Working with the Samoan community

A guide for dietitians in Metro South Health
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1. Introduction

Samoans and Pacific Islanders represent one of the largest sub-populations in Queensland. According to 2011 census data there are 1,860 Samoans residing in Logan\(^1\) and Samoan language is the most common language other than English spoken.

Samoans have been recognised as a priority population group due to the disparity in health outcomes when compared to the general population. The Samoan born population have poorer health outcomes than the Queensland population, with significantly higher mortality rates for all causes and avoidable conditions such as heart failure, diabetes and diabetes complications. Compared to all Queenslanders, the Samoan-born Queensland population are three times more likely to have diabetes, and are seven times more likely to be hospitalised for diabetes complications\(^2\).

The diet of many Samoans is not consistent with the current Australian Dietary guidelines. Many Samoans consume diets that are high in saturated fat, salt and/or sugar and low in vegetables and wholegrain cereals. Soft drink is frequently consumed in addition to large portion sizes of meals.

There are a number of determinants that impact upon the health of the Samoan community. Health literacy is a key concern, as many Samoans have low knowledge of health issues and services. There are a number of barriers to health literacy amongst Samoans including a lack of culturally tailored health promotion and cultural reluctance to seek help. Focus groups with Samoans highlight the need for culturally tailored health promotion including community education and lack of translated resources. Furthermore, the availability of dedicated health workers has been integral to improving the health of other disadvantaged communities in Queensland\(^3\). A needs assessment found that the Samoan community in Logan are ready and willing to make healthy changes to their lifestyle, but they require adequate support and resources in order to do so\(^4\).

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\(^3\) Queensland Health. (2011). Queensland Health response to Pacific Islander and Maori health needs assessment. Division of the Chief Health Officer, Queensland Health: Brisbane.

\(^4\) Nutrition Promotion Unit (2011). Findings from the nutrition needs assessment of the Logan Samoan community. Metro South Health Service District: Logan.
2. Samoan Health Beliefs

Health and well being is central to family life, with adequate food to feed all family members being very important. Some Samoans perceive thin people to be unwell; a traditional belief is that the bigger a person is, the healthier they are. The importance of aiga (family) and va (relational space) to Samoans is reflected in their beliefs about health and illness.

“Illness may be perceived as caused by conflicts with or failed duty towards family or because of unbalanced social relationships”5.

Samoans have a casual attitude towards health and tend to only seek medical advice as a last resort. In Samoan culture, the individual can only be described as having meaning in relation to others, not as in individual. Religion and spirituality are central to health beliefs and the Samoan understanding of health. The fonofale dynamic model of health depicted below represents components related to traditional Samoan meeting house and provides insight into dimensions of wellbeing for Samoans.6 The roof represents cultural values, the four supporting pillars are physical, spiritual, mental and other, and the floor represents aiga (family) values.

Figure 1: Fonofale model of health6

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3. Samoan Food and Culture

3.1 The role of food and dietary habits

- Traditionally, Samoans have believed that the more a person eats, the higher their social status. This has had major health implications. However, dietary patterns are changing as awareness of healthy eating habits increases.
- The structure of serving meals during community gatherings and events are dependent on hierarchy and community status. Important guests, matai (high chiefs) and church ministers are served first, with women and children last. In Samoan households, there are always large quantities of food with leftovers consumed the following day.
- Food forms the basis of most social activities. At weddings, funerals, church openings or other public events, there are often large trays of foods with biscuits or cans of corned beef or other small foodstuffs (amoamosa).
- Samoans do not follow set eating times, with the concept of three main meals loosely adhered to. Rather, Samoans eat whenever they are hungry.
- Samoan families often purchase food in bulk. E.g. instead of buying 3 or 4 bananas, they may buy a box.
- Refer to the Samoan Food and Cultural Profile for more detail on common Samoan foods and traditional cooking methods. The link is available in the ‘Suggested Readings and Resources’ section of this document.
- An adaptation of the Samoan Food and Cultural Profile that incorporates the ADIME framework is currently in development (material on the right).

