



Talavou o le Moana

The Health and Wellbeing of
Pacific secondary school students
in Aotearoa New Zealand

Executive Summary

A Youth19 Report

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Fala Image

Fala image on cover and inside section breaks by Gerard Muller (majella.muller@gmail.com)
“Fala, mats woven from trees. With all meetings traditionally held amongst Pasifika is sat on and held on fala. Flags of nations woven by the Pacific can now bring their voices forward. Here.”
Gerard Muller 2023

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References

- Roy, R., Greaves, L. M., Peiris-John, R., & Fleming, T. (2021). Negotiating multiple identities: Intersecting identities among Māori, Pacific, rainbow and disabled young people. The Youth19 Research Group, The University of Auckland and Victoria University of Wellington.
- Sio, A.W. (2019). Budget Debate – New Zealand House of Representatives. Hansard. (Vol 738. p.11788). Parliamentary Service. https://www.parliament.nz/en/pb/hansard-debates/rhr/document/HansS_20190611_063900000/sio-hon-aupito-william-williams-poto
- Te Rōpū Arotake Auau Mate o te Hunga Tamariki, Taiohi | Child and Youth Mortality Review Committee. (2021). 15th data report: 2015–19. Health Quality & Safety Commission.
- Veukiso-Ulugia, A., Kuresa, B., McLean-Orsborn, S., King-Finau, T., & Fleming, T. (2023). Youth 19 - Pacific Youth Voices: Home & Family Life. The Youth19 Research Group, Victoria University of Wellington and The University of Auckland

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Executive Summary

Introduction

This Executive Summary is an excerpt from the full report: *Talavou o le Moana*, that presents an overview of the health and wellbeing status of 1,130 Pacific secondary students in Aotearoa New Zealand, based on the findings from the Youth19 Rangatahi Smart Survey. There is considerable richness and diversity among Pacific youth in Aotearoa NZ. This is evident across multiple spheres of community life with many Pacific youth excelling in school, actively contributing to their communities, and living joyful lives. Pacific communities are instrumental in shaping Aotearoa NZ society now and in the future, especially as close to half (46.1%) of Pacific peoples are under the age of 20 years old.

The environments into which we are born, live, grow, work, play, and pray have a profound impact on how we experience the world. While Pacific youth are often described as “brown, beautiful, brainy, bilingual, bicultural, and bold” (Sio, 2019, p.11788), some are navigating challenging health and social situations. A report by the Child and Youth Mortality Review Committee revealed that between 2015 and 2019, 79 Pacific young people aged 15 to 19 passed away. The main cause of Pacific youth deaths were medical conditions, suicide, and injury – with transport incidents being the leading cause of injury death. Marked inequities between Pacific and non-Pacific and non-Māori exist – Pacific youth are much more likely to die from these causes than young people from non-Pacific and non-Māori communities (Te Rōpū Arotake Auau Mate o te Hunga Tamariki, Taiohi | Child and Youth Mortality Review Committee, 2021). Each young person who tragically loses their life is part of a wider interconnected community that must also navigate their way through these challenges. We need to better understand the realities facing Pacific young people to ensure that the correct resources, supports and systems are in place for our youth to thrive.

Talavou o le Moana summarises key findings for Pacific secondary school students in the areas of ethnic and gender identity; family and faith; socioeconomic environments and housing; education; friends and community connections; physical, mental and sexual health; substance use; and healthcare access. This data report gives a vital snapshot into the lives of Pacific young people. This information was collected as part of the Youth19 Rangatahi Smart Survey, the latest in the Youth2000 survey series conducted by the Adolescent Health Research Group (AHRG). The findings highlight the resilience and strength of Pacific *talavou* (young people), and the complexities they must navigate.

Methods

The Youth19 Rangatahi Smart Survey (Youth19) is a cross-sectional health and wellbeing survey. Ethics approval was obtained by the University of Auckland Human Subjects Ethics Committee. The survey was carried out in the Tāmaki Makaurau (Auckland), Te Tai Tokerau (Northland), and Waikato regions in 2019. This region accounts for approximately 70% of the Aotearoa NZ Pacific population. Secondary schools were randomly selected, and students were randomly selected from the rolls. A total of 7,721 Year 9 to 13 students took part. They completed the survey on handheld internet-enabled tablets in English or te reo Māori with optional voiceover. The survey was anonymous, and all participants were offered help options either via email or text.

