that with the parenting programme, anger intervention parenting programme that I'm on at the [name's another service], we do have a model there, and that is, we base it on Te Whare Tapa Whā model, the Māori wellbeing concept. Of course, Pasifika have got the Fale model. So, it is very much I operate my delivery on the basis of the spiritual, the physical, the mental, and just on the relationship side of things as well. So that's how I approach my [SV group] and deliver what I have got to deliver, and [have] prepared when I'm speaking with them, individually or in the groups. So, a lot of the things is standard talanoa, we check in. We see how they are doing in all those four areas, and as you know, it only takes one of those things to be not functioning properly and that kind of reflects, that impacts the whole of your wellbeing, and that pretty much takes a large part of our conversation, our talanoa."

Being open to a reflexive process that includes assessing the structural and practice contexts of their workplace, can help practitioners determine the value of adopting a framework, model or method, or not. One participant suggests that this can allow one to 'think about the box' and its constraints.

"Absolutely, it is definitely frameworks and models and methods, you know, we work in a community or we work in an agency that has a structure. So, if we look at it from a perspective of how we practice those frameworks, guide us to allow us… how do we take this person's narrative and place it here so we can have someone who is still thinking in the box to actually go, 'well have you thought about this one, can you fit it in your box'?"

Theme 4: The vā is a central organising principle in Pacific models of care

Underpinning the talanoa of most of our participants about their practice with Pasifika clients is the vā principle, i.e., the principle of looking after or caring for relational connections and responsibilities. All participants noted an understanding that relationships are important in Pacific spaces. Those that actively applied Pacific models spoke of working with Pacific clients in ways that assume the existence of a vā connection, a connection that must be honoured and respected, and was reflected in their approach (e.g., in "the tones" employed). Two participants shared:

"I think the one key thing while we have the Fonofale model, or one thing that stood out the most was the vā, was about the space, about the respect and the connecting or before the talanoa occurs is that vā between me and that person"

"Then with the vā, it was really that. That was the first step, was respecting the fact that what they came through, now is my turn to put their faith in me or to trust me through this process, and it was about the tones. It was also about le vā fealoaloa'i (a relationship of reciprocity or mutual relationality), how I'm respecting their journey and where their mindset is at".

Theme 5: There is a disconnect between holistic Pacific models or frameworks of care and current state SV funding and assessment regimes

Participants identified that while Pacific models of care were holistic, programme and/or government funding systems and regimes were not. Participants suggested that

funding regimes that resourced SV services operated on a logic that often presented barriers to delivering culturally appropriate, holistic, long-term therapy services for Pacific peoples. Participants noted that accessing the kind of funded therapy services that are both holistic in their approach and able to be easily extended is difficult. So much so that one participant decided to go into private practice to avoid these barriers rather than to persevere with a mainstream publicly funded and managed service.

"I made a decision to go into private practice so that I could apply cultural ways of working without mainstream expectations of delivering numbers, levels and outcomes. I wanted to work holistically in a way that would honour Pasifika culture in a way that seemed more authentic to me as a therapist."

For ACC regulated therapy sessions, applying for more sessions required the client to have to engage in an assessment process where they would have to retell their story to an assessor who they often did not have a relationship with, and for which for some clients was retraumatising. On top of this is the wait for approval from ACC, which was seen as additional stress, and as well for those who decide to prosecute their offender/s, added a further layer of stress, having to deal with the sometimes-overwhelming challenges of going through the court system.

"While waiting and waiting for the ACC, it is additional stress and not getting there… and then another thing, you have to retell your story again, and you're waiting, and then when there is sentencing, or to go through the trial, you know, all this other thing it is overwhelming. It is overwhelming and when they come closer to the, for example, waiting for 2 years' time, closer to the thing [the court case], the more stress. Some of them, say oh, I just don't want to go through it again. … Yes, and some of them are having those thoughts, man, I shouldn't have done [that], go forward. We want them to go forward but the system..."

In terms of ACC registration not all Pacific counsellors and psychotherapists are registered, but of those participants who were, they raised interesting discussion on the challenges of registration and working to ACC standards. The process of becoming a registered therapist for ACC and other professional bodies were said to be in themselves a barrier. Here the registration process and on-going registration requirements have financial and time (and sometimes upskilling) costs that not everyone can afford. The process for extending ACC funded sessions was also, for some, off-putting. The terms of the application for more therapy sessions process seemed to them to either ignorantly or unfairly question their professionalism and/or the validity or effectiveness of their approaches.

"With the ACC process a lot of our people, a lot of the Pacific counsellors and psychotherapists have been put off by the process. The reason being is like just the paperwork that is involved, it just overwhelms them and also to the requirements of training and reporting… and after so many other sessions you have to do another report and all of these progress reports that are attached, to just to validate and justify more sessions for our people - it is a barrier."

"It is the paperwork and the reports to justify, and also too they find ACC at some stage they think they might need a bit more, then ACC have their own psychologist and their own

medical staff [to] look into it as well. So, they interview the client and that is where it can be hard for the client because then they have to tell their story again to an ACC psychologist around what had happened. So that causes tension too within the ACC and amongst the Pasifika practitioners too, because for us it is about relationship. The relational aspect, vā tapuia, and it is almost they come back feeling more traumatised, and they don't want to go anymore, they don't want to do counselling anymore."

Theme 6: Professional and Cultural Supports are critical to the wellbeing of Pacific SV workers

Some participants saw advantages to working in public organisations and that this lay in having access to professional development and supervision. Unlike the participants in private practice, public agencies could more easily shoulder the financial cost for this. However, the Pacific therapists we spoke with working in SV acknowledged the importance of and need for professional supervision (especially clinical and cultural supervision) and self-care. Two participants explained as follows:

"I continue to receive essential cultural supervision regularly. I also have support from Pasifika academics and colleagues that understand, support and contribute to the wellbeing of Pasifika peoples. There is a lack of financial support and eligibility into mainstream funding for private practitioners. I often have to spend money to attend professional development courses, conferences that groups would get to attend free because of government funding and eligibility. This also applies to office expenses and overheads, no help there for private practitioners."

"So, how I took care of myself, I suppose definitely like clinically you needed the critical cultural supervision, it is so important, and that is what I've emphasised with a lot of our Pasifika practitioners – keep up, maintain regular professional clinical cultural supervision. It is important that you keep doing that because you have to talk to somebody about these cases"

Having a suitable supervisor who understands the practice approach and values of the therapist also helps. One participant found that having a professional supervisor that was Pasifika, where they didn't have to "spend half [their] supervision time explaining why [something was] important in a Pasifika context" was crucial.

"What really helped me, I worked really hard to find a Pasifika professional supervisor, because in our work force they pay for our professional supervision and I refused to get one until I knew they were of Pacific descent themselves and could understand. Yeah, I wouldn't have to spend half of my supervision time explaining why that is important in a Pasifika context … having someone who I could go to and say this is what is going on and they could understand that kind of world view was really helpful for me"

Participants who were ACC registered counsellors and worked with Pacific clients recognised the lack of Pacific registered therapists specialising in SV. Those we spoke with yearned for appropriate cultural support or supervision, and/or for the opportunity to work collaboratively with other professionals to improve the services

they offered to their Pacific clients. Some find that this kind of cultural support is what is missing for them. One participant found:

"There is such a shortage of ACC registered counsellors, psychologists, therapists and you can get ongoing long-term support if you can find at least one of those people."

One participant spoke of a support group that was part of the Nga Vaka o Kainga Tapu program which provides a framework for assessing family violence within Pacific communities, promoting an ethnic-specific approach. She stated that this support group is available to her when needed, especially when there are issues from SV clients and their families from the same ethnic group.

Theme 7: There is a need for more specialised Pacific SV workers working in ACC, Justice, Police and Courts

Participants spoke about the lack of Pacific SV workforce presence in ACC and Courts, including in evidence video ('EV') units within Police and Justice. They emphasised the importance of having Pacific representatives there as Pacific professionals play important roles as navigators to support Pacific families and clients going through these, sometimes quite alienating, processes. Access to support services for Pacific families and clients to help them navigate the justice system, including language translation services was, according to a few participants, difficult for some of their clients. One participant spoke of having Pacific navigators with clinical and cultural experience providing support to Pacific clients and their families, to help them navigate state systems. This can help eliminate or reduce their frustration and sense of alienation in the system. Two participants shared:

"Just what she said about people need navigators. They need people they can feel safe with to navigate those systems and it still does feel very siloed between Oranga Tamariki and the court system, the police and then treatment agencies. They are all very disconnected"

"I've been trying to champion one person, you know, in there. Sometimes it just takes one or even in the EV unit, so have a social worker in there, a Samoan social worker. For our people to get into the court processes for Pacific people, and the legal support, and even in the area of restorative justice, that is a missing link at the moment in SV area [for] people."

Participants observed a need for more Pacific therapists to work in the court system when Pacific SV clients and their families are involved, and for more Pacific ACC registered psychologists supporting Pasifika. With regards to this, two participants shared:

"But the process itself, the court case, we [do] have court support people there, at the courthouse now, but the sexual side of it, unfortunately, it still doesn't get a big say inside the courtroom, because sometimes like the children can be in a room at [the] time - so, they don't see the offender - but sometimes the women don't get that…."

"I think for ACC we need more, because my daughter is [in] her first year at University of Auckland [to] become a psychologist. And for me one thing is [there is] a big gap here, is

that police interview, you know, because with cases coming in, it is now and again, I go and attend, shortages across, and the court process, I would love more [in] court up here… more work around supporting and encouraging, not only Pasifika workforce, but survivors coming through the system."

For another participant who works with ACC funded clients, they noted doing so because of a desire to help disadvantaged people suffering from SV, who without ACC funding would not get the therapy they needed because they can't afford it.

"I think the fact that ACC funds therapy for people around SV and not so much domestic violence or other forms of trauma is a reason why I work more in that area. I wanted to work in the area of trauma and I also wanted to work with people who couldn't ordinarily afford therapy."

Theme 8: The Pasifika SV workforce draw on faith values to assist and inform their work with Pasifika SV clients

A few participants' spoke of how their religious or faith values assisted and informed some of their work with their Pacific clients. For one participant who was able to do some of their SV placement training in their Pacific Island country, they found that by drawing on shared Christian faith beliefs this helped to provide the culturally sensitive language frames and tones needed to address the SV offending of the chief in that context, complete with cultural and biblical metaphors and proverbs. The participant shares:

"The village issues were like family violence, there was sexual violence, that was happening in the villages. …So, a case example is a village had referred a [case of a family] with family violence, and also too, sexual violence, that was happening in the family. So, there was talk that [the chief] was sexually abusing his daughter. So, my job was to go and sit [and talk] with this [chief]. I can remember writing up the case where, first of all, you know, just the protocol [of] that humility [needed] because you are really aware of the vā, like it was happening there, but there was also too a respect and humility of being able to go [there in the first place]. So, my father trained me up. So, my father would get me to sit down before facing [him], get me to practise [my language and approach[69]] in a way that was appropriate and respectful to this old man. And he was an old man, he was old man in his 70s. So, there was a lot of grounding that went into it. So, …being able to approach him in humility and being able to sit and ask if there was any support they needed, you know, just coming in from that place of support for their family, and he was quite defensive. …So straight away, you know, to that difference, I suppose, that I come from New Zealand with this education and coming into his family. …So, we talked about that, you know, we talked about the (SV) and I said to him (spoke in ethnic language, making a humourous reference to a biblical proverb). …And of course, he laughed, and it broke the ice, you know, never mind the village, never mind New Zealand, never mind what the village is saying. It was being able to talk about God has a plan for your family and something is happening and that broke the ice. And he laughed, and I could hear some of the people at the back

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69 For confidentiality the ethnic language used by this participant is not used, English translation used instead.

laughing, you know, and that was an inroad into, you know, just what was happening in his family and the stresses that they were experiencing. Then he went from there (laughs), then he threw some scriptures [at me], you know, he threw some scriptures because you know he is a church going man, he is head of [his family], and he was really aware that in the back, you know [of] the [open house], everyone was listening. He threw some scriptures around, you know. Then I …like we talked about the sun, and about the rod, …we were talking in those terms, but it was really – that is what I love about the use of metaphors and symbols and proverbs, our values, because you can talk about the story but not talk in the story, but talk indirectly to say hey, I'm here, because of the violence, physical and sexual. …we were talking in scriptures too, you know, and it was really good. It was from there, when I said the rod is used to guide the sheep, it is to guide, it is not to hit, you know, of course he was laughing. Then he said he was talking about the disobedience. But from there that was, yeah, we were able to talk about what happened, the violence and how he needed support."

When the placement ended for this participant, on their return to New Zealand, when they shared their learnings of this case with their Pākehā lecturers, they were surprised at how concerned they were. This participant puts it down to a disconnect between "two different worlds".

