Understanding I-Kiribati wellbeing and its implications for health and social services

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ABSTRACT

INTRODUCTION: Pacific people in Aotearoa New Zealand are a fast-growing population, and research shows that they do not experience the same health benefits others do. While effort has been made to better understand the needs of this population, the results remain largely unchanged. Additionally, practice methods and research to better understand the needs of this group tend to accommodate the more dominant Pacific populations, while less research has gone into understanding the smaller Pacific ethnic populations such as I-Kiribati. This research sought to explore I-Kiribati meanings of wellbeing and how these understandings contribute to creating more culturally appropriate social services.

METHODS: The research employed semi-structured interviews to explore the perspectives and experiences of five I-Kiribati professionals working in health and social services. Recruitment was through purposive sampling.

FINDINGS: The findings outline important aspects that contribute to the wellbeing of both Kiribati and other Pacific groups, factors preventing Pacific minority groups from accessing social services, such as language barriers, acculturation issues, and lack of cultural knowledge and understanding within health, and social services. The findings also suggested the importance of utilising cultural knowledge to inform social work practice, as well as the need for service providers to expand their understanding of the Kiribati culture through more collaboration with Kiribati communities throughout Aotearoa New Zealand.

CONCLUSION: The findings aid further understanding of wellbeing, knowledge on the Kiribati culture and needs of this group, while also informing practice methods for enhanced engagement to best meet the needs of ethnic minority groups.

Keywords: I-Kiribati; health and wellbeing; family and home; culture; community; culturally appropriate services

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There is a consensus that Pacific people living in Aotearoa New Zealand do not acquire the same health benefits as non-Pacific peoples and are disproportionately represented in lower socio-economic areas, have poorer mental health compared to non-Pacific peoples, live in over-crowded homes and have much poorer health in general than non-Pacific peoples (Ministry of Health, 2015). Additionally, Pacific peoples have lower access rates to health and social services despite their higher rates of health issues (Health Promotion Agency, 2018; Vaka et al., 2016). Furthermore, there is undeniable evidence that, although Pacific people access health and social care services, they do not attain the same health benefits as others (Tukuitonga, 2013). This suggests

that the services they are accessing may not be offering the right or appropriate treatment required (Tukitonga, 2013). While there have been vast improvements over the years in understanding Pacific wellbeing and how health and social services can accommodate the needs of this group, there is a gap in the literature around knowledge and understanding of the smaller minority groups such as Kiribati.

Although there are smaller numbers of I-Kiribati in Aotearoa New Zealand compared to other Pacific groups, they are the fastest growing Pacific group. According to the 2018 census, the population of I-Kiribati in Aotearoa New Zealand was 3,225. This shows an increase of over 50% since the 2013 census, which recorded 2,115 I-Kiribati people (Statistics New Zealand, 2020). Additionally, given the impacts of climate change, many I-Kiribati have migrated to Aotearoa New Zealand over recent years, in hopes for better future outcomes. Thus, the Kiribati population in Aotearoa New Zealand is predicted to increase further due to the effects of climate change (Schutz et al., 2019).

I-Kiribati wellbeing

Defining wellbeing is complicated due to its multi-layered nature. Like Māori, Pacific and indigenous people perceive wellbeing as holistic, encapsulating physical, social, spiritual, and mental dimensions (King et al., 2009; Ministry of Social Development, 2015; Tiatia, 2008). A shared aspect across Pacific cultures is that an individual cannot exist in isolation but, rather, exists in relation to others. Relationships with and between others in their community or village, the land, family, and the spirit realm are all co-dependent and are all important to Pacific worldviews of health and wellbeing (King et al., 2009; Tiatia, 2008). While there is limited research around what wellbeing entails for I-Kiribati in Aotearoa New Zealand, research by representatives of the Kiribati community highlighted four main aspects

perceived to be important for enhancing I-Kiribati wellbeing in the home. These are having a healthy environment, skills of self-reliance, maintenance of Kiribati custom, and respect within the family and the Kaainga (extended family hamlet) (Ministry of Social Development, 2015). Research by Kuruupu (2009) also highlighted the importance of community and working collectively to combat daily stressors to achieve wellbeing. Their research suggested that, while community/church gifting and gatherings may put a financial strain on some families, they perceive it to be necessary because it is believed that their community will be the ones who come to their aid when they are in need. This stems from the notion that a group of people can accomplish far more things in life than an individual can do alone. Furthermore, both studies highlighted that community and family are important contributors to I-Kiribati wellbeing as they provide the social space for the maintenance of I-Kiribati culture and traditional practices.