In this report, we highlight findings on key health and wellbeing indicators, combining all young people with any Pacific ethnicity, rather than breaking down findings for each Pacific ethnic group. We acknowledge the rich diversity within the Pacific population which can be masked or unrecognised when health data is analysed by combining all Pacific peoples into a single group. Other Youth19 reports and ‘briefs’ investigate specific issues for Pacific communities, such as the Pacific young people’s perspectives on family and home life (Veukiso-Ulugia et al., 2023) and for rainbow, gender diverse and disabled Pacific and other youth (Roy et al., 2021). Support from community partners will ensure the development of ethnic specific reports.

In Talavou o le Moana, we use total ethnicity reporting, rather than prioritised ethnicity reporting. This means all students who reported a Pacific ethnicity (whether alone or in combination with other ethnicities) are included. Using this method, **a total of 1,130 Pacific secondary students, comprising 14.6% of the total sample completed the Youth19 survey.**

Key findings

- Pacific young people are diverse; half have multiple ethnic identities.
- Most Pacific young people report positive relationships with family members, school and church communities.
- Most Pacific youth are happy, healthy, satisfied with their lives, and making healthy choices.
- However, Pacific young people are having to navigate socioeconomic inequities and injustices that are beyond their control – evident in significant housing and socioeconomic deprivation, clinically significant depressive symptoms, and experiences of racism.
- Pacific students also face major concerns in areas of wellbeing and health risks, particularly mental health, transport incidents, accessing healthcare and sexual health.

Pacific young people are diverse; half have multiple ethnic identities:

- Around 1 in 6 Pacific students had two or more *Pacific* ethnicities (16.1%). The most common Pacific ethnicity reported was Samoan (49.1%), followed by Tongan (30.8%), Cook Islands Māori (20%), Niuean (8%), Fijian (7.3%) and Other Pacific (5.6%¹).
- Almost half of Pacific students had a *non-Pacific* ethnicity (49.4%). The most common non-Pacific ethnicity reported was European (28.6%), followed by Māori (26.6%), Asian (8.9%).

Most Pacific young people report positive relationships with family members, school and church communities, in particular:

- The vast majority of Pacific students reported at least one parent cared about them a lot (92.8%), and that there was someone in their family they could have fun with (93.9%).
- Most Pacific students felt they got enough quality time with their family (73.6%); however, approximately a quarter would have liked more time with family (26.4%).
- Most reported that they felt part of their school (88.9%), and that teachers expected them to do well with studies (96.3%).
- Most Pacific students reported having a faith or religion (93.5%), and that their spiritual beliefs were important to them (89.4%).
- Most reported having at least one friend they could trust to share their feelings (87.9%).
- Over half of Pacific students reported helping others in their school or community in the previous 12 months (52.5%).

Most Pacific youth are happy, healthy, satisfied with their lives, and making healthy choices:

- Almost all Pacific students felt that it was important for them to attend school (96.2%).
- Most reported good or excellent general health (89.3%).
- Most Pacific students had thought about or made plans for their future (87.4%).
- Many reported good emotional wellbeing (70.9%).
- Three quarters of Pacific students had accessed healthcare in the previous year (75%).
- Most Pacific students sought care from their family doctor, medical centre or GP clinic (84.5%).
- Most Pacific students had never smoked cigarettes (77.0%), nor had they used marijuana (75.8%).
- Over half of Pacific students reported that physical activity was an important part of their life (60.4%), and close to half had engaged in vigorous physical activity four or more times in the past week (47.8%).

¹ Figures add to over 100% as students could select multiple ethnicities.

