



Who are the Best Teachers of Pasifika Children?

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ABSTRACT

This paper discusses the complexities of engaging with Pasifika communities in Aotearoa New Zealand and examines the assumption that the best people to provide services to Pasifika children *have to be Pasifika*. The paper offers strategies on building the capability of non-Pasifika staff to work with Pasifika children and their families.

Position paper

Keywords

Competence, cultural differences, Pasifika children, professional training, special needs, teacher development

INTRODUCTION: AT A CONFERENCE ONE DAY

“Who are the best teachers of Pasifika children Ezra?” snapped the middle-aged, overly-enthusiastic, papalagi academic with the unidentifiable Euro-American accent from the centre of the front row. I had met him 90 minutes earlier and knew he was going to be trouble.

I decided to set up early, organise my transparencies, finally found my workshop room and discovered that I wasn't the first one there. He was already waiting. Tap tapping his pen on the chair in front, flicking through the conference programme and circling stuff. He was the first to the room, greeted me with a huge smile and a well meaning “Talofa” and then asked if I had copies of my presentation – only so he could focus on me and the presentation rather than take notes. He had checked with the registration desk twice to make sure my workshop was in the right place as there were a number of last minute room changes to the morning programme. He was looking forward to the session as he was searching for strategies to better understand the Pacific Island boys in his school – “Great,” I thought. He was one of *those guys*. I was already nervous, being my first major presentation and a newbie to the education sector and now I had this guy who was hinging his whole teaching practice with Pasifika students on me – no pressure.

I paused, wiped the glistening beads of sweat from my brow, took a deep breath and squeaked out my answer, which I won't share with you now as I've still got 1000 words to write. It was 1997 and it was the first time I was asked *that question* and it remains the one I get asked the most – particularly when people find out my job title. The assumption is that the best people to provide services to Pasifika children *have to be Pasifika*. This certainly raises a number of issues for a predominately papalagi workforce of education and health practitioners when faced with an increasingly diverse client base.

A PASIFIKA POSITION

Pasifika children and families statistically have a low uptake of services provided by the Ministry of Education, Special Education. There are a number of factors that contribute to this which I describe as the *triple-blind*:

1. Untangling the stigma of special needs and raising the awareness of special education.
2. Engaging with ethnically and socially diverse and complex communities like Pasifika in Aotearoa.
3. Building the capability of a predominately non-Pasifika workforce to work more effectively with Pasifika children with special needs and their families.

I want to focus on the third point but briefly in terms of special needs and disability awareness, generally Pasifika peoples still have a way to go in terms of addressing and changing negative mindsets, deep-rooted stereotypes and beliefs relating to people with special needs and disabilities. There is often an association between the person's impairment and the perception or belief that they have been afflicted or cursed by their own (or parents, village, ancestors and close family members) breach of tapu or sin – a view still held by many people within the Pasifika communities in Aotearoa (Foliaki, 2005). Secondly, many agencies and organisations continue the *one size fits all* engagement approach. They continue to see themselves as *separate* from the community and use language like *them* and *us*. The truth is they don't fully understand the diversity and complexity of ethnic and social communities like Pasifika, clumping the six to seven diverse Pacific peoples into one homogenous group. Overwhelming them with unnecessary consultation meetings, poor and irrelevant information and complicated systems. Usually they are the agencies/ organisations' processes that are imposed on these communities. As a result families become disconnected and disinterested. I am proud to say it is an area we are improving in the Ministry through the stepped up *Pasifika Education Plan 2008-2012* with its community engagement focus where we have acknowledged that *we are part of the community*, no longer separate.

Building the capability of our non-Pasifika staff to work more effectively with Pasifika children and their families with special needs is critical to achieving better outcomes for Pasifika children. The need for practitioners to be culturally competent and have basic cultural knowledge of Pasifika families is more pertinent today given the growth of Pasifika peoples in Aotearoa (recent projections estimate

that there will be an increasing concentration of Pasifika people in Manukau and Waitakere over the next 10 to 15 years) and low numbers of Pasifika health and education professionals. The situation is particularly acute in special education because of the specialist roles. Although the recruitment of Pasifika staff is a critical strategy, it is a long term one with little promise of the investment because of the high premium on Pasifika graduates.

