

Pacific Health Review

Making Education Easy

Issue 36 – 2023

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Abbreviations used in this issue

COVID-19 = coronavirus disease 2019
CPAP = continuous positive airway pressure
DHB = District Health Board
FTE = full-time equivalent
HPV = human papillomavirus
OECD = Organisation for Economic Co-operation and Development

Kia orana, Fakaalofa lahi atu, Talofa lava, Malo e lelei, Bula vinaka, Taloha ni, Kia ora, Greetings.

Welcome to the latest issue of Pacific Health Review.

This issue covers a range of topics of interest to Pacific people living in Aotearoa NZ, including a suggested overhaul of the childhood vaccination programme in NZ to ensure the most at-risk are vaccinated first, a survey that highlights inequities in the provision of adult respiratory and sleep services, and a proof-of-concept study that looks at the feasibility of HPV self-testing for cervical screening in Pacific women.

We hope you find these and the other selected studies interesting, and welcome your feedback.

Kind regards,

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Aotearoa New Zealand must learn how to vaccinate children most at risk of vaccine preventable diseases first

Authors: Grant CC et al.

Summary: Aotearoa NZ is systematically failing in its delivery of vaccines to children. This article discussed how the country must learn to vaccinate all treasured children, especially those most at risk of vaccine-preventable diseases. A consequence of COVID-19 is that we now have many more strategies for delivering vaccines to those who want them and really need them. It is time to address the insanity of our childhood vaccine delivery system.

Comment (CT): This is a timely reminder of the fragility of the NZ vaccination system and the urgent need to strengthen the entire ecosystem. Our aim must be to ensure that vaccines are delivered in a timely manner. Grant et al. remind us yet again about the failures and the risks to NZ children especially Pacific and Māori children. In 2022, only 62% of Pacific and 46% of Māori children have completed vaccinations at six months. Furthermore, these estimates had declined since 2019. Measles was reported in NZ in the last few days and there are major concerns that an outbreak is possible given low vaccination rates, especially among Pacific and Māori children. Given the focus of equity, this is a good time for the new health system to review and improve the entire vaccination system. Despite our best efforts, we continue to struggle to reach coverage rates needed to prevent vaccine-preventable diseases.

Reference: *N Z Med J* 2022;135(1567):116-8

[Abstract](#)

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Independent commentary by Sir Collin Tukuitonga KNZM

Sir Collin Tukuitonga is a medical graduate and Public Health Physician with extensive experience in health policy, research, management, and leadership in NZ and internationally. He is the inaugural Associate Dean Pacific and Associate Professor of Public Health at the University of Auckland. Prior to this role, he was the Director-General of the Pacific Community based in New Caledonia.



A survey of adult respiratory and sleep services in Aotearoa New Zealand: Inequities in the provision of adult respiratory and sleep services

Authors: Meyer R et al.

Summary: A survey was undertaken in 2019/20 to determine adherence to the “Standards for Adult Respiratory and Sleep Services” across DHBs in NZ. All adult DHB respiratory services were surveyed to assess staffing and service provision. The survey found marked regional variation in staffing levels for all specialist clinicians. The number of respiratory physicians (1.18 FTE/100,000 population) was found to be well below Australian and UK levels. 200,000 people in NZ do not have access to a local respiratory physician. Across DHBs, there was a four-fold variation in CPAP therapy, a six-fold variation in oxygen services, and an eight-fold variation in pulmonary rehabilitation.

Comment (CT): Access to adult respiratory and sleep services is another example of the inequities that exist in the NZ health system. Despite well-documented high needs among Pacific and Māori people for respiratory and sleep services, this study has highlighted unacceptable regional variation in the distribution of specialist respiratory workforce and services. A repeat survey in 2019/20 showed no improvement in respiratory services since 2006 and the ‘postcode’ lottery in health care delivery will not end unless significant changes are made. Part of the justification for the health system reform is to eliminate regional variation and reduce inequities in health. Monitoring progress on the delivery of respiratory and sleep services could inform us if these inequities are eliminated in the new health system. There is a real need to improve specialist respiratory services in NZ relative to other OECD nations.