"So, of course, I come back to New Zealand, I write up the case study, I present it to my [Pākehā] lecturers and they were really concerned that I didn't address the issue and they were concerned about the confidentiality aspects because the survivors were in the fale, you know, listening in. I was walking in two worlds, just two different worlds, and I think that is where I can see we are needed in both worlds. We need to walk, navigate, in both worlds, you know, to validate our way of being able to work with our [Pacific] people."

In relation to where "faith comes in" to their practice, this same participant finds that it is part of all healing to find context and if the context requires drawing on faith beliefs, then that is what is necessary. Because a lot of Pacific families have strong faith or religious (especially Christian) beliefs, being able to connect to this faith is a strength. This participant understands the tensions of drawing on faith beliefs in a secular state environment. However, this participant implies that working in context means being open to making sure those "boundaries are fluid", like when "doing a dance" and you need to be in sync with your partner if the dance is going to go well.

"I suppose for me the boundaries are fluid. I describe it is like doing a dance you go between, you know, the boundaries because part of it is their story, they are wanting to tell you their story, so being authentic in their story, in their talanoa, is being able to allow them that open space with no boundaries. Because that is part of the healing, and I suppose that is where your faith comes in. I mean, my personal faith helps me to go deeper, you know, with clients, to go deeper, but in order to go deep as a practitioner, there is also being able to bring them back to the present moment, you know, being able to bring them back, to ground them and centre them [again] before they go home again. So, the boundaries for me are fluid, but that is where we need like a cultural supervisor that understands that dance that we do [in our practice], because it is spiritual too."

This view of the value of faith beliefs to Pacific practitioner approaches to working with SV clients or groups is echoed by another participant who works with people from

different gender and sexual orientation groups. The participant shared that their cultural values and faith values informs the way they interact with people of different sexualities, suggesting that while they may not agree with a 'sinful' act they – in accordance with these values – can leave judgement aside and work with the person before them.

"So, if a [client] has got an issue with the fact that [they] might have, and I have got a few who are …gay in that area. So, I have learnt through growing up in my own Pacific culture we don't treat those people any differently, and I learnt this lesson really well with my faith that God hates a sin but loves the person. …I guess I take a lot of comfort in being able to do that when I sit next to somebody who is of that sexuality, and also, I don't have that issue, I don't actually see them in those labels. Sometimes they would ask me, 'doesn't it bother you, that I'm [gay]', and I said, 'you know what, I didn't even know that you are [gay], what brings that up?' … [They say], 'oh, I thought all the information you would have been given by my blah, blah, blah, that you would know'. …I said, 'well, no, because I don't ask for that information and it doesn't matter to me'. …So, I guess, I carry those that values that we treat people the way we ourselves like to be treated regardless of our stance, regardless of our position with our sexuality and also our faith. …I'm actually, really, kind of hold dear to my faith, you know, I know the difference in being able to work with people who are gay and being able to work with different types of people, you know, you don't judge them according to actions. It is the actions that are actually what is the problem and not the person. …So, I carry that in my work, and I guess one of the things as a Pacific person, is really generally wanting to let that person know and the other person, the client …they don't have to reveal anything to me, they do it in their own time. I'm not here to try, because I'm not a counsellor and I state that right at the end, I said I'm not a psychologist, I'm not going to try and read your mind or anything like that, but I know that you have got issues that you are working through, and I want to walk alongside you. So, because you've come to see me those issues now become a part of me, and we are going to do this together."

Theme 9: There is a crucial need to educate and mentor students into the Pacific SV workforce

One crucial need spoken about by participants is the need to grow the workforce of Pasifika SV practitioners and that this could be done by creating more opportunities for mentoring and supervising students. One participant advocated for this in therapy training, especially for student placements "that encourage Pasifika values and considerations in therapy".

A participant working in the education sector advocated for ongoing and culturally informed sex education in schools by sex educators so young people can access information and resources properly and be able to address sex, sexuality, consent and sexual violence and harm issues sensitively and appropriately. The suggestion is that training curricula for youth sex educators ought to include deeper investigations into the ambiguities of sex and consent across different cultural and ethnic settings.

"I think a big thing I would love to see [is the] kind of shift, is just more accessible training around sexual harm, especially for our school counsellors and even teachers. …But by

understanding, I think, creating that accessibility for greater education around sexual harm prevention, around what consent means, what does sexuality look like verses attraction. All these different parts that exist in our education system [that] we are teaching our young people, I think that in itself would be awesome to see our school counsellors and our teaching staff, even just having more access [to that]."

Theme 10: The Pacific SV workforce needs to grow, consolidate, and be more visible

Participant talanoa on the needs and aspirations of the Pacific workforce focused overall on growth, retention, consolidation and visibility. The narratives of the following two participants were typical of participant comments:

"My future aspiration, I would like to be a specialised Pasifika around this trauma, and being able to lead a team, being able to lead others, our people [who] come into [this]. I would love more to come, and if we can run our own practice in [provides location], a Pasifika one, it would be awesome."

"My hope is the Pasifika SV workforce will continue to grow and will continue to progress and I will encourage practitioners and Pasifika practitioners to apply for ACC registration."

Some went further in their articulation of a need for a strong Pacific SV Network. One participant stated:

"I think that is an aspiration would be that we are more, that our network is stronger or that [it] is already a strong network and I just need to go and join it."

Connecting these workers and their aspirations as a network requires some coordination. Most of the participants interviewed were not connected to or aware of Te Ohaakii a Hine – National Network Ending Sexual Violence Together (TOAH-NNEST) and its emerging SV Pacific network (which is currently a branch within TOAH-NNEST), or any other Pacific network for SV. This underpinned comments about a need for a more visible and connected national Pacific SV network.

Theme 11: An active national Pacific SV Network, Fono and multi-agency service is needed

As a number of participants were not familiar with or connected to a professional association or network, and/or had not heard of TOAH-NNEST's Pasifika network, a call for a collective or national network was perhaps unsurprising. The following participant's comments reflects this sense of disconnection:

"I think we need a National fono for all Pacific SV workers."

For those who were aware of TOAH-NNEST's Pasifika network, there was support expressed for it. This is captured by the comments of one participant who shared:

"So, I am part of TOAH-NNEST's Pasifika network as well and encouraging, and [have] always given that space the opportunity."

Two participants suggested the idea of a "medical service for sexual and family violence" for Pacific peoples – a "multi-agency Pasifika service or centre" of sorts, that is Pasifika led or run. South Auckland is raised as a location site for the medical service, presumably because of the high proportion of Pacific peoples living there. Interestingly, and perhaps understandably given the shared cultural links between Māori and Pasifika, Māori are included in the visioning of this multiagency Pasifika centre.

"Having a medical service for sexual and family violence in South Auckland that is accessible to people… That is, like a state of the art, the best facility in the country in South Auckland...."

"'Multiagency Pasifika' should be in there. Some Māori and Pacific ethnic groups in there or have a Pasifika service like a multiagency centre. We have got enough doctors out there, we have got enough clinicians in there, psychologists, counsellors who are Pasifika, why can we not do it ourselves."

3.3.2 Summary of talanoa findings

The narratives of these 13 participants (all of whom represent a range of roles in the Pacific SV workforce from across Aotearoa NZ) provide key insights and lessons for discussion around the experiences and concerns of some in the current Pacific SV workforce of Aotearoa NZ. The following summary highlights the key thought areas raised by participants in their talanoa discussion.

The workforce is scattered and isolated

From participant narratives it is evident that the workforce is somewhat scattered, isolated, and engaged in voluntary or extra service. Considering that a number of participants expressed working in silos within their areas of expertise, a network that can bring them together to support each other seems both necessary and reasonable.

Some within the workforce engage in voluntary or 'extra' service'

While the volume of voluntary or extra service work shared by participants is unable to be revealed through participant narratives, the stories told and reasons shared for why they engaged in these efforts indicate a need to look more carefully into the context for, and impacts of this, on workforce growth and development.

The workforce is frustrated with current state system approaches to funding and assessing Pacific SV cases – an approach considered culturally alienating

There is clear evidence from participant talanoa of workforce frustrations with the current state system's approach to funding and assessing Pacific SV applications for ACC funding support. Accompanying these expressions of frustration are strong suggestions that the system is culturally alienating. A close review of the assumptions within Pasifika workforce articulations of the tensions between their approaches to SV work and ACC or other state agency or professional association standards and requirements is needed.

While some practitioners can work privately to better tailor their services to meet Pasifika needs, not all are in that position. Those who continue to work in mainstream agencies, however, find that they have better access to professional development opportunities, including cultural and clinical supervision. Those working in both mainstream and private practice settings have reported resorting to providing some of their Pasifika clients or peoples with 'extra' or voluntary support, sometimes free of charge, if needed.

Practitioners who apply their faith-based values argue that for them these are part and parcel of their Pasifika values, but recognise the tension of doing so when working in a secular state environment.

While SV work is deep work, multi-layered, time-consuming and sometimes emotionally overwhelming, it can also be satisfying and a privilege

Participants recognised that SV work can be hard; it's deep work, multi-layered, time-consuming, and sometimes emotionally overwhelming. However, for some it is also work that can be highly satisfying. Many feel that it is a privilege to share in the healing journeys of their clients, and that this work has become for them more a vocation than a job.

Practitioners may use a mix of Pacific, western and Māori models and/or frameworks of care in their practice

Participants were familiar with Pacific, western and Māori models and/or frameworks of care in their practice. In particular, the Fonofale, Teu le va, Te Whare Tapa Wha and Narrative CBT models/frameworks, but also – though to a lesser degree, the Nga Vaka o Kainga Tapu frameworks. Overall, participants utilised one or more of these models/frameworks in their practice, integrating them in ways considered appropriate for the case at hand.

The vā was considered a key Pasifika principle of care that underlined Pasifika SV approaches to both crisis and prevention work.

It is critical to understand what consent looks like in different Pacific spaces and how to talk about these in empowering ways

Participants were aware of the taboos surrounding sex and sexual violence in Pacific spaces. However, the need to probe into 'what consent means' in different Pacific contexts was raised as critical to delivering effective sex education to Pacific peoples, especially young people, to achieving prevention goals, and/or to gaining self, family, group and/or community empowerment.

A more holistic public funding and assessment system is needed that can respond to Pacific approaches to SV, and reduce the need for voluntary or extra work

Participant talanoa suggests that a more holistic va-oriented framework for funding and assessment support of Pacific SV clients is needed. This may address the tendency and

suggested need to give voluntary service to clients who fall within the gaps of the system.

More specialised Pacific SV workers are needed in key state agencies involved in SV prevention initiatives and crisis interventions, including sex educators

Participant talanoa imply a need for more specialised Pacific SV workers to advocate for and support Pasifika SV survivors and families through state agency processes, especially ACC, evidence units (within Police and Justice) and the courts generally. This specialised workforce would hold competencies in relevant clinical and/or cultural knowledge and skills or be able to easily access these.

Participants also noted that more specialised education and training opportunities is needed around Pacific sexual harm prevention and crisis interventions, including those informed of the ambiguities of sex and consent in different Pacific youth, community, family and ethnic-specific spaces.

To thrive the Pacific SV workforce needs to grow, be more connected and visible – a national 'by Pacific for Pacific' network and multi-agency service might help

The Pacific SV workforce needs to grow, be more connected and visible to each other and the wider SV sector. Participants spoke of a desire for a national network and multi-agency service that is 'by Pacific, for Pacific', and capable of providing quality specialist clinical and cultural services for Pacific clients, recognised and supported by the state, NGOs, communities and families. They also spoke of the need to support and grow student training opportunities and placements in the SV sector, and increased use and recognition of Pasifika care models/frameworks/approaches/concepts.

4.0 Conclusions

From our literature review, online questionnaire, talanoa sessions and stakeholder fono feedback findings, the project draws the following conclusions in response to the research question: "**What are the experiences and support needs of Pacific peoples in the sexual violence workforce**"?

We start with conclusions about who constitutes the Pacific SV workforce, then provide conclusions on their key support experiences and needs as a workforce, and end with conclusions relating to further research. There are some overlaps between these sections (particularly the last two) but are seen and thus organised separately because they focus on different aspects of the overall research question.

4. 1 Who constitutes the Pacific sexual violence (SV) workforce of Aotearoa New Zealand (Aotearoa NZ)? (Where are they located geographically, what are their workforce roles, what is their demographic profile, how long do they stay in the workforce for, and how many Pacific clients do they work with?*)*

4.1.1 Overall, the Pacific SV workforce of Aotearoa NZ is made up largely of workers of Samoan ethnicity (50.9%, according to questionnaire findings). They are well qualified (i.e., 80% of the workforce have completed an undergraduate degree), mainly aged 40 years or above (approximately 70%), are overwhelmingly women (approximately 95%), largely resident in Auckland (about 63%), working for a non-government organisational (NGO) in Auckland.