Challenges I-Kiribati face

There is limited literature concerning I-Kiribati in Aotearoa New Zealand, and only a few studies focus on the challenges I-Kiribati face. For instance, research by Gillard and Dyson (2011) and Teariki (2017) studied the support system around the settlement for Pacific migrants, including I-Kiribati. Their research indicated that many Pacific families felt there was a lack of support from the government to help them adjust to their new environment. Instead, they must rely on their own families and communities to provide financial and socio-economic support and, in most cases, the accommodation arrangement leads to overcrowded homes; this results in poor health, tension and unnecessary stress to both the host families as well as the newcomers (Teariki, 2017). Additionally, due to their smaller number, I-Kiribati tend to have fewer cultural networks compared to other Pacific groups, which may become an issue particularly for those who do not

have family living in Aotearoa New Zealand (Teariki, 2017).

Family violence is an issue facing a disproportionate number of I-Kiribati women and families in Aotearoa New Zealand. Domestic violence is very common in Kiribati and is generally seen as acceptable by both men and women (Teatao, 2015). In Kiribati, men are typically seen as superior to women and are justified in beating their wives if they are disobeyed, or if women are suspected or known to be unfaithful. This can be problematic for recent migrants from Kiribati, as they may be unaware of the legal consequences of domestic violence. Additionally, due to the commonality and perception that domestic violence is acceptable, such cases may go unreported, allowing for the continuation of violence in the home, consequently putting more victims at risk. Domestic violence not only impacts on the health of women but also restricts their power to make decisions, limits their access to health and social care services (due to fear), involvement in social activities, and even impacts on their ability to evolve and enhance their quality of life (Teatao, 2015). Furthermore, these issues are exacerbated by the barriers that prevent Pacific people from accessing health or social services. These barriers include lack of knowledge about the types of services Pacific people can access, language and communication barriers, fear of being judged, and minimal cultural knowledge or understandings on the part of the service provider (Cook et al., 2012; Tiatia, 2008).

Additionally, acculturation and adapting to the system, cultural and societal norms of the host country as a result of migration has been linked to mental health issues such as depression, as well as other health-related problems amongst Pacific peoples and other ethnic minority groups (Berry & Hou, 2005; Bhugra and Becker, 2005; Schluter et al., n.d.). Acculturation is a complex process occurring when individuals from a different culture migrate to another country and

eventually adapt to the culture of the host country (Khawaja et al., n.d.). Although previous studies have found acculturation to be linked to stress and health-related issues, some studies have found acculturation to have a positive impact on the wellbeing of migrants. Adapting to the cultural norms, values, and beliefs of the host country allows them to feel a sense of belonging (Khawaja et al., n.d; Ministry of Health, 2003). As there is no literature on the impact of acculturation on the Kiribati population, it is unclear whether acculturation contributes to the wellbeing of I-Kiribati in Aotearoa New Zealand.

Cultural competency

Cultural competence requires an awareness of cultural diversity. It recognises the importance of culture and its role in care delivery, development of cultural knowledge, beliefs and worldviews, and the ability to operate respectfully and effectively when working with people from different cultures (Vaughan et al., 2018). The need for culturally appropriate health and social services is not a new topic and, although there has been great improvements over the years in research into understanding the needs of Pacific people and the development of Pacific models of health and wellbeing, it is essential to note that not all approaches and models of care are fitting for all Pacific groups due to the diverse cultures, values and or beliefs that are unique to each culture (Crichton-Hill et al., 2013; Mental Health Inquiry Pacific Report, n.d.; Mitaera et al., 2016; Southwick et al., 2012; Tiatia, 2008). While Pacific models of health are important, there is tension regarding ethnic-specific and Pan-Pacific when it comes to constructing approaches and models of care for Pacific people (Mental Health Inquiry Pacific Report, n.d.). However, there is some research to suggest that drawing upon, and utilising, ethnic-specific concepts or approaches have been deemed effective and valuable to many Pacific peoples, such as the Paolo suicide prevention resource

for Samoans and the Cook Islands ethnic-specific concepts and approaches to mitigating family violence (Mental Health Inquiry Pacific Report, n.d; Mitaera et al., 2016). Their findings also suggest that the process of enhancing the lives of Pacific peoples should always be supported by the theories and practice methods unique to their specific culture (Mitaera et al., 2016; Ravulo et al., 2019).