However, at the same time, Pacific young people are having to navigate socioeconomic inequities and injustices that are beyond their control:

- Almost two thirds of Pacific students lived in neighbourhoods with high levels of deprivation (62.3%).
- Almost half of Pacific students experienced housing deprivation – in that their families worried about not having enough money for rent or mortgage, or they needed to sleep in another place other than a bedroom or share a bed because of housing costs (this specifically excluded holidays and family visits) (47.1%).
- Almost half of Pacific young people reported that they do not always feeling safe in their neighbourhood (48.5%).
- Over a third of Pacific students reported experiencing racism (40.5%), and a further quarter were unsure if an experience was a racist encounter (25.2%).
- Around a quarter of Pacific students reported that their parents worried about money for food often or all the time (25.9%), and just over 1 in 10 reported their parents worried about money for electricity often or all the time (11.0%).
- While most Pacific students had not experienced healthcare discrimination in the last 12 months, some Pacific students reported discriminatory practice (5.0%).
- While most Pacific students felt safe at school, nearly 1 in 6 did not feel safe most of the time (14.1%), and over a third reported that their teachers did not treat students fairly most of the time (39%).
- Approximately a quarter of Pacific respondents had been touched in a sexual way or made to do unwanted sexual things that they did not want to do (24.7%).
- While many Pacific students had made plans for their future (87.4%), approximately a quarter reported that they did not feel they would get the support needed to realise these plans (25.2%).
- A third of Pacific respondents reported that they did not see a positive future for themselves in Aotearoa NZ (33.0%).

Pacific students also face major concerns in areas of wellbeing and health risks, particularly mental health, transport incidents and sexual health:

- Around a quarter of Pacific students reported significant depressive symptoms (25.8%).
- Over a quarter of Pacific students reported serious thoughts of suicide in the last year (26.4%).
- Over 1 in 10 Pacific students attempted suicide in the last year (11.7%).
- Less than half of Pacific students always used a seatbelt in a vehicle (42.6%).
- While most Pacific students were not sexually active (84.9%), 4 out of 5 sexually active students did not always use a condom (79.9%).
- While most Pacific students had not tried any substances, around 1 in 20 had smoked cigarettes (4.8%), had vaped (4.9%), or used marijuana (4.7%) on a regular basis.
- While less than half of Pacific students had drunk alcohol (46.7%), around 1 in 6 Pacific students reported binge drinking in the last 4 weeks (16.3%).
- In light of these findings, it is concerning that a quarter of Pacific students reported being unable to see a doctor or nurse (or other healthcare worker) when they had needed or wanted to in the previous year (25.2%). The most common barrier for Pacific students not seeking healthcare was that they did not want to make a fuss (33.3%).

Inequities

The findings in Talavou o le Moana illuminate the significant and persistent inequities for Pacific youth.

Pacific students are *significantly more likely* than Pākehā (NZ European/other European) students to have:

- Experienced significant housing deprivation (Pacific = 47.1%; Pākehā = 20.1%).
- Experienced racism (Pacific = 40.5%; Pākehā = 16.6%).
- Experienced significant socioeconomic deprivation (Pacific = 25.9%; Pākehā = 7.5%).
- Clinically significant depressive symptoms (Pacific = 25.9%; Pākehā = 19.6%).
- Been unable to access healthcare when required (Pacific = 25.2%; Pākehā = 16.5%).

Engaged in risky health behaviours including:

- Inconsistent contraceptive use (69.7% of sexually active Pacific students; 38.4% of sexually active Pākehā students).
- Been in a car driven by a risky driver (Pacific = 23%; Pākehā = 17.9%).
- Smoked cigarettes (Pacific = 6.1%; Pākehā = 4.3%).

However, Pacific students did have lower rates of vape use* and binge drinking than Pākehā students.

- Around 1 in 6 Pacific students reported binge drinking (16.3%) compared to approximately a quarter of Pākehā students (24.3%).



Trends 2001–2019

Over the past 19 years, over 4,800 Pacific young people have participated in the Youth2000 surveys (2001, 2007, 2012, 2019) allowing communities to observe trends over time. In Talavou o le Moana, this analysis was undertaken in five wellbeing areas: educational engagement and safety, wellbeing and mental health, sexual and reproductive health, substance use, and healthcare provision. The findings reveal that:

Some connections have remained relatively stable over time

- A large proportion of Pacific students consistently felt part of their school. In 2001, 85.7% of Pacific students felt part of their school, rising slightly to 88.9% in 2019.