4.1.2 With regards to the workforce's ethnic breakdown, we find that the Pacific SV workforce, whilst largely Samoan, also includes a rich number of smaller representations from other single Pacific ethnic groups. That is, it includes people of other single Pacific ethnicities (e.g., of Tongan, Fijian – both Indigenous and Indo Fijians, Niuean, Solomon Islander, Tokelauan, Cook Islander and Tuvaluan) ethnicities, and of mixed Pacific ethnicities, and mixed Pacific and non-Pacific ethnicities.

4.1.3 With regards to geographical locations, the Pacific SV workforce, whilst located mainly in Auckland, are also spread across the rest of Aotearoa NZ, albeit in smaller numbers. According to our questionnaire and talanoa results, outside of Auckland respondents are located mainly in the greater Wellington areas (including Kapiti and Porirua), and in the Christchurch, Dunedin, Tauranga, Northland, and Hamilton regions.

4.1.4 With regards to workplace sites, while most of the Pacific SV workforce are employed with a non-government organisation (NGO), most of these NGOs collaborate closely with government agencies and some are part of various Pacific professional networks or associations (e.g., the newly emerging Pacific SV workforce network coordinated by TOAH-NNEST's Pacific steering group, the Pacific family violence (FV) network such as that led by Pasefika Proud, and/or Pacific health, counselling or social work networks or professional associations).

4.1.5 In terms of workforce roles, according to our questionnaire and talanoa findings the Pacific SV workforce comprises largely of social workers and counsellors. Smaller numbers work across a broad range of clinical roles (e.g., in nursing, crisis support,

psychotherapy, and forensics), and to a lesser degree in peer support, pastoral, education, health promotion, interpreter/translator, and/or manager roles.

4.1.6 In terms of how long Pacific SV workers might stay within the workforce, based on questionnaire responses, most will likely stay two years or less, but for those who stay beyond two years, most will likely stay up to six years with only a few staying beyond that.

4.1.7 In terms of the Pacific clientele of Pacific SV workers, for most of the past and current Pacific SV workforce who responded to our questionnaire, their Pacific clients make up less than 20% of their total clientele lists. Of those there is a wide range of Pacific ethnicities represented but most are likely to be Samoan, Tongan, Cook Island and/or Fijian (both Indigenous Fijian and Indo-Fijian). For those workers who have been employed by the SV sector beyond six years, the proportion of Pacific clients in their total clientele lists increase, with only a few of the respondents who have been with the sector for 6+ years (11.4%) noting that 91-100% of their total clientele were of Pacific ethnicity.

4.2 What are the key support experiences and needs of the Pacific SV workforce?

The Pacific SV workforce needs more cultural and clinical supervisors

4.2.1 To carry out their work effectively Pacific SV workers working with Pacific peoples affected by SV require ongoing cultural and clinical (or other professional discipline based) supervision. But there is a lack of available supervisors with Pacific cultural and clinical knowledge and expertise to properly service the demand.

The Pacific SV workforce draws from informal, formal and pastoral support for self-care

4.2.2 Alongside the pastoral support that Pacific SV workers may receive from cultural and professional supervisors, they also receive support from personal networks, such as family and church-based groups. This support contributes to how Pacific SV workers care for self, deal with 'compassion fatigue' and balance work-life pressures. The sector needs to recognise the necessity of this informal support in its Pacific responsiveness strategies and support mechanisms.

The Pacific SV workforce is currently "fragmented and scattered" across the sector but advocates strongly for the need for a formal Pacific nation-wide SV workforce network and multiservice agency

4.2.3 From literature review, questionnaire and talanoa findings, the Pacific SV workforce sees value in having both a nation-wide network and a multi-service Pacific-led agency that can bring them together as a "workforce network" to coordinate Pacific expertise, referrals, interagency support, and do advocacy work.

4.2.4 Pacific SV workers work in government, private and/or NGO workplace settings, across Pacific, Māori and/or 'mainstream'-led[70] organisations. The Pacific SV workforce is, as a group, fragmented and scattered across these workplaces and Aotearoa NZ, many working in silos and having little to no opportunity as yet to come together to become a widely known, fully functioning nation-wide "workforce network". The SV sector must invest time and resources into consolidating this 'Pacific SV workforce network' if it is to grow and thrive.

4.2.5 Our literature review, questionnaire and talanoa findings strongly support the consolidation of a Pacific-led Pacific SV workforce network and Pacific SV multiagency service that can represent, reflect and/or give voice to Pacific values and Pacific SV workforce experiences and needs in the sector.

4.2.6 Pacific SV workers found that because of the complexities of formal state systems (e.g., Police, ACC, and Court systems) when dealing with SV cases, they, and/or their Pacific SV clients (including families), can get overwhelmed and feel alienated and/or retraumatised by these systems. Solutions such as having access to 'navigators' to help workers and their clients better navigate these systems was considered a need. This 'navigational' support would include improving knowledge of state and NGO (including private business) infrastructures, increased voice and visibility in state policy review processes, and having access to skilled SV sector interpreters/translators, referral and funding support, and practical and institutional knowledge. All of which could be accessed, facilitated and/or managed by or through a nationally funded Pacific multi-agency service.

<u>Pacific SV workers find state funding and review systems for additional SV therapy sessions are frustrating for them and retraumatising for their Pacific SV survivors</u>

4.2.7 Working holistically with Pacific clients is constrained by seemingly inflexible and time-pressured state criteria and processes for funding additional programme (e.g., therapy or counselling) sessions. According to talanoa findings these criteria and processes frustrate Pacific practitioners causing them to either leave the workforce or go into private practice. These state processes can and have retraumatised Pacific clients who do not want to retell their trauma to a professional they have just met as part of the funding review process. The Pacific SV workers who raised this issue advocate strongly for a review of these state rules and processes to better understand where the pressure points are and how they can be addressed.

<u>The Pacific SV workforce do extra or pro bono work for Pacific clients who need but cannot meet service costs or are not eligible for funding support</u>

4.2.8 The Pacific SV workforce will work, if necessary, pro bono or 'go the extra mile' with Pacific clients who they believe are in need but are not able to meet service costs or are not eligible for government funding. This pro bono work is not a sustainable nor desirable solution to meeting the support needs of Pacific SV survivors, offenders,

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70 Mainstream is used here to refer to a system or organisation or agency that is led by the dominant value systems of a country.

families, communities, services and/or agencies and is likely to impact negatively on workforce retention rates. More research evidence is required on the context and extent of this pro bono practice and the impact it has on Pacific workforce retention rates.

Pacific SV workers leave the workforce for mainly 'personal (including family) reasons'

4.2.9 According to questionnaire findings, 'personal (including family)' reasons was the main reason Pacific SV workers left the SV workforce. However, financial, workload, worker burnout, and professional and cultural safety, were not far behind. Whilst these findings offer baseline evidence, a larger sample of the Pacific SV workforce may generate more representative context to this finding. This underlines a need for more quantitative information in this area.

Pacific SV workers join and remain in the SV workforce because they want to contribute to making a positive difference in the healing journeys of Pacific SV survivors

4.2.10 According to questionnaire findings, being able to contribute to making a positive difference in the healing journeys of those affected by Pacific SV was the main reason why most Pacific SV workers joined and remain in the Pacific SV workforce. However, given that most Pacific SV workers stay less than three years, to capitalise on this aspiration and grow the Pacific SV workforce, the sector needs to invest more strategically and proactively in it.

Pacific SV workers aspire to improve their career prospects as well as their professional and cultural competency levels

4.2.11 According to our questionnaire and talanoa findings, the individual goals and aspirations of the Pacific SV workforce centred mainly on improving their career prospects (which included improving overall income and/or salary levels and gaining job and financial security – to meet personal and family needs). This was linked, however, to also making a positive difference in the healing journeys of Pacific SV survivors and to effectively addressing the harms of SV in Pacific communities.

4.2.12 The Pacific SV workforce respondents want better infrastructural guidance and support for career progression, as well as access to professional development, supervision, mentoring and/or opportunities to take up leadership positions in the SV field. This requires clearer pathways to successfully accessing professional development and/or leadership or career progression support. Current pathways were identified as either non-existent or inaccessible due to financial costs or lack of opportunity or of appropriate training programmes due to structural constraints.

4.2.13 Targeted scholarships or grants for Pacific SV students to be trained in, and/or hosted by an agency that works with Pacific peoples affected by SV was strongly advocated for to help address structural constraints and increase Pacific SV workforce capacity and capability. However, this requires having enough agencies capable of and willing to take on Pacific student placements and updating SV education and training curricula to include Pacific paradigms, theories, models and/or frameworks of care. This was identified as a gap area that needs urgent sector address.

Tapu and vā are core organising principles within Pacific SV practitioner indigenous and faith-based value-systems, practices. and protocols and are embedded in their Pacific models and frameworks of care

4.2.14 Pacific SV workers work with both Pacific and non-Pacific SV clients and apply a range of different Pacific and non-Pacific care models, frameworks or approaches in their work with Pacific peoples affected by SV. However, all practitioners underlined the importance of having access to Pacific models and frameworks. The most frequently cited and used Pacific model according to talanoa and questionnaire participants is the Fonofale model, followed by the Talanoa and Teu le va frameworks. Participants also use mainstream and Māori models of care or therapy, such as the Cognitive Behavioural Therapy (CBT) approach and the Whare Tapa Wha model. Because not all participants were familiar with Pacific models and frameworks of care, requests were made for the inclusion of these models in SV worker training curricula, including online training.

4.2.15 Literature review, questionnaire and talanoa findings all point to the concepts of vā and tapu – and their violations – as key organising principles for Pacific SV prevention and intervention work. These were discussed as inextricably linked and were seen as core to and present within both Pacific faith-based belief systems and Pacific indigenous cultural-belief systems. The relationship between Pacific indigenous and Pacific faith-based values is underexplored and requires further probing for its impacts on Pacific SV models and approaches. Participant narratives suggest that participants do not separate their indigenous Pacific values from their faith-based values and that their contemporary articulations of vā and tapu reflect this inseparability. More research is required to better understand the extent to which this impacts current or is likely to impact future Pacific SV workforce practice.

4.3 What is the state of knowledge on Aotearoa NZ's Pacific SV workforce and its future research needs?

This research project provides baseline evidence on who constitutes Aotearoa NZ's Pacific SV workforce and their support experiences and needs.

4.3.1 There has been no previous research study on who constitutes the Pacific SV workforce. This study is the first of its kind and has been able to generate baseline data on the workforce to inform evidence-based SV sector planning and investment.

4.3.2 Pacific reporting of SV in Aotearoa NZ is disproportionately low. So too are Pacific levels of participation in SV studies, especially among Pacific men, Pacific children and youth, and Pacific LGBTQ+ peoples. Pacific sexual offending and victimisation rates are, however, based on current data still disproportionately high.

The combined effect of the low SV reporting and research participation rates on Pacific SV workforce and workforce development aspirations is debilitating. Sector investment in developing, implementing, and testing effective strategies to improve Pacific community awareness of significance of research to public investment in Pacific SV is urgently needed in order to lift research participation rates.

Future research must be capable of providing nuanced analyses and expand on the baseline findings of this project.

4.3.3 The Pacific SV workforce can provide leadership on how best to address the current knowledge gap in Pacific SV research on what consent means in Pacific SV spaces. This is a critical gap area that requires the support of nuanced Pacific research knowledge. Pacific SV prevention and intervention strategies must specifically engage the Pacific SV workforce in this area if it is to make headway on SV elimination strategies. Very little specific Pacific information on consent exists beyond legalistic definitions. Issues of consent in sex speaks directly to Pacific taboos and moral judgements around sex, sex education, sexual orientation, and sexuality, informed by contemporary Pacific cultural and faith-based understandings of tapu and vā. Literature review, questionnaire and talanoa findings suggest that probing consent in Pacific spaces raises personally uncomfortable and thus frequently avoided discussions for the Pacific SV workforce. This means a lot of care must be employed when engaging Pacific peoples in the SV workforce in conversations about the ambiguities, ambivalences, slippages, and contradictions of consent and sex within universalised definitions. Being aware of and having opportunity to debate these ambiguities can be confronting but can also create opportunities to address judgemental practices and community fears of confidentiality breaches, offering the potential to improve one's inclusive practice and professional standards.