Methods

This was a small, qualitative study, using semi-structured interviews with five I-Kiribati professionals working in health, education and in the public sector. All five participants are active members of the Kiribati community. As an I-Kiribati researcher, I was able to contact some of the leaders of the Kiribati community via email and telephone, who then connected me to potential participants who met the criteria of the study. All interviews were digitally voice recorded and transcribed verbatim. Thematic analysis was undertaken, allowing the researcher to explore key themes from the data (Burnard et al., 2008). The process of analysis took an inductive approach which began by thoroughly reading through the transcripts and taking note of any significant points or themes that arose from the data. Next, the topics were given labels and arranged in a way that related to both the research aims and the ideas raised by the participants. Once themes were labelled and grouped, patterns, resemblances in perspectives, and experiences were observed to gain a better understanding of the participants' views. Proper cultural protocol and approaches were considered when working with the participants. The project was reviewed by the author against the ethical principles outlined in the Massey University research code of ethics with feedback from peers and from the research supervisor. Regarding ethics, the project was assessed and subsequently registered as low risk and therefore was not submitted for full review by the institutional ethics committee.

Pseudonyms are used throughout this article. Due to the small number of participants, the findings are not generalisable. However, this research used semi-structured interviews, which provided a means of gathering in-depth information and insight from the participants.

Findings

Meanings of I-Kiribati wellbeing

This section explores meanings of I-Kiribati wellbeing from the perspectives of the participants. The participants believed that wellbeing is not only about being physically well but is holistic, involving the social domain, spirituality, culture, family, community, and the home. These aspects were perceived to interconnect and exist together to achieve wellbeing, rather than existing alone. Three broad themes were identified: Family and home, culture, and community.

Family and Home

Family and home were believed by the participants to be important aspects of wellbeing. All participants described wellbeing in the home as having a healthy support system within the family, spending quality time with family, respecting one another, loving and nurturing your children and ensuring that parents are meeting children's needs, and lastly, that there is financial stability:

> Wellbeing to me as an I-Kiribati is not just about having no medical condition, it's based on having strong family support, financial support. I believe that if you are raised in a loving and caring family you will be healthy, you have a clean environment, dishes are done, happy home, the parents and siblings work well together to help around the house. (Sally)

> I think wellbeing starts within the home, it's about looking after your money,

your house, and ensuring your children feel supported and happy. So even the support system needs to be strong within the family because if there are fights in the family it will cause dysfunction and wellbeing won't exist. (Areta)

These findings were in line with the literature (Gillard & Dyson, 2011; Kuruppu, 2009; Ministry of Social Development, 2015) that family includes both the nuclear and extended family and is the foundation of many Pacific cultures. A recurring finding in the research was that establishing wellbeing in the home is necessary for other areas of one's life to flourish, and if wellbeing is not achieved in the home first, then it may cause dysfunction between family members and affect other areas of wellbeing. Within the family structure, it is important to know what your roles and responsibilities are: to obey both male and female elders/leaders of the family and to have a helpful attitude (Ministry of Social Development, 2015). Their findings also highlighted that within Te katei (customary practices) the concept of Te karinerine (respect) is core. This suggests that family is the foundation of I-Kiribati wellbeing. The participants also agreed with the broader Pacific literature (King et al., 2009; Tiatia, 2008) that both financial and emotional support, praying, spending time with the family, and socialising also contribute to their wellbeing.

Culture

Maintaining cultural practices, values, and beliefs were also important to all five participants in achieving wellbeing. Additionally, feelings of sadness and homesickness as a result of migrating to Aotearoa New Zealand led to the desire and need to maintain cultural links with their homeland. Thus, establishing a community where I-Kiribati can come together to celebrate, socialise and revive Kiribati cultural practices were deemed significant and important in achieving I-Kiribati wellbeing. Additionally, given the impact

of climate change, the number of I-Kiribati migrating to Aotearoa New Zealand is predicted to increase over the coming years, thus maintaining the Kiribati culture in Aotearoa New Zealand is significantly important, especially for the next generation of Aotearoa New Zealand born I-Kiribati.