A key strategy for the Ministry has been the development of the Pasifika Cultural Responsiveness Programme (CRP) which has been successfully delivered nationally through the various Special Education offices by its Pasifika staff. What makes the programme so unique was it was developed by Pasifika field staff for their non-Pasifika colleagues and a significant feature of the programme is connecting the cultural knowledge and theory with practice – that solid, practical, *this is how you do it* stuff.

Cultural competence is about the acquisition of skills to achieve a better understanding of members of other cultures (Bacal, Jansen & Smith, 2006; Durie, 2001). The *Pacific Cultural Competencies Framework for District Health Boards* (2005) defines cultural competence as ‘the ability of individuals and systems to respond effectively across cultures in a way that recognises and respects the culture of the person, family, community or organisation being served’ (p. 5). The framework further highlights that ‘... cultural competencies are a process not an end point ... with the ongoing development of Pacific cultural competency framework standards there is an equally important need for the health sector to provide ongoing training in cultural competence and cultural awareness’ (p. 3).

Although cultural competency training and awareness isn’t new, I must admit it does seem to be the new *black* with almost every organisation, department and numerous professional bodies requiring that its members are culturally competent. Rightly so, considering the disparity for groups such as Pasifika and Māori but I am cautious about the use of the words *cultural* and *training* in the same sentence. Culture for starters is such an elusive and subjective concept because it is so fluid and ever evolving. Throw in the fact that Pasifika people are not homogenous and it does not refer to a single ethnicity, nationality, gender or culture and it is the voices of this Pasifika diaspora in Aotearoa we are focused on – one then begins to understand the complexity that is *Pasifika*.

Therefore developing *cultural training* programmes and pinning a theoretical framework to them, although terribly convenient and impressive, sometimes disguises the deeper issues to embracing diversity. That is *you*, the trainee or practitioner. You bring your own cultural identity, social, personal and professional experiences to the relationship – so don’t leave them at the gate. Meaningful cultural understanding and awareness comes about when one begins to empathise and relate oneself to the situation over time. Completing a two day programme certainly doesn’t make one fully culturally competent, rather its part of a continuum which practitioners need to supplement with cultural supervision and further professional learning opportunities. This may include participating in an event with your local Samoan community, celebrating a Niue haircutting ceremony, learning Cook Island Māori or attending a Tongan church service. We’ve made a deliberate effort in the Pasifika