4.3.4 To address the lack of detailed information available on Pacific SV to support the Pacific SV workforce in their work with Pacific peoples affected by SV, there is a need for a 'new Pacific acumen' that can recast and reimagine 'the known' (i.e., the evidence-based, anecdotal, and intuitive collective knowledge held) of why there is this lack and what to do about it (Peteru, 2012; Mitaera in Pasefika Proud, 2020). There is an urgent need to support nuanced research and evaluation that can adequately fill this lack. Questionnaire and talanoa participants acknowledge the need for more research that can expand on the baseline data gathered by this project.

5.0 Discussion

The aim of this discussion section is not to provide an exhaustive analysis of the four areas below, but rather to signal their complexities and importance to the project's overall research question: "what are the experiences and support needs of Pacific peoples in the SV workforce"?

These four areas are discussed in no order of priority as all are considered of equal importance.

Prioritising Pacific peoples and Pacific values, models, and frameworks in SV workforce development

Even though the project's primary research question sought to narrow the focus of this study to just "Pacific peoples in the SV workforce", the notion of a "Pacific sexual violence workforce" invites some wriggle room for including all practitioners, regardless of ethnicity, who work with Pacific peoples affected by SV. The question is whether we[71] ought to assume this wider interpretation of the 'Pacific SV workforce' and what the implications might be if we did or did not. What do we stand to gain? The issues within this problem of definition are complex and are both political and practical. One way to answer these questions is to ask further questions: Is the ultimate goal to make Pacific peoples working in the SV sector competent to work with all peoples affected by SV, not just with Pacific peoples? Or is it to limit Pacific peoples to working only with Pacific SV clients? The answer to these questions would seem to be a no-brainer. Developing a workforce that can work across population groups would seem the most obvious cost-effective choice for policymakers. But is it? Training an entire workforce in the cultural competencies of all of Aotearoa NZ's diverse cultural groups is not practical. There is need for a compromise.

The compromise is to provide the workforce and clients with a choice and for the sector to manage the practicalities of having that choice made available. Given that respondents to our baseline questionnaire indicated that a high percentage of their total clientele lists were mostly of non-Pacific ethnicity, this suggests that not only do Pacific SV clients work with non-Pacific SV practitioners, but Pacific SV practitioners have competencies that can service Pacific and non-Pacific SV clients. The sector invests time and resources into building Pacific-specific values, models, and frameworks for use by the SV workforce, and on targeting Pacific SV workforce development needs, because despite Pacific SV reporting rates being disproportionately low, Pacific victimisation rates are disproportionately high. And, because Pacific peoples are reluctant – even within the Pacific SV workforce – to participate in Pacific SV research, even Pacific SV workforce related research, there is little to no evidence-based information on how we can best reduce these victimisation or SV incidence rates.

The point is that in order for the SV workforce to work effectively with Pacific peoples affected by SV trauma, it needs to have as many SV workers with prior Pacific cultural

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[71] The 'we' here refers to Aotearoa New Zealand generally and to the SV sector and Pacific SV workforce, including SV researchers and evaluators, specifically.

knowledge and skills, who can communicate with Pacific SV clients effectively, read Pacific cultural contexts well, and advocate for short-term and long-term Pacific SV worker needs, as possible. This prior knowledge and skills are most likely to be found within peoples of Pacific ethnicity. Theoretically, when this prior knowledge is combined with specific SV training, the Pacific SV workforce is more likely not to cause offence to Pacific peoples, families, and communities affected by SV, and to be able to get them to trust the system, or at least to seek help and gain the support they need. However, because Pacific communities in Aotearoa NZ are small and well-connected, and SV carries significant personal and family trauma, stigma, and shame, Pacific peoples are known to be naturally cautious about accessing Pacific SV services or working with Pacific SV practitioners, for fear that their story will get out, notwithstanding awareness of professional confidentiality principles. While no empirical evidence exists yet on the specific reasons why Pacific SV survivors and families choose not to access Pacific SV services or to work with a Pacific SV practitioner, anecdotal evidence suggests that this fear forms a large part of why they don't comprise a larger part of Pacific SV worker clientele lists. Our questionnaire findings suggest that the longer the Pacific SV practitioner remains in the SV field, however, the more likely it is that they will gain a reputation for working well with Pacific clients and increase the percentage of Pacific clientele they work with. Meeting the diverse needs of the many different groups within pan-Pacific and ethnic-specific Pacific groups also means that even among Pacific practitioners there is a need to ensure that the Pacific SV workforce is representative of those who have prior knowledge and experience working with marginal or smaller Pacific populations within the SV field, such as with Pacific males, Pacific youth, and Pacific LGBTQ+ peoples.

Privileging Pacific languages and concepts

Pacific language terms and concepts give visibility to Pacific paradigms, models, and frameworks of care. The power of seeing Pacific language terms or names such as tapu, vā and Fonofale as used in policy documents or sector practice frameworks cannot be underestimated. Dame Tariana Turia and Dr Pita Sharples, in their 2011 International Day of World Indigenous Peoples speech, cited the Māori saying "ko taku reo taku ohooho, ko taku reo taku mapihi mauria" (My language is my awakening, my language is the window to my soul"). This framed their support of the promotion of Pasifika languages, their use and maintenance, in Aotearoa NZ.[72]

Privileging Pacific indigenous languages and concepts in Aotearoa NZ involves recognising that within Pacific policies, protocols, models, and frameworks there is a need to consciously avoid homogenising cultural differences when developing pan-Pacific approaches to SV prevention and crisis intervention. Languaging strategies that enables opportunities for Pacific indigenous language terms and concepts from the smaller Pacific groups to be visible, including them deliberately in policy statements or frameworks, for example, can go a long way to recognising that the Pacific population of Aotearoa NZ is made up of a wide range of peoples beyond the six larger ethnic groups, i.e., beyond Samoan, Tongan, Cook Islands, Niuean, Fijian and Tokelauan peoples. Without this conscious or deliberate effort there is a significant risk that these pan-

72 https://pacific.scoop.co.nz/2011/08/my-language-is-the-window-to-my-soul/

Pacific frameworks will further isolate and marginalise these smaller Pacific ethnic populations and hinder their access to the help they need.

'Recasting and reimagining 'the known' of Pacific SV

Jean Mitaera's (2020) call to revisit what we know of Pacific family violence and SV and to recast and reimagine that knowledge anew echoes Carmel Peteru's (2012) call for a new Pacific acumen that can break the silence, stigma and shame surrounding sexual violence and abuse within Pacific families and communities. Both these Pacific leaders signal a desire for an entire re-evaluation not only of what we know about Pacific SV, but how we know it and what we do about it. How do we access, report, and consume information about Pacific SV? They call to the Pacific SV workforce to "unshackle [them]selves" (Mitaera, 2020, p.6) and to probe the known of Pacific SV in new ways, probing what is personally, culturally, and professionally inspiring and uncomfortable, and asking what it is that makes it so?

Two such topics in need of this deeper and careful probing might be, for example, one, that of what sex and consent mean in different Pacific spaces, and two, that of what to make of the inextricable relationship between Pacific indigenous values and Pacific faith-based values when interpreting the practice of vā in contemporary Pacific models of care? Probing these questions may lead to constructive reflections on the historical and structural contexts and impacts of the relationship between:

(a) Christianity and colonialism in the Pacific, and the neo-colonial effects of that relationship on present-day Pacific sexual attitudes, values, judgements, consent, and control practices in Aotearoa NZ,
(b) Liberal/neoliberal democratic state policies and practices and Pacific SV systems, models and frameworks of restorative justice, care, and healing, and
(c) Māori as tangata whenua and Pasifika as tauiwi working separately and together in the prevention and elimination of SV in Aotearoa NZ.

Each of these areas if probed deeply can offer resources for recasting and reimagining 'the known' of Pacific SV in Aotearoa NZ.

Privileging Pacific research and evaluation methodologies in Pacific SV research

This is the first research of its kind into the specifics of the Pacific SV workforce of Aotearoa NZ. Its findings recognise the important work of those who contributed to building what we know now about Pacific health beliefs, Pacific values and practices, and Pacific models and frameworks of care, as documented in the literature review. The knowledge base discussed in this report has helped guide the work of current Pacific SV workers and informs the strategic directions of the emerging Pacific SV workforce network currently coordinated by TOAH-NNEST's Pacific steering group at the time of writing this report. But more Pacific SV research data is needed.

Our findings support the privileging of Pacific research and evaluation methodologies, such as the Talanoa methodology or Teu le vā approach to Pacific SV research and evaluation. Within these Pacific methodologies are embedded Pacific epistemological and ontological frameworks, Pacific ways of knowing, being, seeing and doing. Through

the use of Pacific indigenous language terms, these Pacific ways of knowing, being, seeing, and doing are made visible. The rise and presence of Pacific research methodologies in Aotearoa NZ speaks to a need to understand cultural and ethnic nuance in universalised or standardised research ethics, methods and/or methodological approaches. The main goal of Pacific research methodologies is to ensure that in designing and doing research with Pacific peoples, especially within highly sensitive and trauma-filled fields like SV, that the tools available and used can and do protect them from (further) harm (New Zealand Health Research Council, 2014).

6.0 Recommendations

In order of priority the researchers recommend:

6.1 The emerging national Pacific SV workforce network be supported to bring the Pacific SV workforce together from across the SV sector and Aotearoa NZ, to advocate on behalf of the workforce and to explore the viability of a Pacific SV multi-service agency.

6.2 The findings of this research report be used to inform SV sector planning and investment in Pacific SV workforce development, bearing in mind the significant work already carried out by the Pacific health and Pacific family violence sectors on overlapping Pacific workforce support needs.

6.3 A review be undertaken of the impacts and/or effects of relevant state funding, reporting, evidence-building systems and evaluation processes on the productivity and retention of Pacific SV practitioners and on their potential to re-traumatise Pacific SV survivors.

6.4 The SV sector invest in growing Pacific cultural and clinical supervision expertise, Pacific SV workforce career and/or professional development and/or leadership pathways and recognises the contribution that informal Pacific networks play in supporting Pacific practitioner self-care and workforce retention strategies.

6.5 Because of the high numbers of male Pacific sexual violence offenders, the paucity of information or knowledge on the support needs of Pacific LGBTQ+ peoples and Pacific youth affected by sexual violence, and on the positive value associated with peer support services, more work is needed by the SV sector to attract more Pacific males, youth and LGBTQ+ persons to the SV workforce.

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8.0 Appendices

8.1 Copy of Online Questionnaire

8.2 Talanoa Topic Guide

8.3 Participant Information Sheet

8.4 Literature review search methodology flow-chart

8.5 Copy of Pasifika Sexual Violence Workforce Submission on the National Strategy for Family Violence and Sexual Violence

Appendix 8.1 Copy of Online Questionnaire

Environmental Survey of the Pacific Sexual Violence Workforce

Survey Flow
Standard: Introduction (1 Question)
Standard: Section 1 (1 Question)
Block: Demographics (5 Questions)
Standard: Section 2 (1 Question)
Standard: Employment History (7 Questions)
Standard: Employment History 2 (6 Questions)
Standard: Section 3 (1 Question)
Standard: Pacific Clientele (4 Questions)
Standard: Section 4 (1 Question)
Standard: Pacific Values, Beliefs, Practices, Models, and Frameworks (2 Questions)
Standard: Section 5 (1 Question)
Standard: Workforce Support (2 Questions)
Standard: Section 6 (1 Question)
Standard: Personal Work Goals and Aspirations (2 Questions)
Standard: Section 7 (1 Question)
Standard: Any Closing Comments (1 Question)
Standard: Thank you & Reminder about the Talanoa Sessions (1 Question)

Start of Block: Introduction

Introduction Talofa, Mālō e lelei, Kia orana, Fakalofa lahi atu, Bula, Taloha ni ... and Warm Pacific Greetings:

This online questionnaire aims to gather information on Aotearoa New Zealand's Pacific Sexual Violence (PSV) workforce. There is currently no systematically collected information on the PSV workforce. This questionnaire will help us fill that gap.

We invite only those participants who:

Are **Currently Employed**, or Have been **Employed in the Past** to work with Pacific peoples affected by sexual violence, to complete this questionnaire.

If you have received the link to this questionnaire from more than one source, **PLEASE ONLY COMPLETE AND SUBMIT THE QUESTIONNAIRE ONCE**.

The questionnaire **CANNOT BE SAVED** or **RETURNED TO**, and will end on **FRI 8 OCTOBER.**

The questionnaire is part of a MSD-funded study on the PSV workforce. The PSV workforce is an important resource for providing culturally responsive support. This study seeks to understand who constitutes the PSV workforce and how that workforce can be best supported.

The attached pdf of the study's information sheet provides more information on the

study. See the Information Sheet attached.

The study involves collecting data from the Pacific sexual violence workforce using: a survey questionnaire (this one), qualitative individual and group talanoa sessions, and organisation site observations.