To me knowing your culture … your language is part of wellbeing … because if you don't, something is missing and you don't feel whole. Sometimes when I am feeling down, I will do something that connects me back to my culture … like for example, I will sit down and begin weaving Te mae (traditional Kiribati garland) and just by doing this I will all of a sudden feel happy ... it's almost as if I'm back home again. (Bella)

Our goal as a community is to sustain the Kiribati culture because our belief is that there are many ways that our people can be helped but we also believe that our Kiribati culture, our values and how we use these, can help the wellbeing of our people in their environment and homes. (Tatibe)

Although culture is difficult to define, it is known to encompass many things, such as one's values, traditional beliefs, language, way of living, and cultural practices distinct to a particular culture (Tiatia, 2008). Despite the limited research around the implications of culture in I-Kiribati wellbeing, the findings were consistent with the literature that maintaining one's cultural identity is an important contributor to people's wellbeing (Biddle & Swee, 2012; Dockery, 2019; Ministry of Social Development, 2003). Additionally, the literature on culture is often explored in deficit terms in attempts to explain cultural differences in health or wellbeing (Tiatia, 2008). However, there are possible opportunities for service providers to diminish inequalities experienced by minority groups through better research and understanding of the beneficial effects of culture in care delivery (Tiatia, 2008).

Furthermore, the findings reflect that of the current literature (Khawaja et al., 2016; Ministry of Social Development, 2003) that maintaining and having a strong cultural identity provides feelings of belonging and security. One participant expressed that when she is feeling sad and low, she will begin doing something that links her back to her culture, such as creating a Kiribati garland, and by doing this, she will, all of sudden, feel happy. Therefore, sustaining the Kiribati culture is vital for I-Kiribati living abroad, as it allows them to feel connected to their motherland.

Community

Community was also perceived to be important to I-Kiribati wellbeing. In the Kiribati culture, Te mwaneaba is a traditional meeting hall, where people of the village gather for meetings, and the elders make decisions for the wellbeing of the villagers. It is a form of governmentality that forms and guides how an I-Kiribati thinks and acts (Namoori-Sinclair, 2020). Given the vital role of Te mwaneaba system, I-Kiribati living in Aotearoa New Zealand may find it difficult to seek help from social services as it is a foreign concept to them, and instead are more likely to seek aid from their families and trusted community leaders / members; this stresses the importance of collaboration between Kiribati communities and social service providers.

> When we look back to our childhood and how we were raised … Te mwaneaba is a place of gathering … everyone gathered at te mwaneaba and that's wellbeing … when we are at te mwaneaba we gather there to talk about some of the things we can do in our community … if it's to help a family with their plantation… and these are all part of our wellbeing … these are a part of our cultural values which are important not to lose when we come here. (Tatibe)

The findings from the current study found that collectivity and community are significant components for I-Kiribati wellbeing that should be encouraged and supported, especially for new I-Kiribati migrants. This was also reflected in the literature (Gillard & Dyson, 2011; Kuruppu, 2009; Ministry of Social Development, 2015; Namoori-Sinclair, 2020) which discussed the vital role of Te mwaneaba and how it is a central part of I-Kiribati culture and wellbeing as it provides a space for families and individuals to gather together and discuss the responsibilities of a community around ways to enhance wellbeing, celebrate their culture through dancing, singing, and more importantly, to maintain the Kiribati custom and ensure that it is passed down to the younger generations. Additionally, there is a strong sense from the findings that community has an even greater importance to the participants now that they are living in Aotearoa New Zealand. Thus, coming to Aotearoa New Zealand can be a cultural shock for many I-Kiribati migrants, as they try to navigate life through a system that stresses self-responsibility and individualism (Berry & Hou, 2016; Bhugra & Becker, 2005; Namoori-Sinclair, 2020).

Additionally, findings of the current study suggest that service providers working with recent migrants from Kiribati should ensure their clients are well connected with their communities, as this can enhance their wellbeing and contribute to their settlement in Aotearoa New Zealand. However, this can be made complicated if both service providers and the families do not have connections or knowledge of the Kiribati communities around Aotearoa New Zealand. Therefore, more community involvement and exposure across Pacific communities is necessary if service providers are to further their cultural knowledge, build meaningful connections with I-Kiribati families to ensure they are well equipped with the right support which, in turn, can contribute to better outcomes for Pacific peoples (Mitaera et al., 2016; Ravulo et al., 2019; Tiatia, 2008).

How do these understandings contribute to creating more culturally appropriate social services?