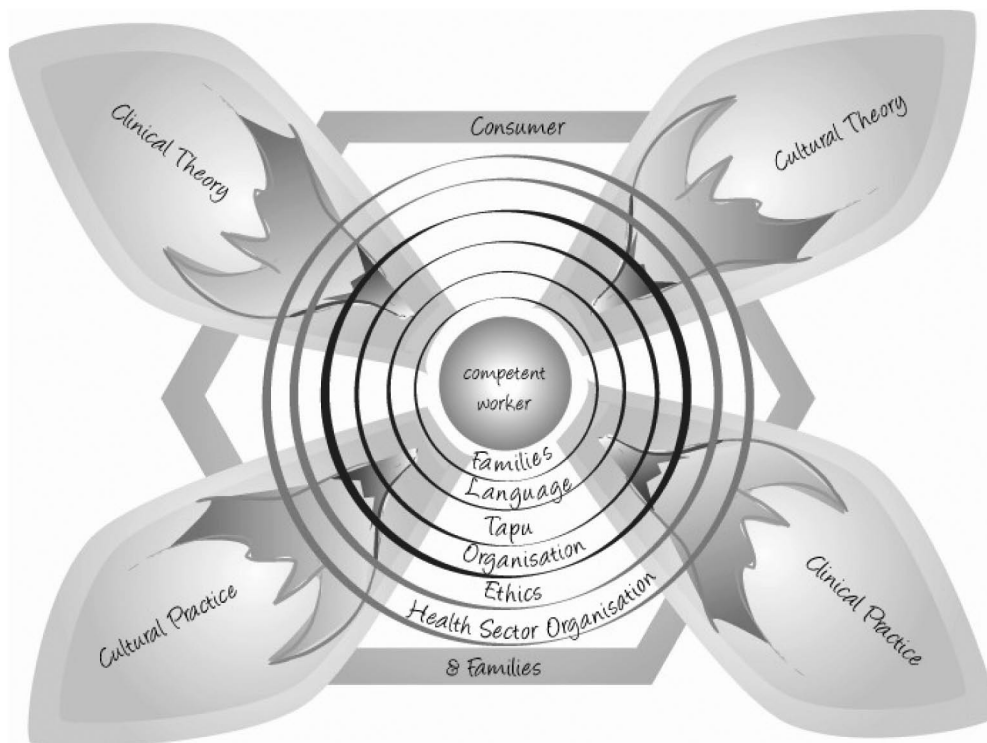


Figure 1. Seitapu Model.

Source: Puloto-Endemann, F. K., Suaali'i-Sauni, T., Lui, D., McNicholas, T., Milen, M., & Gibbs, T. (2007). *Pacific mental health and addiction cultural and clinical competencies framework*. Retrieved July 30, 2008 from <http://www.leva.co.nz/page/14-Projects+Seitapu>. Published with permission of Te Pou o te Whakaaro Nui: The National Centre of Mental Health Research, Information and Workforce Development. July 2007.

CRP to make participants more understanding of Pasifika cultures in Aotearoa as well as affirming their professional and personal skills and judgements when working with Pasifika families – a practitioner centred approach.

There are a number of Pasifika theoretical frameworks and models proposed by Pasifika researchers such as

- Tamasese, Peteru and Waldegrave's (1997) concept of Fa'afaletui
- Teremoana Ma-Ua-Hodge's (2000) Tivaevae model
- Jean Mitaera's (1997) concept of the Researcher as the First Paradigm
- Konai Helu-Thaman's (1992) metaphor of Kakala
- Koloto's (2001, cited in Koloto, 2003) Pacific Cultural Competency framework.

A recent model, and one that aligns most closely with the practitioner centred approach that we required, is the Seitapu model by Pulotu-Endemann et al. (2007). Developed for mental health practitioners when working with Pasifika clients, the Seitapu model, in the shape of a flower, places the practitioner at the centre of the model because it is they who will impact most significantly on the client and their family. The model shows that 'competency in cultural theory and practice must work alongside competency in clinical theory and practice. This is represented by the four petals of the flower' (Pulotu-Endemann et al., 2006, p. 8).

In the ideal world we would have more skilled and qualified Pasifika practitioners working in the system – but we don't. Although we will continue to strive for the ideal, the development of professional learning programmes and cultural competencies to ensure non-Pasifika staff work effectively with Pasifika children is equally as important as the recruitment of qualified Pasifika students to special education. One can't be at the expense of the other because they are so interdependent.

BACK TO THE CONFERENCE ...

"... the best teachers of Pasifika children?" I repeated nervously waiting for the fire alarm to sound and then it came to me, and I repeated the words again but this time gave as my response: "The best teachers of Pasifika children are ... the best teachers. It's empathy, not just ethnicity, that's important." Silence for a two very long seconds. Then loud applause from the centre of the front row followed by grunts of support and approved nodding from the participants.

I've lost count of the number of people who have asked me for the set of protocols or guidelines of how to better engage with Pasifika peoples, seriously. People want the quick fix training programme or certificate to tick the box and often neglect their most powerful tool, *themselves*. Cultural training, awareness or responsiveness isn't just learning about the *other* side. It should take into account one's own cultural identity and experiences and supplement one's own professional learning and skills. Culture absolutely counts in providing services to Pasifika children and students – just remember to bring yours as well.

