

The Fono's “Alert Level 4” Story

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ABSTRACT

During the 1970s and 1980s, Pacific people tended to seek medical care from Accident and Emergency centres only when they were in an acute condition. As a result, Pacific mortality rates were high and Pacific people were unnecessarily suffering with poorer health outcomes. By 1987, a group of Pacific community leaders in Auckland came together and formed *The Fono* (originally known as *Pasifika Health Care*), to provide a Pacific community-led health practice and improve access to high quality, culturally appropriate primary care services. By 2020, The Fono had nine sites with four medical clinics, three dental clinics, a vast range of public health and social services, and a trades training academy.

Aotearoa New Zealand's initial Covid-19 Alert Level 4 period was a time of intensive service delivery and significant innovation at The Fono. As a result, incubation projects were catapulted into life, transforming key aspects of the organisation. For The Fono, this transformation occurred on the following timeline:

- *pre-Covid* (time before Alert Level 4, before 26/03/2020);
- *Covid* (Alert Level 4 period, 26/03/2020–3/05/2020);
- *post-Covid* (the time after Alert level 4, 13/05/2020 onwards).

This viewpoint outlines the projects that contributed to organisational change at The Fono with the first Covid wave in 2020.

Keywords: Pacific; Covid; integrated model of care; food security; health; transformation

From its earliest beginnings, Pacific leaders envisaged that The Fono would become an integrated service provider that effectively met the health and social needs of Pacific communities in Auckland so that they could enjoy healthier, longer lives. The Fono today exists in Manurewa, Mt Wellington, Auckland Central, Blockhouse Bay, Henderson, Northcote and Northland. Unfortunately, the inequities which impacted on Pacific in the 1970s and 1980s continue to burden Pacific peoples today (New Zealand Treasury, 2001) and the best way to improve long-term health outcomes is still by providing integrated, wrap-around support which is both family-centred and family-led.

One significant barrier to achieving integration is that each service The Fono provides is funded separately, requiring detailed delivery and financial reporting for each. Although practitioners could work across services, managing multiple databases to record work and outcomes was time consuming and undermined essential face-to-face work with Pacific communities. However, integrating services was unfeasible within the context of individually funded services.

The advent of Covid in Aotearoa New Zealand provided The Fono with opportunities for innovation. The Fono's period of transformation can be thought of

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in a timeline of pre-Covid, Covid, and post-Covid as displayed in Figure 1.

Integrated model of care

When Covid first arrived on Aotearoa New Zealand shores in February 2020, The Fono was, soon after, approached by key funding partners, Pasifika Futures Ltd (PFL), the Ministry of Social Development (MSD), the Waitemata District Health Board (WDHB), and the Ministry of Justice (MOJ), to support the pandemic response effort. As most of Aotearoa New Zealand headed into lockdown, The Fono responded by introducing a Mobile Covid-19 Testing Service and a comprehensive Foodbank, while maintaining medical and social services, primarily online.

Heightened anxiety on a national and global scale being the “new norm” (Liu et al., 2020; World Health Organisation, 2022), The Fono

grounded itself by recalling the aspirations of its forefathers. Pacific families were about to reach out for help like never before, and The Fono needed to respond with its own model of integrated care (see Figure 2). The Aotearoa New Zealand government response to Covid-19 had provided an opportunity for The Fono to fight even harder for holistic culturally appropriate services for Pacific people. Families are at the centre of the model and all Fono services are there to surround, support and meet the needs of the whole family system.

Food security

Food security is an ongoing issue for many Pacific families in Aotearoa New Zealand (Rush, et al., 2007) and the issue of food security for many populations globally has been exacerbated by the Covid pandemic (Martin-Neuning, 2021). The Fono’s response to food security can be conceptualised in a timeline (Figure 3).