This section explores a few of the main challenges that hinder I-Kiribati from accessing social services. The participants identified that having some knowledge of the Kiribati culture and a few of the challenges they face are important to understand so as to help I-Kiribati achieve wellbeing. Without a deep understanding of the Kiribati culture and ways of approach, social services have minimal success in providing I-Kiribati with appropriate help.

Cultural challenges: Language barrier

Lack of understanding and speaking the English language was a common barrier that some of the participants believed hindered I-Kiribati from accessing social services:

> Language is perhaps something stopping our people from seeking help, they may feel shy or embarrassed to speak English. (Stelly)

> I am always happy when I work in the hospital and I see Kiribati people because that's where I can help my community, I can help translate for them, especially if they can't speak English. There is some medical terminology and sometimes it's hard for them to express themselves which is a worry for me in case they go home with a completely different medicine or understanding. (Areta)

> The other thing is when they are working with a professional, that they don't like to ask many questions because they feel its disrespectful … Kiribati people tend to always say yes even if they do not understand. So, it's important to understand this because sometimes "yes" will mean "no". (Stelly)

This finding is also in line with previous literature (Schutz et al., 2019; Tiatia, 2008; Vaka et al., 2015) where it is found that difficulty speaking and understanding the English language is a common barrier preventing Pacific peoples from accessing social and health services in New Zealand. This is important to note, because language barriers could impact the quality of care for the client—for instance, if there is any confusion or misunderstanding regarding the patient's illness, this may affect their diagnosis or the patient may not understand the instructions given for the use of their medication (Tiatia, 2008; Vaka et al., 2015). It is important to involve the entire family in the discussion (if possible) because, the chances are, one or more family members present in the home may be able to help the client understand what is being discussed.

Shyness/shame

Shyness was another common issue believed to hinder I-Kiribati from seeking help. Seeking help from outsiders can, at times, be difficult as it is not a part of the Kiribati way or culture, and this can prevent many I-Kiribati accessing social services.

> In the Kiribati culture we were raised to not be so "reberake" [forthcoming/upfront] it's sort of frowned upon, so it's in our culture to just wait and be helped instead of going there to seek help. (Stelly)

Another informant stated:

> Another barrier is culture, they don't understand how Kiribati people operate … most of the Kiribati people don't tend to ask for help, they don't want to be "out-there" so they tend to hold back … and if you think about it, there are many differences within Pacific groups and I feel like Kiribati people are different to other Pacific groups, in the sense that we are not so outspoken, we are more reserved and not willing to seek help, and that's our culture. (Sally)

While shyness to speak English or to approach services was seen as a recurring

problem, some other participants noted that laughing for no good reason is something non-I-Kiribati practitioners should be aware of when working with I-Kiribati families. Laughing without good reason may discourage them and hinder their willingness to engage.

> The other thing is laughing … because when you laugh, I-Kiribati people see that as mocking, and so you should never laugh for no reason when you are working with an I-Kiribati because that's their perspective, and so I never do this unless the person makes a joke. As a practitioner it's important to understand this, even if you're not laughing for that reason, but an I-Kiribati may take it as mocking or making fun of them. (Bella)

The findings suggested that the cultural mentality of being too forthcoming is usually not culturally accepted. This is perceived by the participants to be the main underlying issue preventing I-Kiribati from seeking help from many social services. Additionally, given that family and community are perceived to be two very important contributors to I-Kiribati wellbeing, it is no surprise that I-Kiribati will often seek aid from their families and communities first—before going elsewhere. This cultural mentality can therefore be misunderstood by non-Kiribati service providers as a reluctance to seek help from social service providers. Thus, the need for more collaboration between Kiribati communities and social services is important as this can provide a safe space for community members to discuss any concerns they are having or to seek help to mitigate some of the barriers that Pacific minorities face (Tiatia, 2008).

