Ni sa bula vinaka. This is an important occasion for me to open another communication channel for all who care about Pacific peoples’ health and wellbeing, to share their koloa and celebrate the joy of giving and receiving. In New Zealand (NZ), Pacific peoples are unique in that we are a vibrant and diverse population group from 22 different Pacific Island nations, each with its own distinct language and culture. We often come together in our various communities to celebrate our rich heritage, our faith, and our achievements. We also constitute a rapidly increasing population, representing the largest Pacific population group in the world.

In New Zealand, Pacific peoples are unique in that we are a vibrant and diverse population group from 22 different Pacific Island nations, each with its own distinct language and culture.

The Pacific population is undergoing significant demographic changes. The proportion of Pacific peoples born in NZ has increased, with the larger NZ-born groups being Niueans, Cook Island Maori, and Tokelauans. The number of Pacific children born with dual or multiple ethnic ancestries has also increased significantly, and the Pacific population is youthful compared with the total NZ population. Furthermore, there is evidence that health outcomes, such as cardiovascular disease (CVD) mortality, vary between Pacific groups, with the highest CVD mortality rate among Cook Island Maori (approximately 1.66 times the Samoan rate). Similarly, a recent needs assessment that compared a number of health indicators between the four largest Pacific groups in Counties Manukau District Health Board found an emerging pattern—Samoans and Tongans shared similarities across several indicators, as did Cook Island Maori and Niueans. For example, Samoans and Tongans were more likely to live in crowded households and have higher rates of child hospitalisations for respiratory-related illnesses than Cook Island Maori and Niueans.

As emphasised in ‘Ala Mo’ui—Pathways to Pacific Health and Wellbeing 2010–2014, all these aspects of diversity (place of birth, multiple ethnicities, and cultural variation between Pacific groups) mean that services for Pacific peoples need to be particularly adaptable and innovative to respond to Pacific peoples’ varied needs and preferences. In this connection, I reiterate the principles in ‘Ala Mo’ui when working with Pacific peoples:

- health and disability services need to work across other sectors like education, housing and social development
- families and culture are important and play a significant role in Pacific peoples health and wellbeing
- key dimensions of quality like access, equity, cultural competence and patient-centredness, are implicit in the delivery of health and disability services.

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The challenges we face across the entire social and economic spectrum continue to grow. Pacific peoples are disproportionately represented in the lower socioeconomic strata, and this is significant because of our experiences with poor health outcomes. Health inequalities exist in socially-disadvantaged groups due to poorer health, a greater exposure to health hazards across the whole life course, and limited access to high-quality health services than other more privileged population groups. Nowhere is this more obvious than amongst Pacific children, who have a higher prevalence of obesity compared with the total population, and the prevalence nearly doubles between the age groups of two to four years and five to nine years. All of us who work in the health sector should be aware of the serious challenges we face as we navigate and chart our course for the next three to five years, in light of:

...services for Pacific peoples need to be particularly adaptable and innovative to respond to Pacific peoples' varied needs and preferences.

- the economic difficulties many of our communities and providers find themselves in
- the emerging health issues coupled with the changing demographics of our communities
- the challenges of implementing Whanau Ora alongside our Pacific models of care.

I believe these challenges will strengthen our resolve to work together, pool our resources, and share our koloa for the improved health and wellbeing of our people. I am committed to working with all health providers to reinforce their service delivery models of health care so they remain responsive to the health needs of Pacific peoples for the future. I am also committed to the Ministry of Health’s ‘Ala Mo’ui as it represents a significant milestone for enabling Pacific peoples to improve their educational opportunities as well as their living and working conditions, over the next five years. May Vaikoloa refocus our commitment to each other and enrich our families and relationships as we share and exchange koloa in NZ and beyond to the Pacific Islands and the rest of the world. May you also grow in knowledge, wisdom, and empathy for Pacific peoples, their health and wellbeing, as you receive of our koloa—Vaikoloa. Vinaka vakalevu.

References