Figure 1: Model of Care Assertion Timeline

The Fono’s Integrated Model of Care		
Accepted Silo-ed Services	Asserted baseline model	Confident baseline model
Pre-COVID	COVID	Post-COVID

Figure 2: Integrated Model of Care

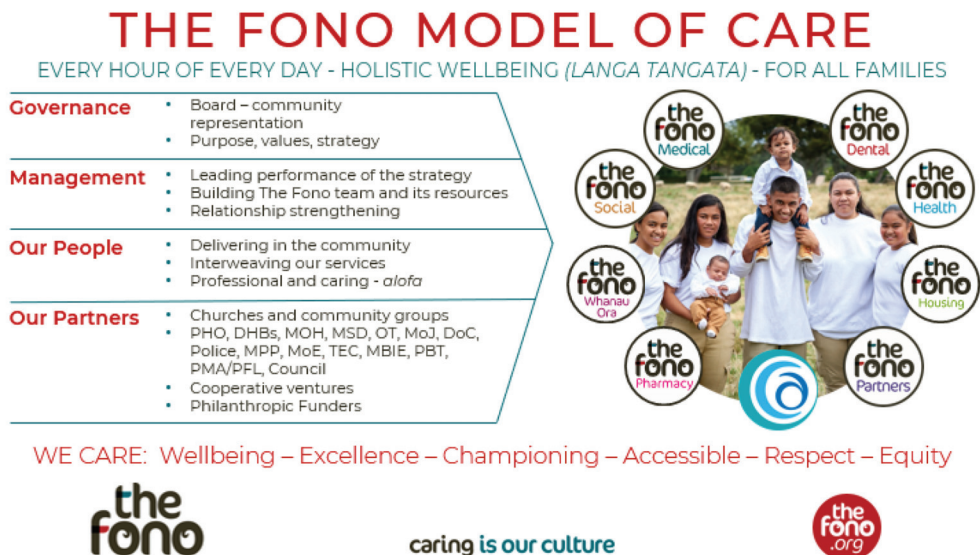


Figure 3: Food Security Response Timeline

The Fono's Response to Food Security		
Rescued Food Distribution	Foodbank	Feleoko
Pre-COVID	COVID	Post-COVID

Pre-Covid, The Fono received donated food on a weekly basis which was then delivered to families in need by the community services staff. This arrangement worked well for a number of years, as The Fono had limited food storage capacity and food could be redistributed quickly.

In 2020, The Fono received relief funding for Pacific families who were negatively affected by Alert Level 4. Alert level 4 was part of the Aotearoa New Zealand government's alert level system that ranged from Alert level 1 to Alert level 4 (New Zealand Government, n.d.). Each level determined the public health and social measures to be actioned. Level 4 is a lockdown level, implemented when Covid was not contained and there was widespread community transmission. Many Pacific people lost their jobs, had reduced incomes, or had additional family members staying with them. With decreased income and increased expenses, families quickly experienced intensified strain on their already pressurised financial situations (Tanielu, 2021).

Prior to Covid, The Fono had no experience in providing a foodbank service. Within two days of Alert level 4, The Fono had set up a temporary food provision solution until a full distribution centre was established the following week.

The entire social service workforce of 40 staff were quickly redeployed to create and deliver over 8,000 relief packages in five weeks.

This work was supported by The Fono's Community partners the NZ Police, Corrections staff, Pak'nSave supermarket, Corbans Estate Arts Centre, and church and community volunteers.

The need for relief packages continued in the post-Covid phase. The Waitakere Licensing Trust answered a social media plea for a permanent site, and the *Feleoko* was born. The Tongan concept of *feleoko* refers to the food storage *fale* (house) that was once an important part of every home in the Pacific. The *feleoko* is a separate *fale* from the *peito* (cooking house) where food is stored and prepared for daily consumption. The main purpose of the *feleoko* is for food security, to ensure that there will always be food available, especially when disaster strikes.

Such is The Fono's vision for its *Feleoko*. A place where quality food is stored for when the need is great. When families face difficulties, they know that the *Feleoko* has nourishing food to share. It is hoped that The Fono will be able to provide the support and resources to ensure that families do not

Photo 1: Assembling Food Parcels



find themselves in the same situation in the future, by helping them to build their own *Feleoko*.

Enhanced access: Clinical services

The Fono has four medical clinics across the Auckland region providing primary care services to over 16,000 patients. Patients typically come to the practice to see a GP or a nurse.

The Covid context, as with services mentioned, necessitated a different response, as indicated by the timeline below (Figure 4).

After a period of negotiation, The Fono’s Integrated Mobile Testing Service was implemented. The Fono’s public health staff were redeployed to provide wrap-around support which included assessing families in need during Covid testing in the home, providing follow-up social support as needed and advising families of their test results.

The Mobile Testing Service included influenza vaccinations and assessment and follow-up, carried out by a social worker, with other family needs such as Pacific Relief Packages and referrals to other services within The Fono and external to the organisation. This service ended on the 31 July 2020 and led to the development of the Pacific Mobile Service which provides outreach GP, nurse and social work services to families unable to attend clinic appointments or are who are not enrolled with a GP clinic.