Difficulty with adapting to Aoteroa New Zealand culture and way of living

Lack of flexibility with adapting to the Aotearoa New Zealand culture and way of life was another recurring challenge that was identified. Although cultural knowledge and

understanding is an important component of I-Kiribati wellbeing, the participants recognised that it is also essential for I-Kiribati in Aotearoa New Zealand to adapt and have some awareness and knowledge of the Aotearoa New Zealand culture and system, as this will help them achieve wellbeing. However, this was perceived by the participants to be something that I-Kiribati people themselves need to address first:

> As one of the leaders of the Kiribati community, one of the challenges we have faced is … how can we reconcile the New Zealand way of thinking and the Kiribati thinking? That's the challenge, because their mindset is fixed … they have come from Kiribati with this type of thinking and ways of doing things and they want to bring that approach here which doesn't work or fit in this context. (Tatibe)

The normality and acceptance of domestic violence amongst many I-Kiribati people was a concern for one participant. The participant uses this as an example to emphasise her point that I-Kiribati need to adapt and learn the system in Aotearoa New Zealand, especially those who have recently migrated from Kiribati:

> We get a lot of seasonal workers coming here from Kiribati and their thinking is very typical of Kiribati culture, where they accept violence as the norm and so we have to educate and tell them that if this occurs here in New Zealand you will be punished and imprisoned for it. Even women, they have this idea that this is normal and so when it happens in their home, they accept it and won't say anything. (Bella)

The current study also found that the lack of flexibility of I-Kiribati to adapt to the Aotearoa New Zealand culture and system is another barrier preventing I-Kiribati from achieving wellbeing. The literature states

that individuals who migrate experience many stressors, including the loss of cultural norms, social support systems and feeling homesick which, in turn, impact on their mental wellbeing (Berry & Hou, 2016; Bhugra & Becker, 2005; Gillard & Dyson, 2011; Teariki, 2017). The participants' views accorded with the literature when they stated that when they first migrated to Aotearoa New Zealand, it was difficult to adjust to the culture and way of life. The participants stated that, because I-Kiribati do not tend to seek help from outsiders, their families and community are usually their first point of help. This suggests that I-Kiribati in Aotearoa New Zealand may find it difficult to access professional help as it is not in their "I-Kiribati way" or culture to ask for help from those they do not know. This reinforces the importance of collaboration between I-Kiribati communities and social service providers as they can provide the link necessary for I-Kiribati to obtain the help they require.

In the previous section, the participants identified a few common barriers that hinder I-Kiribati from accessing social services. The participants provided their views on how these challenges can be mitigated. This next section will present a few themes related to what the informants believed would contribute to creating culturally appropriate social services for I-Kiribati.

Having knowledge of the Kiribati culture/ways of communicating

The informants believed that, due to some of the barriers I-Kiribati face, having some knowledge of their culture, language, and ways of approach can help mitigate some of these issues.

> When working with I-Kiribati, it is good to talk non-sense first, to warm up first and then get to the main points because if you go straight to the point, it can be off-putting. Also asking open-ended questions because Kiribati people won't elaborate when you ask them closed

questions, and knowing how to talk to them … it's more appropriate to ask rather than to tell. So, for example, "shall we do this?" rather than "let's do this". (Bella)

> When working as an interpreter I would always tell them that if they have to touch the head they need to ask the patient first, because a Kiribati person will become very angry if you come and touch their head especially when you approach from the front. Unless you ask for permission … and Kiribati people are never violent to someone they don't know unless they feel threatened and touching their head is a big threat to them. (Bella)

> Being at their eye level is important because it is less intimidating for I-Kiribati, especially if you are a professional that they do not know. I never stand and talk to them, I will actually get down to their level when talking to them, so I sit down or sometimes I will kneel when there are no chairs. But the key thing for me is not to be standing and talking above them. (Stelly)

Collaboration

Collaboration between Kiribati communities and social service providers was deemed to be a significant and necessary step towards mitigating some of the cultural barriers and challenges experienced by I-Kiribati in Aotearoa New Zealand. The participants strongly believed that having representatives from the Kiribati community who are able to work in partnership with other social service providers could help I-Kiribati feel more comfortable in approaching social services. By creating this link, the participants feel that I-Kiribati can easily approach the leaders about whatever needs they have, and the leaders will then link and guide them if necessary, to the appropriate services:

> Looking at the perspectives of service providers who are non-I-Kiribati,

understanding our culture is important and also leadership. Say, for instance, I was a Pacific service provider wanting to know how to help I-Kiribati consumers, I need to know how to partner up with Kiribati people, but if they just leave us out, then that's a problem … because as an I-Kiribati, I know that we don't like to be the one to approach first. (Tatibe)

There needs to be that trust and rapport, and I think through the body of our committee, the trust is already there, so we feel more comfortable talking and telling them what is going on. Also, because the Kiribati representatives are in a place where they can inform those services on the appropriate cultural approaches to use. (Sally)