This online questionnaire explores **seven (7) topic areas**. These relate to:
1. Demographics (gender, age, ethnicity, etc.)
2. Employment history (current or past roles, number of years working for the sector, agency employed with, etc.)
3. Pacific clientele
4. Pacific values, beliefs, practices, models and frameworks
5. Workforce support
6. Personal work goals and aspirations
7. Any closing comments.

The survey should take you about 15 minutes to complete.

Please note that by starting this questionnaire, you will be consenting to participate in this arm of our PSV workforce research.

Your participation in this questionnaire is completely anonymous.

We are truly grateful for your participation. If you have any questions or would like to participate in a talanoa session, or just have a general question about the study, please contact the principal investigator - Associate Professor Tamasailau Suaalii-Sauni at email: s.suaalii-sauni@auckland.ac.nz; or project research assistant Mrs Sarah McRobie at email: s.mcrobie@auckland.ac.nz.

End of Block: Introduction

Start of Block: Section 1

Section 1 DEMOGRAPHICS

End of Block: Section 1
Start of Block: Demographics

Q1
Gender
(Please identify which gender category you identify with)

- ○ Male (1)
- ○ Female (2)
- ○ Non-binary / third gender (3)
- ○ Other, please specify below (4) _____

Q2 **Age group**
(Please identify which age group you belong to)

- ○ 16 - 17 years (23)
- ○ 18 - 25 years (24)
- ○ 26 - 30 years (25)
- ○ 31 - 35 years (26)
- ○ 36 - 40 years (27)
- ○ 41 - 45 years (28)
- ○ 46 - 50 years (29)
- ○ 51 - 55 years (30)
- ○ 56 - 60 years (31)
- ○ 61+ years (32)

Q3
Ethnicity/ies
(Please identify which ethnic group(s) you identify with)

- ☐ Cook Islands (1)
- ☐ Fijian Indian (Indo-Fijian) (6)
- ☐ i-Taukei Fijian (5)
- ☐ Kiribati (9)
- ☐ Niue (3)
- ☐ ni-Vanuatu (10)
- ☐ Samoa (2)
- ☐ Solomon Islands (11)
- ☐ Tokelau (8)
- ☐ Tonga (4)
- ☐ Tuvalu (7)

☐ Mixed ethnicities: please specify below (13)
_____

☐ Other: please specify below (14)
_____

Q4
Geographical place of residence
(Please identify your current geographical place of residence)

☐ Auckland Central (17)
☐ Auckland East (4)
☐ Auckland Northshore (2)
☐ Auckland South (5)
☐ Auckland West (3)
☐ Christchurch (13)
☐ Dunedin (14)
☐ Gisborne (8)
☐ Hamilton (6)
☐ Napier (9)
☐ New Plymouth (11)
☐ Northland (1)
☐ Tauranga (7)
☐ Wellington (12)
☐ Whanganui (10)
☐ Other: Please specify below (15)
_____

Q5
Education
(Please identify the highest qualification or level of schooling you have completed)

○ A secondary or high school completion certificate (1)

○ A secondary or high school qualification (e.g. High School Bursary, NCEA pass, merit or above levels) (2)

○ A tertiary level certificate or diploma (3)

○ A tertiary level undergraduate degree (e.g. a Bachelors degree) (4)

○ A tertiary level graduate degree (e.g. a Bachelor of Honours degree) (5)

○ A Masters level degree (6)

○ A Doctoral level degree (7)

○ Other, please specify: (8) _____

End of Block: Demographics
Start of Block: Section 2

Section 2 EMPLOYMENT HISTORY
End of Block: Section 2

Start of Block: Employment History

Q6 Are you currently employed by an agency that provides support to Pacific peoples affected by sexual violence? (YOU MUST ANSWER this question)

○ Yes (1)

○ No (2)

Q7 Please identify the type of agency you work for:

☐ Government agency working with Pacific peoples affected by sexual violence (e.g. Ministry of Social Development). Please specify or name below: (1) _____

☐ Non-Government agency working with Pacific peoples affected by sexual violence (e.g. Specialist service or private practice). Please specify or name below: (2) _____

Q8
Please identify the geographical location of your main workplace where you carry out your work with Pacific peoples affected by sexual violence.

☐ Auckland Central (16)

- [ ] Auckland East (4)
- [ ] Auckland Northshore (2)
- [ ] Auckland South (5)
- [ ] Auckland West (3)
- [ ] Christchurch (13)
- [ ] Dunedin (14)
- [ ] Hamilton (6)
- [ ] Gisborne (8)
- [ ] Napier (9)
- [ ] New Plymouth (11)
- [ ] Northland (1)
- [ ] Tauranga (7)
- [ ] Wellington (12)
- [ ] Whanganui (10)
- [ ] Other: Please specify below (15)

_____

Q9 Please identify your current role (roles) or position (positions) in your workplace.

- [ ] Church leader (15)
- [ ] Community support worker (14)
- [ ] Counsellor (7)
- [ ] General Practitioner (GP - medical doctor) (18)
- [ ] Nurse (17)
- [ ] Pastoral support (9)
- [ ] Peer support (8)

- [ ] Psychiatrist (13)
- [ ] Psychologist (12)
- [ ] Psychotherapist (11)
- [ ] Social worker (6)
- [ ] Translator/Interpreter (16)
- [ ] Youth leader (10)
- [ ] Other, please specify below (19)

_____

Q10
Years employed TO DATE at your current workplace

(Please identify the appropriate year band)

- ○ Less than a year (1)
- ○ 1 - 2 years (2)
- ○ 3 - 4 years (3)
- ○ 5 - 6 years (4)
- ○ 7 - 8 years (5)
- ○ 9 - 10 years (6)
- ○ 11 - 12 years (7)
- ○ 13 - 14 years (8)
- ○ 15 - 16 years (9)
- ○ 17 - 18 years (10)
- ○ Other, please specify below (12) _____

Q11
In TOTAL how many years overall have you been employed to work with Pacific peoples affected by sexual violence?

(Please note that 'total time' is inclusive of different roles and/or agencies you have held in the SV workforce, but not including time unemployed or working in a different

sector).

- ○ Less than a year (1)
- ○ 1 - 3 years (2)
- ○ 4 - 6 years (3)
- ○ 7 - 9 years (4)
- ○ 10 - 12 years (5)
- ○ 13 - 15 years (6)
- ○ 16 - 17 years (7)
- ○ 18 - 19 years (8)
- ○ 20 years + (Please specify below) (9) _____

Q12
Please identify the reason(s) why you continue to work in the Pacific sexual violence workforce.

- ☐ The workload is appropriate (8)
- ☐ I get along with my boss(es) (9)
- ☐ I get along with my work colleagues (10)
- ☐ I want to contribute to making a positive difference to those affected by sexual violence in the Pacific community (11)
- ☐ Pay/salary was good (12)
- ☐ Hours of work is appropriate (13)
- ☐ Other, please specify below (14)

_____

End of Block: Employment History

Start of Block: Employment History 2

Q13 Please identify the type of agency (or agencies) you worked for:

○ Government agency working with Pacific people affected by sexual violence (e.g. Ministry of Social Development). Please specify below: (1)
_____

○ Non-Government agency working with Pacific people affected by sexual violence (e.g. Specialist service or private practice). Please specify below: (2)
_____

Q14
Please identify the geographical location (or locations) of the main workplace (or workplaces) where you carried out your work with Pacific people affected by sexual violence.

- ☐ Auckland Central (16)
- ☐ Auckland East (4)
- ☐ Auckland Northshore (2)
- ☐ Auckland South (5)
- ☐ Auckland West (3)
- ☐ Christchurch (13)
- ☐ Dunedin (14)
- ☐ Gisborne (8)
- ☐ Hamilton (6)
- ☐ Napier (9)
- ☐ New Plymouth (11)
- ☐ Northland (1)
- ☐ Tauranga (7)
- ☐ Wellington (12)
- ☐ Whanganui (10)
- ☐ Other: Please specify below (15)

_____

Q15 Please identify the role (roles) or position (positions) you held in the workplace (or workplaces) identified at Q.14.

- [ ] Church leader (15)
- [ ] Community support worker (14)
- [ ] Counsellor (7)
- [ ] General Practitioner (GP - medical doctor) (18)
- [ ] Nurse (17)
- [ ] Pastoral support (9)
- [ ] Peer support (8)
- [ ] Psychologist (12)
- [ ] Psychotherapist (11)
- [ ] Psychiatrist (13)
- [ ] Social worker (6)
- [ ] Translator/Interpreter (16)
- [ ] Youth leader (10)
- [ ] Other, please specify below: (19)

_____

Q16
In TOTAL how many years overall did you work in the Pacific sexual violence workforce?

(Please note that the total time is inclusive of different roles and/or agencies in the SV workforce, but not including time unemployed or working in a different sector.)

- ○ Less than a year (1)
- ○ 1 - 3 years (2)
- ○ 4 - 6 years (3)
- ○ 7 - 9 years (4)

- ○ 10 - 12 years (5)
- ○ 13 - 15 years (6)
- ○ 16 - 17 years (7)
- ○ 18 - 19 years (8)
- ○ 20 years + (Please specify below) (9) _____

Q17 Please state the year you left the Pacific sexual violence workforce.
_____

Q18
Please identify the reason(s) why you left the Pacific sexual violence workforce.

- ☐ Workload issues (including burn-out and/or compassion fatigue) (8)
- ☐ I did not get along with my boss(es) (9)
- ☐ I did not get along with my work colleagues (10)
- ☐ Cultural safety and/or competency issues (11)
- ☐ Professional safety and/or competency issues (12)
- ☐ Pay/salary was not good (13)
- ☐ Worked long hours (14)
- ☐ Personal (including family) reasons (15)
- ☐ Other, please specify below: (16)

_____

End of Block: Employment History 2

Start of Block: Section 3
Section 3 PACIFIC CLIENTELE

Start of Block: Pacific Clientele

Q19
Of your current clientele, what percentage (%) are of at least one Pacific ethnicity?

- ○ Less than 10% (12)

- ○ 11 - 20% (13)
- ○ 21 - 30% (14)
- ○ 31 - 40% (15)
- ○ 41 - 50% (16)
- ○ 51 - 60% (17)
- ○ 61 - 70% (18)
- ○ 71 - 80% (19)
- ○ 81 - 90% (20)
- ○ 91 - 100% (21)

Q20
Which of the following ethnic group/s do your current Pacific clients identify with? (Please state)

- ☐ Cook Islands (3)
- ☐ Fijian Indian (Indo-Fijian) (8)
- ☐ i-Kiribati (10)
- ☐ iTaukei Fijian (6)
- ☐ Niuean (4)
- ☐ ni-Vanuatu (11)
- ☐ Samoan (1)
- ☐ Solomon Islands (12)
- ☐ Tokelauan (5)
- ☐ Tongan (2)
- ☐ Tuvaluan (9)
- ☐ Mixed ethnicities (Please specify below) (13)

_____

☐ Other (Please specify below) (16)
_____

Q21 Throughout your time in the sexual violence workforce, what percentage (%) of your total clientele were of at least one Pacific ethnicity?

- ○ Less than 10% (12)
- ○ 11 - 20% (13)
- ○ 21 - 30% (14)
- ○ 31 - 40% (15)
- ○ 41 - 50% (16)
- ○ 51 - 60% (17)
- ○ 61 - 70% (18)
- ○ 71 - 80% (19)
- ○ 81 - 90% (20)
- ○ 91 - 100% (21)

Q22
Throughout your time in the sexual violence workforce, which Pacific ethnic groups made up the bulk of your total clientele? (Please state)

- ☐ Cook Islands (3)
- ☐ Fijian Indian (Indo-Fijian) (8)
- ☐ i-Kiribati (10)
- ☐ iTaukei Fijian (6)
- ☐ Niuean (4)
- ☐ ni-Vanuatu (11)
- ☐ Samoan (1)
- ☐ Solomon Islands (12)
- ☐ Tokelauan (5)

☐ Tongan (2)

☐ Tuvaluan (9)

☐ Mixed ethnicities (Please specify below) (13)
_____

☐ Other (Please specify below) (16)
_____

End of Block: Pacific Clientele

Start of Block: Section 4

Section 4 Pacific Values, Beliefs, Practices, Models and Frameworks
End of Block: Section 4

Start of Block: Pacific Values, Beliefs, Practices, Models, and Frameworks
Q23 Please state if you intentionally use or used Pacific cultural or ethnic values, practices and/or protocols to inform your work with Pacific peoples affected by sexual violence?

○ If "Yes", please specify or name these below (7)
_____

○ If "No", please state reason/s why below (8)
_____

Q24 Please state if you use or used Pacific practice models and/or frameworks?