Reference: *N Z Med J* 2022;135(1566):49-68

[Abstract](#)

Feasibility and acceptability of telehealth and contactless delivery of human papillomavirus (HPV) self-testing for cervical screening with Māori and Pacific women in a COVID-19 outbreak in Aotearoa New Zealand

Authors: Bartholomew K et al.

Summary: This small proof-of-concept study determined the feasibility and acceptability of a telehealth offer and contactless delivery of HPV cervical screening self-tests during the COVID-19 level 4 lockdown in Auckland in 2021. 197 eligible Māori and Pacific women (never-screened, due or overdue) were invited to take part. 86 of them were successfully contacted and 66 agreed to take part. Active follow-up, nurse-led discussions, result notification and a post-test questionnaire were all delivered via telehealth. Overall uptake was 61 samples returned (31.8%) and uptake of all contactable women was 70.9%. Six of the 61 HPV self-tests (9.8%) were positive (all for non-HPV 16/18 types) and were referred for cytology. Three of them had negative cytology results; the other three had positive cytology results and were referred for colposcopy.

Comment (CT): Self-testing for cervical screening has huge potential for women, especially Pacific and Māori women. Self-testing is described as a potential ‘game changer’ for cervical cancer. A recent survey of Māori women in NZ showed that three out of four women were likely/highly likely to accept self-testing and nine out of ten women were highly likely to attend follow up of results. This study provides an additional dimension with contactless delivery and telehealth offer. Despite the low participation by eligible women in the study, results showed that the telehealth component was feasible and highly acceptable to Māori and Pacific women. Findings from this and other NZ studies confirm the potential for innovations such as telehealth to improve access to and reduce inequities in cervical cancer screening in NZ. Support for self-testing amongst Pacific and Māori women is a priority for NZ. Together, screening and immunisation offers the best protection against cervical cancer.

Reference: *N Z Med J* 2022;135(1565):83-94

[Abstract](#)

Interventions in Small Island Developing States to improve diet, with a focus on the consumption of local, nutritious foods

Authors: Haynes E et al.

Summary: This systematic review investigated interventions intended to improve diet in Small Island Developing States (SIDS), and whether these interventions used a local food approach. A search of 11 databases identified 24 studies that were suitable for inclusion (five were randomised controlled trials, one was an interrupted time-series analysis, eight were controlled pre-test versus post-test, and ten were uncontrolled). Studies were from the Caribbean, Pacific, Mauritius and Singapore. Nine studies included some aspect of a local food approach. Most interventions included nutrition education; some also included practical skills training, such as vegetable gardening or food preparation.

Comment (CT): Noncommunicable diseases cause 75% of deaths in the Pacific SIDS. These diseases and associated risk factors are largely preventable. Improving access to healthy diets and reducing reliance on imported highly-processed food items is a priority for the region. Despite our best efforts, there has been no improvement in diets across the Pacific region. This systematic review showed that there is a lack of robust evidence on interventions to improve diets in SIDS. Reducing reliance on imported highly-processed food (and sugar-sweetened beverages) and increased consumption of locally grown and produced food items is a priority for Pacific SIDS. A critical review of trade policies (with a view to reducing reliance on food imports) and increased support and investment in local food production are priorities for the region. Building on policies currently underway and improving food policy options for local communities are urgently needed.

Reference: *BMJ Nutr Prev Health* 2022;5(2):243-53

[Abstract](#)

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Relationships of tobacco use and kava consumption to sex-associated variation in body composition and obesity risk in Melanesian adults from Vanuatu

Authors: Olszowy KM et al.

Summary: This study examined the associations of tobacco smoking and kava consumption with body composition and obesity among Ni-Vanuatu adults. Data collected for 301 individuals included self-reported frequency of substance use as well as anthropometric measurements. Analysis of the data showed that tobacco and kava use were associated with reduced measurements of body mass and adiposity in males, whereas kava use was associated with some elevated measurements of body mass and hip circumference in females.