Improvements in Pacific youth health and wellbeing youth:

There have been significant progress and improvements in three areas of health and wellbeing:

- While rates fluctuated across the four Youth2000 surveys, there has been an increase in Pacific students feeling safe at school (from 71.8% in 2001 to 85.9% in 2019).
- Pacific students are delaying initiating of sexual intercourse. The proportion of students ever having sex has decreased (from 36% of Pacific students having had sex in 2001 to 25.2% in 2019).
- There has been a significant decline in Pacific students' substance use:
 - » Smoking cigarettes lowered from 20.2% in 2001 to 4.3% in 2019.
 - » Binge drinking reduced from 23.2% in 2001 to 12.7% in 2019.
 - » Marijuana use decreased from 5.9% in 2001 to 3.6% in 2019.

However, Pacific youth health and wellbeing remains a concern in some important areas

There are some areas, particularly mental health and contraceptive use, that remain of great concern, with worsening or no improvement over the past 19 years.

There has been an **increase** in the proportion of Pacific students who report:

- Depressive symptoms. In 2001, 17.6% of Pacific students reported depressive symptoms. This rose to 25.9% in 2019.
- Serious thoughts of suicide. In 2007, 18.8% of Pacific students reported serious thoughts of suicide. This increased to 26.4% in 2019.
- Suicide attempt. In 2007, 9.7% of Pacific students reported a suicide attempt. In 2019, this rose to 11.7%. (Note: The confidence intervals somewhat overlapped, indicating that the observed difference may be due to chance.)

There has been a **decrease** in the proportion of Pacific students who report:

- Good emotional wellbeing. In 2007, 81.1% of Pacific students reported good emotional wellbeing. This figure reduced to 70.9% in 2019.
- Using condoms. In 2001, 40.3% of sexually active Pacific students reported using condoms. This figure reduced to 20.1% in 2019.
- Using contraception. In 2001, 45.3% of sexually active Pacific students reported using contraceptives, in 2019 this figure reduced to 30.3%.

Conclusions

Talavou o le Moana highlights the strength, resiliency and the complexities experienced by Pacific secondary school students in Aotearoa NZ. While Pacific students are thriving and connected in many areas of life such as family, schools and church, many are simultaneously having to navigate the harsh realities associated with deprivation, poverty and racism – factors that have significant and detrimental impacts on one’s health and wellbeing across the lifespan. For example, Pacific students from neighbourhoods with greater disadvantage and hardship were less likely to report that they had opportunities to show their talents and skills, compared to students from wealthier neighbourhoods.

The Youth2000 surveys show that there have been significant improvements in areas of health and wellbeing for Pacific young people over the last 19 years, including declining substance use, increasing feeling of safety at school and delayed sexual activity. However, there are significant issues that have not improved or have worsened, particularly mental health and contraceptive use. These persistent disparities must be addressed through consistent, comprehensive, and evidence-based approaches.

The health and wellbeing implications arising from Talavou o le Moana elevate existing Pacific youth, family and community recommendations, including:

1. Ensure Pacific students’ basic needs and rights are met;
2. Partner with Pacific young people, their families and communities to realise an equitable future; and
3. Invest in more quality research with and for Pacific young people, their families, and communities.

The proverb “it takes a village to raise a child” conveys the idea that it takes many people to provide a safe and healthy environment where children and young people have the right to thrive. For research undertaken with Pacific communities, ensuring Pacific people are actively involved in all stages of research and in the different roles, such as researchers, advisors, and stakeholders, is important. Genuine partnerships between researchers, local communities and government are needed to bring to light the many other health and wellbeing areas explored in Youth19, such as connections with culture and navigating digital and online environments.

Pacific talavou are gifts and we hope that Talavou o le Moana will help the village: young people, families, school, health and church communities, sports groups, service providers and policy makers to ensure the right help, opportunities, and support systems are in place.

“Ko tou malosi, ko you maumea”

“Your strength, your wealth.” One translation of this traditional Tuvaluan proverb is that strengthening one’s wellbeing equates to building one’s wealth. Furthermore, this applies to the individual and their wider community.

Youth2000 Survey Series

www.youth19.ac.nz