○ If "Yes", please state the Pacific model(s) and/or framework(s) you use below (5) _____

○ If "No", please state the non-Pacific model(s) you use and/or framework(s) you use below (7) _____

End of Block: Pacific Values, Beliefs, Practices, Models, and Frameworks

Start of Block: Section 5
Section 5 WORKFORCE SUPPORT

End of Block: Section 5
Start of Block: Workforce Support

Q25 What kinds of support are or were available to you to carry out your services to Pacific clients?

☐ Cultural (e.g. supervision, peer support, referral services support, etc.). Please specify below: (5) _____

☐ Professional (e.g. supervision, peer support, referral services support, membership in a disciplinary or interdisciplinary associations such as Pasifika Counsellors Collective, etc.). Please specify below: (4) _____

☐ Religious (e.g. pastoral support). Please specify below: (6) _____

☐ Youth (e.g. supervision, peer support, referral services support, etc.). Please specify below: (7) _____

☐ Other, please specify below: (8) _____

Q26 Please list up to three agencies (outside your own) that you work closely with to service the needs of your Pacific clients?

○ Service One: Please specify in the box. (4) _____

○ Service Two: Please specify in the box. (5) _____

○ Service Three: Please specify in the box. (6) _____

○ Not Applicable (9) _____

End of Block: Workforce Support

Start of Block: Section 6
Section 6 PERSONAL WORK GOALS AND ASPIRATIONS

End of Block: Section 6
Start of Block: Personal Work Goals and Aspirations

Q27 What are your work aspirations or goals for the future?
_____
_____
_____
_____
_____

Q28 Identify any barriers that have prevented or are preventing you from achieving your aspirations or goals.

☐ Financial constraints (5)

☐ Personal circumstances (6)

☐ Lack of qualifications (7)

☐ Other, please specify below: (8)

_____

☐ Not Applicable (11)

End of Block: Personal Work Goals and Aspirations

Start of Block: Section 7
Section 7 CLOSING COMMENTS

End of Block: Section 7
Start of Block: Any Closing Comments

Q29 Finally, if you have any closing comments you would like to share, please provide them here.

_____

End of Block: Any Closing Comments

Start of Block: Thank you & Reminder about the Talanoa Sessions

Thanks, Faafetai, Mālō ʻaupito, Meitaki maata, Fakaue lahi, Vinaka vaka levu, Thank you for your participation! If you are keen to also participate in the individual or group talanoa phase of our study please contact our principal investigator, Associate Professor Tamasailau Suaalii-Sauni at email: s.suaalii-sauni@auckland.ac.nz; or project research assistant, Mrs Sarah McRobie at email: s.mcrobie@auckland.ac.nz. The Information Sheet provides more information on our talanoa sessions.

End of Block: Thank you & Reminder about the Talanoa Sessions

Appendix 8.2 Talanoa Topic Guide

MSD SEXUAL VIOLENCE PROJECT TALANOA GUIDE

Fa'afeiloaiga – Introduction
Faafetai mo le avanoa: Introduction and establishing the va

- Warm Pacific greetings to you. We firstly thank you and appreciate you for your time that you have given to us for this talanoa. More research in the area of Pacific sexual violence is needed and therefore acknowledge your expertise and contribution to this". The aims of this research are….
- Your rights as a participant are…

(a). Participant background

- Please tell us about you and your Pacific background, your birthplace, migration story and education"

(b). Working background and experience

- "I'm interested to hear about your work experiences. What contributed to you choosing to work in this sexual violence area?"
- "How did this influence your drive to stay in this work?"
- "I'm curious about what factors contributed to you leaving your workplace?" (ONLY IF LEFT JOB)

Have you done any unpaid or volunteer work for the sector? "If yes, tell me about your experience with your unpaid work or your voluntary work"

-

(b.1) Practice approach:

- "I'm interested in your practice approach in working with Pacific peoples affected by sexual violence.
- What models of care do you use – Pacific, traditional, western, integrated approaches or other?"
- "Tell me more about your own Pacific values and whether you incorporate these into your work practice with Pacific peoples affected by sexual violence? (make sure they name and unpack these values in more details)
- If so how? If not, what are your reasons for this?"
- SUPPORT TO IMPLEMENT PRACTICE APPROACH!
- "Did you receive any support from your workplace when you applied your cultural perspectives and your (name?) Pacific models of care? If so, what type/s of support?

○ If not, what professional support and care would you have needed from your workplace? to enable you to practice in a culturally responsive way?"

○ Can you comment on the lack of support and why? And how did you get around this without this support?

○

(b.2) Experiences in: sexual violence trauma care, recovery and resilience models;

○ Some research literature talk about compassion fatigue, trauma transference and worker burnout when working with sexual violence or any trauma.

○ Have you experienced this in working with Pacific peoples affected by sexual violence?

○ If yes, we are wondering how did you get by, and what were your coping strategies?

○ If no, how did you take care of yourself?"

○ "What would you like to see happen differently, in order that our Pacific peoples affected by sexual violence can access services in which they can be further supported?".

○ Inviting them to talk about:

- Access to ACC services in which our Pacific peoples are not aware of;
- Police EVU services in which Pacific children and young people are interviewed and evidence used in court
- Court processes for our Pacific peoples for victims/survivors and offenders (as sexual violence happens in our families)
- Sector workforce legal support, such as EVU processes – Have you experienced any stress over having to access legal aid or other appropriate legal advice or representation for their clients?
    - Have you experienced giving expert witness support in support of a case they you were working on? What was your experienced like?

(c) Career or workforce aspirations: (Probe for context. Engage in non-leading reciprocal storying).

○ "Thank you for sharing your genuine and honest experiences in working with our Pacific people and sexual violence.

○ As a (status or current role), 'Do you have any work goals and aspirations personally or in terms of working within the SV area'?

○ If so, what would these be?

(d) Any final comments: (This offers the participant an opportunity to make any final or overarching comments about the research topic and/or process).

- Lastly, as a (status or current role), where would you see this service (the Pacific sexual violence workforce) within the next five years?

Is there anything else you would like to share with us that will be of value to this research investigation?

To end the talanoa, the facilitator will round off with thank you comments and an invitation to any participant who may wish to have their workplace involved in the site observation arm of the study to have a quick chat with her/him about this afterwards.

School of Social Sciences
Building 435
58 Symonds Street
Auckland
Faculty of Arts
University of Auckland
Private Bag 92019
Auckland 1142
NEW ZEALAND

Date: 30 April 2021

PARTICIPANT INFORMATION SHEET
(FOR ALL PARTICIPANTS – INCLUDING ZOOM PARTICIPANTS - AND SITE MANAGERS)

Pacific Sexual Violence Workforce Research Project
(An 'All of Government' [AOG], Ministry of Social Development [MSD] funded project)

Research Team:

- ***Principal Investigator***: Associate Tamasailau Suaalii-Sauni, Faculty of Arts,
- University of Auckland ("UoA")
- ***Qualitative Lead***: Dr Fuafiva Fa'alau, Faculty of Medical and Health Sciences, UoA
- ***Qualitative team & Pacific Counselling and Social Work Experts***: Dr Analosa Veukiso-Ulugia and Mrs Sarah McRobie, Faculty of Education and Social Work, UoA
- ***Survey Lead***: Dr David Fa'avae, University of Waikato
- ***Community Lead***: Pastor Dr. Paul Siope, Tapasā mo Aiga Inc., Auckland, New Zealand

***

Introduction Warm Pacific greetings. Our Pacific Sexual Violence (SV) Workforce Research Project team are affiliated to the University of Auckland, University of Waikato and Tapasā mo Aiga Inc. We have been funded by the Ministry of Social Development (MSD) to carry out research on the Pacific SV workforce of Aotearoa New Zealand.

Invitation and study description
As a member of the Pacific SV workforce of Aotearoa New Zealand, we would like to invite you to take part in this study.

The study aims to describe:

1. who the Pacific SV workforce of Aotearoa New Zealand are (in terms of demographic profiles and different workforce positions or roles, etc.),
2. where you are located (geographically and within different professional bodies and/or workplaces),
3. your experiences and perspectives of providing support to Pacific peoples affected by sexual violence in Aotearoa New Zealand; and
4. your different needs and aspirations as a workforce.

What would be involved?
We would like you to participate in one or more of the following:

- an online survey, and/or
- an individual or group talanoa session, and/or
- a site observation exercise.

What's the online survey questionnaire about and what would I need to do?
This is an English language survey that requires approximately 15 minutes of your time to fill out.

We will first send an email invitation inviting you to participate in our study to the executive officers and/or secretaries of the seven key organisations or professional association bodies below. They will send the email invitation onto you. These organisations or networks are:

- Te Ohaakii a Hine – National Network Ending Sexual Violence Together (TOAH-NNEST's) Pacific Steering Group
- NZ Christian Counsellors Association (NZCCA)
- NZ Association of Psychotherapists (NZAP)
- Pasifika Counsellors Collective (PCC)
- NZ Psychological Society (NZPsP)
- Aotearoa NZ Association of Social Workers (ANZASW)
- Male Survivors of Aotearoa

Going this route (through the 3rd party rather than by making direct contact with you) helps us to to ensure your anonymity. The invitation will have the online survey link. Do get in contact with the above groups if you hear of this survey and want to participate but haven't received the email invitation and link.

If you decide to participate in the online survey questionnaire, you will just need to follow the instructions and then press 'submit' once completed.

Because the survey is anonymous you will not need to give us your name or any other identifying information.

The survey will ask you to fill out seven (7) different question areas. These areas are:

(a) Demographic related questions (4 Questions)
(b) Employment History related questions (7 or 6 Questions, depending on whether you answer "yes" or "no" to question six)
(c) Pacific clientele related questions (4 Questions)

(d) Pacific values, beliefs, practices, models and frameworks related questions (2 Questions)
(e) Workforce support related questions (2 Questions)
(f) Personal work goals and aspirations related questions (2 Questions)
(g) Open-ended closing comment related question (1 Question).

The purpose of the survey is to provide baseline quantitative data on the current number, make-up and spread of the Pacific SV workforce in Aotearoa New Zealand. This means we are looking for as many Pacific SV workers to complete the survey as possible.
Once you begin the online survey, your informed consent to participate will be assumed. Once your completed online survey has been submitted we will not be able to withdraw it from the study.

The survey link will be sent out to the above networks to send onto potential participants mid-July 2021 and run for a month.

What are the talanoa sessions about and what would I need to do?
We will run individual and group talanoa sessions. The individual talanoa sessions will be offered to everyone who wants to participate in a talanoa session.

If a service has more than one Pacific SV worker, we will ask you individually if you wish to be part of a group talanoa session together. The group talanoa sessions will require at least two participants to be viable. And, to ensure that a range of different services can participate in the talanoa sessions, we are limiting the maximum number of participants in a group talanoa session to four (4) members.

The individual and group talanoa sessions offer you as participants the opportunity to talk (talanoa) to us directly and in more depth about your work as a Pacific SV worker in Aotearoa New Zealand. Once you make contact with us, one of our team will organise to talk with you either on your own (if you prefer an individual talanoa), or as part of a group with others in your workplace (if you and they prefer).

The talanoa sessions will give us the opportunity to probe three key themes:
(a) Experiences and perspectives of working with Pacific peoples affected by SV, and of the kind of supports received to carry out this work;
(b) Experiences with and perspectives on the Pacific values, beliefs, practices, models and frameworks used in your work with Pacific peoples affected by SV, and
(c) Personal work goals and aspirations, and any barriers to achieving those.

Our talanoa sessions will be held predominantly in the English langauge, but our researchers are fluent in the Samoan and Tongan languages, should you prefer to speak in Samoan or Tongan. We can also access other Pacific langauge facilitators or translators if necessary.
We are looking for **up to 30** people maximum to join our talanoa sessions. Members of the group talanoa sessions will be counted individually.
We are looking to capture a range of the different roles and demographic profiles among our talanoa participants. This means that we will try to capture a range of

gender voices, age groups, Pacific ethnicites, workforce roles, geographical locations and service types.
We will be recruiting talanoa participants using (a) a general invitation email delivered by the seven network/organisation groups mentioned above, and (b) the deliberate 'snowballing' method. 'Snowballing' means that after conducting an individual or group talanoa with you, we will ask you to pass on our email invitation to other potential participants.
If, after reading this information sheet, you decide to participate in a talanoa session, and you live in the Auckland area, we will need to know if you wish to do an individual talanoa session or a group one, in person or via zoom. If you live outside the Auckland area, because of budgetary constraints we may only be able to conduct talanoa sessions via zoom with you.
Once we make contact with you we will set up a time to meet, either in person (for Aucklanders only), or via zoom.
If you would like us to meet with you in person, we can meet at your workplace or somewhere off site but private enough to have a confidential conversation. If via zoom, we will send you a zoom invite, with IP address and password.
Zoom talanoa sessions will be audio-recorded not video-recorded, and audio-recorded using a separate audio-recording device places next to the zooming device. The consent process for talanoa sessions conducted via zoom will follow the same procedures as that for in person talanoa sessions.
The **individual talanoa session** will only **take one (1) hour**. The **group talanoa session** is likely to take **a couple of hours (2 hours)**. As a token of our appreciation we have organised to give you a $50 voucher as a small token of our thanks and appreciation for sharing with us your knowledge, time and expertise.
To accurately record your talanoa session, we will ask for your express permission to audio-record it.
If you participate in an individual or group talanoa session you can withdraw yourself from the individual or group talanoa session at any time throughout the course of the talanoa session, and you may refuse to answer any questions, without having to give any reason. All audio-recorded talanoa sessions will be transcribed and information relating to you will be de-identified (i.e. all names and other identifying information is removed and coded). However, once all talanoa data has been de-identified and your information is integrated into talanoa data summaries, while your name or any other identifying information will be removed, it will be impossible to totally remove your presence from the study altogether.
If you are in a group talanoa session and you decide you don't want to answer a question, because of the nature of the group situation, however, the recording device cannot be turned off during the group discussion but you can stop speaking until you are ready to resume or you may leave the physical or online zoom room.