Comment (CT): Kava is widely consumed in several Pacific nations both for ceremonial and recreational purposes. Increasing amounts of kava are also being imported into Australia and NZ with increasing use by non-Pacific individuals for its alleged medicinal benefits. Kava consumption is commonly accompanied by smoking (and alcohol) use. Well-conducted studies on the benefits and risks of kava consumption are rare. This is an interesting study from Vanuatu examining kava use and smoking and their association with body composition and obesity. Tobacco and kava use were associated with reduced measurements of body mass and adiposity in males, and kava use was associated with some elevated measurements of body mass and hip circumference in females. The study raised further research questions on kava consumption and potential impact on health.

Reference: *Asia Pac J Public Health* 2022;34(6-7):634-42

[Abstract](#)

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Learning from home, schools, and the media: Exploring the learning of gambling from a Tongan male youth perspective in New Zealand

Authors: Fehoko ES et al.

Summary: This qualitative study explored the experiences of young Tongan males with gambling activities in NZ. Eighteen Tongan male youths were recruited at a faikava session and a church service to participate in focus group talanoa and individual talanoa. Data were audio recorded, transcribed, and analysed using thematic analysis. Three key themes emerged that reflected the learning hubs of gambling behaviours: the role of family, peers, and the media. The majority of the Tongan youth had witnessed gambling behaviours in their immediate and wider extended family (particularly among fathers and their male family members). Some learnt to gamble on card games, bingo, and board games through socialising (including school) and family time. The promotion of gambling via newspaper and billboard advertisements also had a strong role in encouraging young Tongan males to gamble.

Comment (CT): This is an important study of the context in which young Tongan (and other Pacific) men are influenced and exposed to gambling. Problem gambling disproportionately affects Pacific people in Aotearoa. Pacific people make up 21% of people seeking help for problem gambling while they constitute approximately 8% of the total population. Other studies have shown links between cultures and gambling. Better understanding of the context in which young people are exposed and influenced by gambling helps inform preventable measures that could be developed to minimise gambling harm in Pacific communities in Aotearoa.

Reference: *Asia Pac J Public Health* 2022;34(8):804-5

[Abstract](#)

It is time for a more targeted approach to prediabetes in primary care in Aotearoa New Zealand

Authors: Barthow C et al.

Summary: This article discussed trends in prediabetes in NZ, as well as current NZ clinical guidelines and the prediabetes care pathway. The authors identified multiple opportunities for optimising diabetes prevention, potentially reducing type 2 diabetes mellitus inequities, and sustaining more effective prediabetes management in NZ primary care.

Comment (RNS): Pacific health inequities, particularly in diabetes, are well documented and well understood. Sustainable solutions, however, are harder to come by. This paper is helpful for two key reasons. First, it provides up-to-date prediabetes prevalence rates for Pacific and Māori adult, youth and children and argues that the term prediabetes is unhelpful as those with prediabetes are also at increased risk of developing cardiovascular disease and renal disease. There are no published NZ data in this area. Second, the authors present an overview of current prediabetes care pathways and outline solutions by proposing policy, practise and research gaps and actions to improve diabetes prevention in Aotearoa NZ.

Reference: *J Prim Health Care* 2022;14(4):372-7

[Abstract](#)



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Co-designing an intervention to prevent rheumatic fever in Pacific people in South Auckland

Authors: Tu'akoi S et al.

Summary: This article described the study protocol for an intervention designed to prevent rheumatic fever in Pacific people living in South Auckland. The participatory mixed-methods study will utilise the Fa'afaletui method and follows a three-phase approach. Phase 1 will comprise a quantitative analysis of the rheumatic fever burden in Auckland/NZ over the last five years (including sub-analyses by ethnicity). Phase 2 will involve workshops with Pacific community members, families affected by rheumatic fever, health professionals, and other stakeholders in order to develop a novel intervention to reduce rheumatic fever in South Auckland. Phase 3 will involve implementation and evaluation of the intervention.