NOTE

"I didn't realise I was a Pasifika person or an Islander until I arrived at the airport in Mangere, before that I was a Samoan!" This quote illustrates perfectly the multi-ethnic diversity that is *Pasifika, Pacific, Polynesian, PI or Islander* and a caution not to use it freely or loosely to describe all *brown people*. Pasifika is a collective term used to refer to people of Pacific heritage or ancestry who have migrated or been born here in Aotearoa, New Zealand, Australia and the United States. Pasifika include recent migrants or first, second, third and subsequent generations of New Zealand-born Pasifika people. Pasifika are men, women and children of single or mixed heritages who identify themselves with their indigenous Pacific countries of origin because of ancestry or heritage, family and cultural connections with Samoa, Cook Islands, Tonga, Niue, Tokelau, Fiji, Solomon Islands, Tuvalu and other Pacific countries.

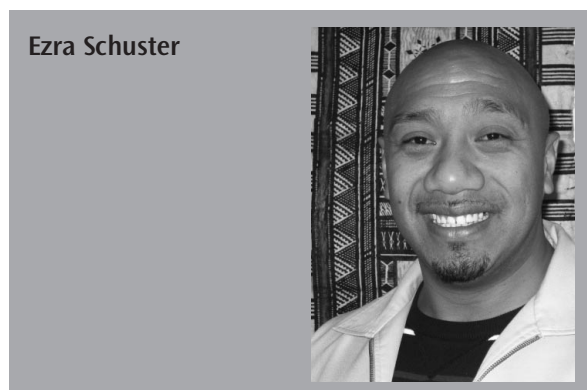
Pasifika people are not homogenous and Pasifika does not refer to a single ethnicity, nationality, gender or culture.

REFERENCES

- Bacal, K., Jansen, P., & Smith, K. (2006). Developing cultural competency in accordance with the Health Practitioners Competence Assurance Act. *New Zealand Family Physician, 2006, 3(5)*, 305–309.
- Durie, M. (2001). *Cultural competence and medical practice in New Zealand*. Australian and New Zealand Boards and Council Conference, November 2001. Wellington, New Zealand.
- Helu-Thaman, K. (1992). Looking towards the source: A consideration of (cultural) context in teacher education. *ACCESS Critical Perspectives on Education Policy, 11(2)*, 44–50.
- Koloto, A. H. (2001). *Towards Pacific cultural competency at South Auckland Health. A background document prepared for the Clinical Board*. An unpublished paper. Auckland: South Auckland Health.
- Ma-Ua Hodges, T. (2000). *Ako pai ki Aitutaki: Transporting or weaving cultures. Research report of field experiences to the Cook Islands*. Wellington, New Zealand: Wellington College of Education.
- Mitaera, J. (1997). *The researcher as the first paradigm*. Unpublished presentation to the Masters course: Research as praxis Māori and Pacific nations education. Wellington, New Zealand: Victoria University of Wellington.
- Pacific Cultural Competencies Framework for DSD funded NASCs. (2005). Adapted with permission from the work of Lita Foliaki. Retrieved July 30, 2008, from <http://www.piass.org.nz/PCCFwork.doc>
- Pulotu-Endemann, F. K., Suaali'i-Sauni, T., Lui, D., McNicholas, T., Milen, M., & Gibbs, T. (2007). Pacific mental health and addiction cultural and clinical competencies framework. Retrieved July 30, 2008 from http://www.tepou.co.nz/file/PDF/publications/Microsoft_Word___Seitapu_Framework_TOBEPDFVersion.pdf

Tamasese, K., Peteru, C., & Waldegrave, C. (1997). *O le taeao afua – the new morning. A Qualitative Investigation into Samoan Perspectives on Mental Health and Culturally Appropriate Services*. A research project carried out by The Family Centre.

AUTHOR PROFILE



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Ezra Schuster is the National Pasifika Manager with the Ministry of Education (in Auckland) and manages the newly formed Northern Region Pasifika team working right across the education sector. He led a special education project to Tokelau in 2007 with the follow-up later this year. Ezra has been involved in the education sector, both domestic and international, for a number of years and more recently in national leadership roles. Ezra has travelled extensively and has lived and worked in Thailand, Japan and the wider Pacific region. He sits on a number of advisory boards and has developed several educational and youth leadership initiatives, with a focus on working with Pasifika communities.

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