You will be given a copy via email of your individual or group de-identified verbatim talanoa transcript a couple of weeks after your talanoa session. Your talanoa session will be transcribed by one of our researchers or by a professional transcriber. The professional transcriber will sign a confidentiality agreement. For individual talanoa, once you receive the transcript, you will have a couple of weeks to review, edit and return it to us, should you wish to. For group talanoa, because changes requested by one person will affect the contribution of others, we cannot take requests for changes to group talanoa transcripts.

What are site observations about and what do I need to do?
You don't have to do much at all. If you are a talanoa participant who is okay for their workplace manager to be approached for site involvement, and/or you are the site manager for this workplace, the only imposition is the time it takes to consider our request, and if you agree, to show our researcher around the site.

The purpose of site observations is to gather 'real-time' on-site information about the physical context of the talanoa participants' workplaces. This will be read alongside publicly available literature about the site and/or service. This 'real-time' observation information provides 'real-time' context not necessarily available from literature sources.

The site observation exercise involves the researcher taking notes about their 'real-time' on-site observations of the:

1. Physical set-up of a talanoa participant's workplace/workspace; and
2. Physical evidence of Pacific values, frameworks and/or models in that workplace/workspace.

Sites for inclusion must have a staff member involved in the talanoa arm of the study. Talanoa participants will be asked to give permission (via their informed consent form) for their site manager to be approached for site involvement. Once this is received, the express permission of site managers will be sought. If permission is not granted by the site manager, the site will not be included.

Site managers will be given a copy of the draft observation notes taken by the researcher. They will have a couple of weeks to review the notes and provide feedback. The final version of the notes will take into account feedback from the manager and a copy will be forwarded to the manager as soon as possible.

We are looking for a minimum of four (4) or a maximum of eight (8) workplace sites to participate in this part of the study. All workplace sites are to be Auckland-based and will be visited in person.

Site managers have the right to withdraw their site from the study and site information from the site observation data-set, at any time, without reason.
What happens to the information you give us?
All project information will be kept for a maximum of six years for research purposes on password-protected computers and in a secure University of Auckland server. A record of your informed consent (both written consent and/or zoom electronic signature) and audio file will be retained in a secure and locked facility by the principal investigator at the Faculty of Arts and will be destroyed after six years.
Rights to participate and withdraw
Taking part in this study is voluntary. You are free to withdraw at any time, without giving a reason and without any negative consequences for choosing to leave. You can also choose to not answer any or all questions, or to leave the discussion whenever you like.
Confidentiality

Your name will not be used in the research unless you would like to be identified for your contribution in acknowledgement sections of research publications or reports. Your express consent or permission will be needed for this. If you consent to be identified, then you will be given the opportunity to review any reports or publications in which you are named before these are made public. You have the right to withdraw your consent to be identified at any time.

If you do not want to be identified explicitly, it is still possible (because of your role, responsibilities, or relationship as a Pacific professional or SV worker) that you could be identified. To minimise this possibility, we will give you a pseudonym and/or code any references to you.

With group talanoa sessions, there are no guarantees that participants will not disclose what other participants have stated or who participated. But to help with this, before any group talanoa session begins, we will ask all members to sign a confidentiality agreement.

Disclosure
We do not expect this study will present any significant risk to you. However, talking about your experiences and stories regarding working with Pacific peoples affected by sexual violence may trigger vicarious trauma. If this happens, you can stop taking part in the interview at any time and not give a reason for doing so. If there is a significant health or safety issue detected during the study, we (the researchers) will discuss this with you to see what professional support may be available to you from your professional organisation, clinical, external or cultural supervisor/s, and/or GP. If you want to talk to someone who is more independent, to be accessed through your general practitioner, we can discuss this with you.

We note that this study is an All of Government (AOG) funded project led by the Ministry of Social Development (MSD).

Contact details – who do I go to with any queries?
If you are interested in taking part in this study, please contact our two main research staff, Dr Fuafiva Faalau f.faalau@auckland.ac.nz or Sarah McRobie s.mcrobie@auckland.ac.nz. They will ring you to organise the best way to meet up with you or to answer any queries you have.

If you specifically wish to seek Māori cultural support, you may want to talk with Māori whanau in the first instance. But you may also contact the administrator for He Kamaka Waiora (Māori Health Team) by telephoning 09 486 8324 ext 2324, or contact the Auckland and Waitemata District Health Boards Māori Research Committee or Māori Research Advisor by phoning 09 4868920 ext 3204 to discuss any questions or complaints or complaints about the study.

It is your right and choice to take part or not in the study. We really hope you do. You have an important contribution to make. If you have any questions about the aims of the study please contact me on the details below. Thank you for your kind consideration.

For any concerns of an ethical nature, you can contact the: The Chair of the Auckland Health Research Ethics Committee (AHREC) at ahrec@auckland.ac.nz or at 3737599 x 83711, or at Auckland Health Research Ethics Committee, The University of Auckland, Private Bag 92019, Auckland 1142.

Faafetai tele. Warm regards,

Principal Investigator (On behalf of the team)
Associate Professor Tamasailau Suaalii-Sauni
School of Social Sciences
Faculty of Arts
University of Auckland
Phone: 64 9 923 7436 Extn 85241
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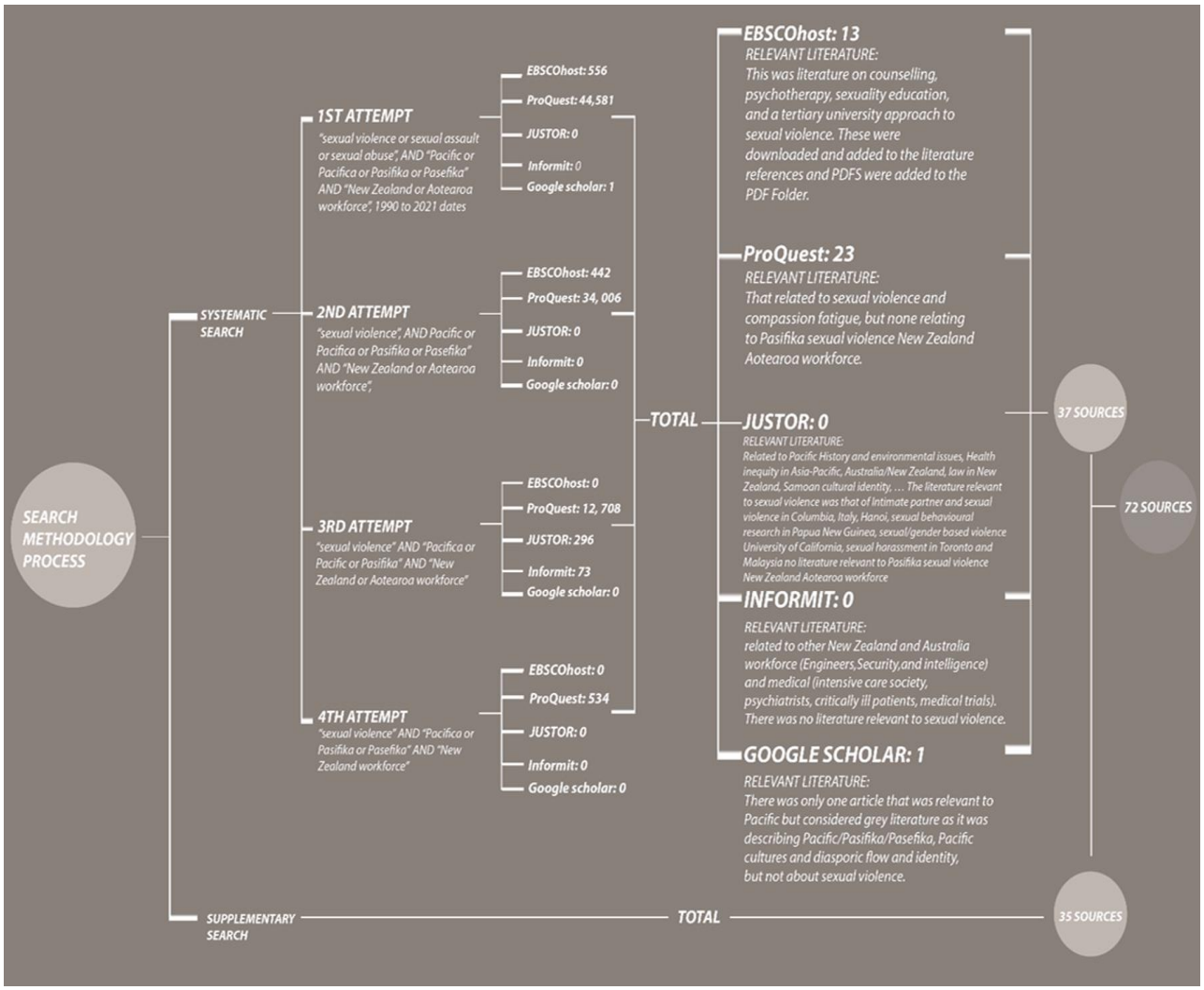
APPROVED BY THE AUCKLAND HEALTH RESEARCH ETHICS COMMITTEE ON 15 July 2021 for three (3) years. Reference Number 22334.

Appendix 8.4 *Literature review search methodology flow-chart*



Appendix 8.5 *Copy of the Pacific Steering Group (PSG) & Pasifika Workforce Network Sexual Violence (PWNSV) of Tauiwi Caucus at Te Ohaakii a Hine National Network Ending Sexual Violence Together (TOAHNNEST)*

MISSION ON THE NATIONAL STRATEGY FOR FAMILY VIOLENCE AND SEXUAL VIOLENCE

Part 1

Executive Summary

This submission is presented by the Pacific Steering Group of Tauiwi Caucus(TC) at Te Ohaakii a Hine-National Network Ending Sexual Violence Together (TOAH-NNEST). This submission is a collection of feedback from some voices in the Pasifika Sexual Violence workforce throughout New Zealand Aotearoa. This submission is put together by the Pacific Coordinator of TC at TOAH-NNEST and presented to Joint Venture by the Pacific Steering Group of TC at TOAH-NNEST. The feedback in this submission focuses on the sexual violence sector and sexual violence specifically, in relation to Pasifika communities.

Consultation on the National Strategy for Family Violence and Sexual Violence with Pasifika sexual violence workers throughout New Zealand Aotearoa, only consisted of one meeting which was held via zoom on the 23rd of June 2021. This was hosted by the Pacific Steering Group and facilitated by the Pacific Coordinator. Joint Venture was present to provide context for the group, before a closed meeting continued without government present, to receive feedback.

Not all voices of Pasifika sexual violence workers are reflected in this submission. This is due to various contributing factors including but not limited to; availability; lack of prior existing relationships; Covid19 Alert Level changes on the 23rd of June 2021 and the transactional nature of information sharing called for due to government time constraints. Joint Venture was advised that the Pasifika sexual violence network was potentially not in a position to provide a fully formed submission on the 5th of June 2021.

For this reason, it should be advised that further consultation should continue with this group to eliminate potential barriers for gathering contributions. This group will continue to meet on a regular basis to encourage further engagement. Further consultation should be sought from this group at a date when the network is more established.

Introducing the Pacific Steering Group (PSG)

The Pacific Steering Group (PSG) is a small emerging group of specialists in the sexual violence sector who are of Pasifika descent. This group has been developed with the support of TOAH-NNEST. PSG members work for TOAH-NNEST membership agencies that sit under the Tauiwi Caucus umbrella within TOAH-NNEST. PSG meet on a regular basis to discuss issues relevant to sexual violence and Pasifika communities. Their main work at the moment centres around creating a network of Pasifika sexual violence workers around New Zealand Aotearoa with the main source of finding these people being through data provided by TOAH-NNEST membership agencies. PSG's work is supported by the Pacific Coordinator role at TOAH-NNEST National Office and is currently funded by the Covid-19 Response funding pool.