The current study raised important issues and challenges that face I-Kiribati in Aotearoa New Zealand. While the participants believed that understanding Kiribati worldviews and culture are significant to developing more culturally appropriate social services, the participants also stated that working in partnership with other service providers would be a better solution to some of these issues. Given Te mwaneaba system that I-Kiribati are accustomed to, it makes it difficult for them to seek help from those they do not know. Instead, the most effective way of reaching out to I-Kiribati in Aotearoa New Zealand is to collaborate with the Kiribati community leaders or representatives because they have full understanding of the Kiribati culture, appropriate methods of approach and, more importantly, they have established trust and rapport with their community members. The current findings reflect the broader literature on indigenous social work (Gray et al., 2008; Rowe et al., 2015) which reinforces the importance of working alongside indigenous communities to implement cultural practices and ideas in this modern-day context for the purposes of healing and empowerment of the community. Thus, knowledge and practices learned from indigenous communities can be applied in western

contexts, which becomes particularly important when working across culturally diverse groups (Gray et al., 2008; Ravulo et al., 2019).

The results from the current study have consistently highlighted the importance of culture and its role in the wellbeing of I-Kiribati in Aotearoa New Zealand. The participants agreed with the literature (Cook et al., 2012; Te Pou, 2010; Tiatia, 2008) that it is necessary for service providers working with Pacific or minority groups that are of a different culture, to have some understanding of their client's cultural background as this helps the practitioner become more attuned and sensitive to their client's cultural beliefs, values, and specific needs. However, because service providers have little knowledge of the Kiribati culture, it is challenging to provide the necessary help to achieve I-Kiribati wellbeing. Community involvement and collaboration are therefore significant for effective service delivery (Gray et al., 2008; Rowe et al., 2015).

Recommendations

The recommendations of the study have been divided into two categories: practice recommendations and research recommendations. The practice recommendations of the study are: to increase the diversity of the Pacific workforce, as this can help mitigate some of the barriers that prevent Pacific people from accessing health and social services. Secondly, to have more Pacific workers involved at the management and decision-making level as this allows Pacific people to be active in creating and making policies that will benefit their people. And lastly, to increase involvement and collaboration between service providers and Pacific minority communities as this can establish positive relationships and connections, particularly with smaller communities such as I-Kiribati— this can allow for the integration of cultural knowledge, cultural practices, language skills, and a deeper understanding of the issues Pacific people face.

The research recommendations of the study are: to attain better research on how to address some of the issues and barriers Pacific minority groups face in accessing health and social services. This will help inform policy makers and those in management roles who have the power to make better changes for the wellbeing of Pacific people in New Zealand. And finally, to have more research around ethnic-specific initiatives and interventions that can support and accommodate the specific needs of Pacific minority groups.

Conclusion

Overall, this study met its research aims of exploring the meanings of I-Kiribati wellbeing and how these understandings contribute to creating more culturally appropriate social services. The method used for data collection was a qualitative design using semi-structured interviews. The findings of the study were mostly consistent with those found in the reviewed body of literature. However, participants did offer perspectives that extended the information in a few areas. According to the participants, maintaining Kiribati cultural knowledge, values, and beliefs are significant contributors to the wellbeing of I-Kiribati in Aotearoa New Zealand; merging the best of both Kiribati and Aotearoa New Zealand cultures can positively impact and enhance the wellbeing of I-Kiribati living in Aotearoa New Zealand.

Additionally, challenges and barriers that prevent I-Kiribati from seeking and accessing social services are mostly influenced by cultural factors and a lack of Kiribati cultural knowledge on the part of the service providers. Thus, service providers can utilise this knowledge when working with I-Kiribati people to develop effective strategies that will improve their accessibility to social services. However, due to the small-scale qualitative nature of this research, its scope is limited. Thus, more research is needed to add further knowledge and understanding around

Pacific minority groups. The study also supports the broader literature on the importance of ethnic-specific interventions, which recognises that the process of enhancing wellbeing for Pacific peoples should always be underpinned by the theories and concepts unique to their own cultures. The Kiribati proverb "*Kateira ma rabakaura bon kinaakira*" which translates to "our culture and our knowledge are our identity" perfectly sums up this point, as it guides us to recognise and ground our approaches in indigenous Pasifika concepts and ideologies to empower and enhance the wellbeing of Pacific minority groups in Aotearoa New Zealand.

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