In pre-Covid times, The Fono Henderson had provided GP phone triage services to assess whether patients needed to attend the clinic. GP services tended to always be

provided in the clinic with the occasional home visit which was often for palliative care. Clinical outreach services tended to be nurse-led with social workers meeting social support needs.

Virtual consultations

In Alert Level 4, the national target was for GP clinics to provide at least 70% of their consultations by phone or on a virtual platform such as Zoom or Teams. Without virtual capabilities, Fono GPs provided most of their consultations via phone. For The Fono this was unprecedented, and the GPs quickly adapted to managing patient care using the patients’ medical records and speaking with the patients. Some patients still attended the clinics but had to be screened for Covid before entering premises.

In the post-Covid phase, The Fono is embarking on an information and communications technology (ICT) infrastructure upgrade whereby all GPs will have the equipment to provide virtual consultations as preferred by patients.

Additionally, The Fono had considered whether or not an 0800 telephone number would make access easier for patients. Pre-Covid, the unknown demand and cost concerns prevented The Fono from progressing the idea. However, during Covid, the demand for accessing the relief packages via social media and GP consultations forced The Fono to pivot quickly and provide an 0800 number so that the call-centre could provide responsive support to the growing demand. The 0800 number is now the main contact Fono phone number which directs callers to the new Contact Centre for easy redirection to any Fono service.

Figure 4: Clinical Outreach Timeline

Access to The Fono Clinical Services		
Clinic-based	Community-based mobile	Integrated Mobile
Pre-COVID	COVID	Post-COVID

Figure 5: Transforming Flu Vaccinations Timeline

Access to The Fono Clinical Services		
Clinic-based	Drive-through service	Annual Drive-Flu Clinics
Pre-COVID	COVID	Post-COVID

Flu vaccinations

The demand for flu vaccinations was high during the Covid period and providing flu vaccines to large numbers of people was a challenge within the medical clinics because of the social distancing precautions. One way around this was to offer a drive-through service, where families could be vaccinated in their vehicles. The service was a great success with almost 600 people being vaccinated at our Henderson and Manurewa clinics over three Saturdays. This was a change to the provision of flu vaccinations prior to Covid as indicated in Figure 5.

Right throughout the Covid period, despite the urgency and need to focus on the development and maintenance of The Fono’s innovative approaches to the delivery of services, high levels of internal and external communication had to be preserved. This was essential to foster cohesion and unity of purpose amongst our now dispersed workforce where some staff were working from home, some at the practices and other staff in the outreach services and the food bank depot. There were social media posts that highlighted the services being provided and every day the CEO sent a personal inspirational message out to staff.

Reflections

Without doubt, Covid influenced a dynamic period of empowering transformation for The Fono. For the first time ever, over 60 staff out of 150 were redeployed into new roles which were physically demanding and vastly different to what they had been trained for. The willingness of the staff to help was undeniably strong, and the staff gave their all to help those in great need. Across all services the initial stages of Alert

Photo 4: Drive-Through Flu Vaccinations



Level 4 were unique and exciting, and once the novelty had worn off after a few weeks, work became increasingly demanding but remained rewarding.

Ala 'i sia (Tongan) or *Ia aoga* (Samoan) is “to be useful” and is a key concept which is highly upheld by Pacific people. To be useful gives one a purpose and a sense of belonging. To be useful makes one a contributor and enables one to feel satisfied with their place in the world. As an organisation which provided essential services, The Fono proved itself to be useful to Aotearoa New Zealand during the state of national emergency and Alert Level 4. This was an important achievement for The Fono, which validated the organisation’s humble assertion of its wisdom in knowing how best to provide effective services for Pacific.

Post-Covid, The Fono continues to drive forward the implementation of its integrated model of care by building on the transformations gained through the Covid pandemic. The equity gap between Pacific and mainstream Aotearoa New Zealand remains significant and can be more effectively addressed when drawing on the wisdom of those who are affected. The

Fono's integrated model of care represents that wisdom and is owned by the Pacific communities of New Zealand. It is time to harness that wisdom and apply the most appropriate methods of supporting people to close the widening equity gap. Now is the time.

"As always, look after yourselves, look after your loved ones and look after your community."

(Director-General of Health,
Dr Ashley Bloomfield, 28 / 03 / 2020)

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