Introducing the Pasifika Workforce Network - Sexual Violence (PWN-SV)

The Pasifika Workforce Network- Sexual Violence (PWN-SV) in this document refers to the very much "emerging" network of sexual violence workers around New Zealand Aotearoa who are of Pasifika descent. This network met for the very first time, on the same day they engaged for consultation on this National Strategy for Family Violence and Sexual Violence. PWN-SV network structure allows for people who are not working for TOAH-NNEST membership agencies to participate. In this document, PWN-SV refers to those who were present at the first and (so far) only network meeting that has been held. All people present at this meeting, work in the area of sexual violence in varying degrees of proximity to client focused work. This network is emerging and does not yet have relationships established within it to make this particular consultation a thorough overview of the Pasifika workforce contributions. This network will continue to meet on a regular basis with support of the Pacific Coordinator and PSG of TOAH-NNEST to develop the nurturing relationships required to gather information on the sexual violence sector from a Pasifika perspective.

Key Recommendations

1. There is an urgent need for investment in research into Pasifika communities and relationships – particularly around healing methodologies
2. There is an urgent need for workforce development across the sexual violence sector that engages and sustains Pasifika pathways
3. There is an urgent need for investment in services and prevention initiatives that are appropriate and safe for Pasifika communities to engage with.

Part 2

Share Your Thoughts

What we know (from perspective of PWN-SV & PSG):

1. Evidence backs up that Pasifika communities are at a higher risk of experiencing sexual violence. Evidence backs up that Pasifika survivors/victims of sexual violence are not approaching mainstream social services to heal. Evidence backs up that Pasifika survivors/victims of sexual violence are not reporting to police to seek justice.

2. Pasifika communities spend lots of time together. Being together, sharing food operates as a preventative measure around safety and violence. Processes involved provide space for educating younger generations about safety within communities and relationships. Cultural structures and processes in these settings, educate on boundaries and building trust in relationships. These are enduring sustainable relationships that provide safety for our vulnerable. Thus, connection, relationship building and respecting the Vā (Tauhi Vā, Teu Le Vā etc) is an integral way Pasifika people maintain individual safety.
3. Sexual violence can often be invisibilised in Pasifika communities. Sexual Violence creates
disconnection and isolation for a survivor/victim. This makes long enduring relationships and connections difficult to maintain. The impacts of disconnection caused by sexual violence are long term and intergenerational.

4. As with any migrant community, Pasifika families and communities seek each other out and stick together. When a breach of the Vā occurs – such as sexual violence – survivors/victims and their support people can become isolated from their communities, making them more vulnerable and at a higher risk of further future trauma.

5. Pasifika cultures in their various homelands have preventative measures for sexual violence that are embedded into how society is structured. Cultural assimilation of migrant communities into New Zealand means that families do not have the time to teach these preventative measures because of economic demands and stressors.

6. Pasifika families are often experiencing multiple social and economic constraints that make addressing sexual violence through the justice system and social services an almost impossible task to navigate.

7. Pasifika families experience of trying to heal through the current justice system, is often referred to as a worse experience than the trauma itself.

8. Therefore, Pasifika families are dealing with this themselves. Sometimes by sitting down with each other and addressing the breach of the Vā. There is a wealth of untapped knowledge here, on what works and doesn't work for healing Pasifika families and communities.

9. Pasifika healing approaches align more closely with tangata whenua than with mainstream healing practices. The relationships between tangata whenua and Pasifika spans thousands of years in this Moana, and thus our modalities of healing are similar and closely related.

10. As far as we know, there are less than 50 Pasifika sexual violence specialists that make up the Pasifika sexual violence workforce.
11. There are so few Pasifika sexual violence workers in the country, that they experience compassion fatigue. Not only do they do they honour this deeply complex work in their daily paid practitioner space, but they also often end up being the person best equipped to deal with family and community disclosures of sexual violence where the family/community have decided the safest approach does not include pathways currently available like social services or reporting to police.

12. The same sexual violence workers who experience compassion fatigue in their work and personal lives, also end up being key advocates for the sexual violence sector in various positions. This model of practice is not a sustainable but it is deeply necessary to have strong advocates for Pasifika within the sector.

13. Pasifika leadership, and pathways to leadership for Pasifika, are lacking in the sexual violence sector.

14. Pay inequity – it is noted that Pasifika earn 8% less than their mainstream equivalents.

15. There is a reluctance from Pasifika practitioners in the sexual violence sector to claim their knowledge titles – always assuming someone else knows more - but also being aware through experience, that the sexual violence sector lacks the infrastructure to safely accommodate their career progression and support their leadership with Pasifika communities.

16. Without the infrastructure to support our Pasifika sexual violence workers, there is little space available for Pasifika people to respectfully and safely hold their communities accountable for sexual violence and for healing from sexual violence.

What we want (from perspective of PWN-SV & PSG):

1. It is imperative to educate, appropriately support and enable accessibility to services for, not only the survivor/victim, but also the families or chosen support people of the survivor/victim need appropriate and adequate access to services, education and support as well. There needs to be enough time allocated, skilled workers, and funding to support key relationships for the survivor/victim.

2. Comprehensive support for survivor/victims and their support networks requires investment and a commitment to building more capacity and capability in the Pasifika sexual violence workforce. This will come through targeted scholarships for Pasifika peoples to conduct research on sexual violence in Pasifika communities and indigenous healing approaches. This will come through targeted scholarships for Pasifika to train as specialists in the sexual violence sector. This will come through nurturing relationships amongst Pasifika peoples.

3. Commitment to developing a long term plan for a sustainable sexual violence workforce that includes pathways for Pasifika to build an engaging and economically sound career in the sexual violence sector. Healing from sexual violence is ongoing and life long, meaning there are many avenues for various support services and healing approaches throughout a survivor/victims life span and intergenerationally

4. Pathways for Pasifika sexual violence workers to fill their tanks as opposed to sitting in the reactionary, spitting while swimming, situation they currently sit in. We want to thrive, not just survive. “Filling their tanks” would include but is not limited to;

a. Adequate supervision provided for sexual violence specialists. This includes culturally specific supervision.

b. Equitable pay scales. Reliable and consistent wages/salaries that value the gravity of the urgent and complex work they deal with everyday

c. Pathways into leadership – education opportunities for management on appropriate pathways for Pasifika sexual violence workforce to upskill

d. More capacity in the workforce - invest in the Pasifika people already in the sexual violence sector, so that leadership opportunities can be engaged, without overloading the other, very few, Pasifika specialists in sexual violence sector

5. Research and investment into the healing approaches Pasifika communities are unofficially engaging with, to heal from sexual violence. This includes options for prayer support, as the church plays a vital role in our Pasifika communities

6. Research, investment and accessibility for Pasifika communities to engage culturally appropriate forms of justice and healing. We do not want more Pasifika families to be harmed through the justice system because they "did the right thing" by reporting to police in a failed attempt to find justice in the New Zealand Aotearoa justice system

7. Space, resourcing and funding for Pasifika to engage in rituals, spiritual practice and cultural processes that allow Pasifika to build safe and trusting relationships with each other

8. We do not want funding to be thrown blindly at Pasifika peoples. There needs to be research investment into appropriate upskilling pathways to build capability and capacity in the Pasifika sexual violence workforce.

9. "Fund Pasifika sexual violence services, then get out of the way. Trust the experts of our culture who are helping to heal our people. The solution for Pasifika will be by Pasifika, for Pasifika."

10. Acknowledgement and understanding that talking openly about sexual violence in Pasifika communities looks different to the way mainstream is informed about sexual violence

Where do we want to be?

PWN-SV & PSG reflections on the vision statement:

1. The vision statement doesn't acknowledge the intergenerational trauma that occurs when sexual violence is experienced. The vision statement is a long term goal, not a vision statement. It does not instil hope, it suggests ignorance of the breadth, gravity and urgency of the situation. It is far too long term to be productive.

2. "This statement is nice, but it sets us up for failure, it's unattainable"

3. Statistics suggest that violence is actually normal in New Zealand Aotearoa. This shouldn't be the case but it is. This vision statement is "nice" but it doesn't ground itself in reality.

4. It is like stating that the vision of Health NZ is to have no New Zealander suffering heart attacks or cancer, when in reality the government needs to be setting the standard for accountability and opportunity to be supported in your journey to end family violence and sexual violence in your communities, no matter where you sit on the spectrum of that journey eg. HSB, LTR, survivor, support person, etc.

5. As a sexual violence specialist, in the social services sector, this vision statement effectively means working yourself out of a job and it sets up specialists for failure. The

underscore of this message then suggests that the soft skills of the social services sector are not valued.

6. As a sexual violence specialist, it makes no sense for family violence and sexual violence to be lumped together. They are different issues, that can cross over, but have very separate pathways to elimination

7. When you are living in violence, it is impossible to imagine a world without violence – as a statement it essentially invisibilises survivor experiences of sexual violence.

8. As a survivor of sexual violence – it can be impossible to imagine a world without violence. This vision statement results in feeling isolated and vulnerable. Why would a survivor feel encouraged to reach out for help when the governments vision is so out of touch with their reality?

How will we work together to achieve the vision?

PWN-SV & PSG reflections on how we work together to achieve the vision:

1. Government continues, not to sufficiently fund or listen to Kaupapa Maori sexual violence services. In terms of the relationship building with Pasifika communities, Kaupapa Maori services need to be adequately resourced and listened to on how to heal from sexual violence. Pasifika people see the broken relationship between the Crown and Kaupapa Maori. Constant undermining of Kaupapa Maori creates glass ceilings for what and how Pasifika can consider real partnership to look like. Te Hau Tangata has a good definition of violence for us to work with.

2. Sexual violence services need to be for Pasifika and by Pasifika. Encouragement, accessibility, resourcing, and funding needs to be in place from the government to upskill Pasifika people who are currently in the sexual violence sector. This will enable appropriate healing approaches to be developed and delivered to Pasifika communities. To put it bluntly, “fund us, and get out of the way”

3. Enable Pasifika leaders to heal our Pasifika people “Trust the experts of our culture who are helping to heal our people. The solution for Pasifika will be by Pasifika, for Pasifika.”

Where should we focus to make our vision a reality?

PWN-SV & PSG reflections on the focus areas:

1. Workforce development in the sexual violence sector is vital to serving the urgency of extremely high waitlists in the sector safely.

2. There is past research that has been conducted on the area of sexual violence and Pasifika communities. This needs to be taken into account to develop healing practices that are culturally appropriate for our Pasifika peoples. Advocates in this area

are growing tired of repeated consultation and repeatedly not being heard. This results in burn out and the sector not being able to retain a Pasifika workforce.

3. Funding, resourcing and investment for the right indigenous approaches to heal our Pasifika communities. This includes enabling accessibility for Pasifika people to engage with these healing approaches.

4. Please work on a vision statement that actually provides hope, attainable goals and accountability for the urgency of violence in our communities.

5. Pasifika communities need to be encouraged and educated around social services and pathways available for healing and seeking justice from sexual violence safely. Officially, these options do not currently exist. The current system set-up does not work for Pasifika people. Exploration and research needs to be conducted into Pasifika communities to find out what has been working for their healing. Before this, relationships need to be built and established to conduct this work. For Pasifika, by pasifika is the only way this will work.

6. Practitioner spirituality is key in healing our Pasifika people. There need to be a variety of healing modalities available for our Pasifika communities. This needs to acknowledge that spirituality in healing may mean something different for future generations of Pasifika

7. There needs to be a family based approach to healing from sexual violence. This means wrap around services for families or chosen support networks. These services need to work together which will only happen when they aren't forced into bidding against each other for funding pools, and when sustainable long term funding is achieved.

8. The important role of the church with Pasifika communities needs to be acknowledged. Churches are often a hub for Pasifika communities, as with many migrant communities, spiritual practices engage and retain their people. Power roles within church services and other indigenous healing modalities, need to have accessible education on sexual violence, be encouraged to engage with these tools and appropriate pathways need to be available for healing.

9. Invest in Pasifika people building relationships with each other safely and sustainably. There is a wealth of knowledge in our people, when our people are resourced to connect with each other, knowledge and expertise on safety around sexual violence will spread.

10. Developing a skilled and cultural specific sexual violence workforce that reflects the reality of the issue in the community.

11. Due to the reality that violence already exists in our communities –research needs to be trauma informed. A one size fits all will not work within Pasifika communities. A variety of healing modalities needs to be researched, funded and resourced to provide better opportunities for people to heal from sexual violence.