Comment (RNS): Co-designed studies have become increasingly popular in health across Aotearoa NZ as a way to create new health solutions that meet the needs of targeted populations. This paper presents a useful summary of an innovative Pacific co-designed study to address rheumatic fever in, and with, Pacific communities in South Auckland. The authors clearly articulate the methods and tools used for their co-design study as well the evaluation framework used to evaluate the implementation of the co-designed intervention which will serve other researchers who plan on conducting Pacific co-designed studies as well. We eagerly anticipate subsequent papers on an intervention model based on this study and results from the intervention itself as highlighted in the paper.

Reference: *Int J Equity Health* 2022;21:101

[Abstract](#)

Exploring the retail food environment surrounding two secondary schools with predominantly Pacific populations in Tonga and New Zealand to enable the development of mapping methods appropriate for testing in a classroom

Authors: Pauuvale AF et al.

Summary: This study tested the potential of a low-cost method to map the retail food environment around two secondary schools in low socioeconomic communities with predominantly Pacific populations; one in Tonga (n=150) and one in NZ (n=52). Mapping utilised Google Earth, Google Maps, government maps, and observations. Outlets within a 1-km radius of each school stocked predominantly unhealthy foods. The method produced visual data that have the potential to be analysed using strategies appropriate for secondary schools. The method should now be tested in classrooms to assess its potential to support school-age students to engage in mapping and critiquing their retail food environment.

Comment (RNS): This study uses geographic information systems (GIS) learning tools suitable for secondary students to better understand the retail food environment around schools in Aotearoa NZ and Tonga. The location for the Aotearoa NZ study was selected due to a large Tongan community residing in the area. The study provides a useful example of how to embed health promotion activities into secondary school curriculum. Secondary school students in Tonga and Aotearoa NZ were able to critically assess the impact that food environments around their schools have on their food choices and food-related behaviours. The creation of visual maps and data-points further aids the learning and development of new skills for secondary students. The study also contributes to the growing field of spatial inequity research in Aotearoa NZ.

Reference: *Int J Environ Res Public Health* 2022;19(23):15941

[Abstract](#)

Examining employment conditions during the COVID-19 pandemic in Pasifika communities

Authors: Camacho SG et al.

Summary: This study evaluated employment conditions for Pacific people living in ten US states with the largest Pasifika populations during the COVID-19 pandemic. Data from the Current Population Survey were used to examine racial differences in employment status, paid work from home (PWFH), and industry telework friendliness. Data from the Washington Office of Fiscal Management and the Washington State Employment Security Department were used to examine county-level unemployment claims. Pasifika did not self-report unemployment significantly more than Black, Latino, Asian, and American Indian/Alaska Native respondents nationally. However, in Washington state counties with high Pasifika concentrations, unemployment insurance claim rates were higher than those for all other racial groups (particularly Whites and Asians). Pacific people were found to have more PWFH opportunities, but generally worked in less telework-friendly industries.

Comment (RNS): This study reminds us that the COVID-19 global pandemic was experienced in similar ways by Pasifika communities globally. Like Pasifika communities in Aotearoa NZ, Pasifika communities in the US experienced disproportionate rates of COVID-19 cases, hospitalisations and deaths compared to Whites and other racial/ethnic minority communities. This study provides a useful statistical comparison of the socioeconomic impact that COVID-19 had on Pasifika communities in ten US states. It found that many Pasifika workers worked in essential jobs and were more likely to live in multigenerational households contributing to increased COVID-19 transmission and mortality. COVID-19 data have highlighted the health inequities and structural racism experienced by Pasifika communities in the US and the need for quality data and research to address Pasifika social inequities.

Reference: *Health Equity* 2022;6(1):564-73

[Abstract](#)

Independent commentary by Dr Roannie Ng Shiu



Dr Roannie Ng Shiu is the Pasifika Medical Association (PMA) Senior Research Fellow with the University of Auckland Faculty and Medical and Health Sciences Office of the Associate-Dean Pacific. Her primary role is to deliver robust high-quality Pacific health equity research and to increase the Pacific health workforce in Aotearoa with the recruitment and retention of Pacific health students. She was previously with the Department of Pacific Affairs at the Australian National University. Roannie is Samoan and was raised in South Auckland and graduated from the University of Auckland with a PhD in Community Health.

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