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3.2 Common Samoan foods

Ready reckoners detailing the macronutrient break-down of common Samoan foods, as well as comparisons between traditional recipes and the healthier Soifua Maloloina recipes, have been developed.

The values provided in these tables are based primarily on data from The Pacific Island Food Composition Tables, 2nd Edition from the Food and Agriculture Organization of the United Nations, as well as traditional recipes where available. The Pacific Islands Food Composition Tables are available from: http://www.fao.org/docrep/007/y5432e/y5432e00.HTM
3.3 Soifua Maloloina (healthy living for Samoans) program

Soifua Maloloina (healthy living for Samoans) is a community program in Logan, developed by the Samoan community, in partnership with Metro South Health. The Samoan community identified the need to help their people, as too many of them were getting sick with diseases like diabetes and renal disease. The program revolves around four key messages. These messages were developed with the Samoan community and health professionals in Metro South Health in order to encourage and support the community to adopt healthy behaviours.

Soifua Maloloina key messages:

- **Swap** big meals for small meals
- **Swap** fatty meals for lean meals
- **Swap** heavy for light
- **Swap** fizzy drinks for water

Soifua Maloloina strategies

- Culturally appropriate social marketing campaign
- Healthy meal deals in local Samoan takeaway stores
- Nutrition education & cooking workshops through churches
- Healthy eating guidelines for Samoan churches
- Recipe suite of healthy traditional Samoan meals
Soifua Maloloina resources

**Soifua Maloloina brochure**
(Samoan & English versions)
A healthy eating brochure focussing on the four key messages for the Soifua Maloloina program. Includes information on why its important to lead a healthy life and tips on how to achieve this.

**Soifua Maloloina posters**
Two colourful posters with images of local Samoans engaging in healthy activities and featuring healthy Samoan foods. The key messages of the posters feature a combination of English and Samoan words for family (aiga) and children (fanau).

**Soifua Maloloina plastic fan**
The fans were developed to help raise awareness of Soifua Maloloina, as fans are commonly used by Samoans during church and when waiting for appointments.

**Soifua Maloloina magnet**
The magnets were developed to raise awareness of the program and to encourage Samoan community members to stick healthy recipes and resources on their fridge.
3.4 Healthy Samoan recipes

List of available modified Samoan and popular Australian recipes

- Banana coconut rice pudding
- Banana muffins
- Bean burritos
- Beef stir fry
- Burritos
- Chicken curry
- Corned silverside
- Corned silverside sandwich
- Fried rice
- Pizza
- Potato salad
- Pumpkin soup
- Quiche
- Tray-bake chicken & vegies
- Sang chow bow
- Sapasui (chop suey)
- Speedy pineapple muffins
- Toasted sandwiches
- Tuna pasta salad
- Vegie curry
- Vegie saposui (chop suey)
- Vegie spaghetti
- Savoury vegie muffins


For further information on the above recipes and resources, please contact:

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4. Communication

The following section outlines practical tips to effectively communicate with the Samoan community.

4.1 Samoan language

Samoan is a phonetic language. The consonants f, g, h, k, l, m, n, p, r, s, t, v, are pronounced as in English. The only exception is g, which is pronounced ng. For example, the word *pago* is pronounced *pahngo pahngo*. English letters that are not included in Samoan language are b, c, d, j, q, w, x, y and z. The vowels a, e, i, o, u are pronounced as in Spanish or Italian. For example:

- a – ah
- e – eh
- i – it
- o – ought
- u – put

4.2 Common Samoan words and phrases

It is important to use common words and phrases when communicating with the Samoan community. The following table lists common Samoan greetings.

<table>
<thead>
<tr>
<th>English</th>
<th>Samoan</th>
<th>Pronunciation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Ioe</td>
<td>Eeoeh</td>
</tr>
<tr>
<td>No</td>
<td>Leai</td>
<td>Le-eye</td>
</tr>
<tr>
<td>Hello</td>
<td>Talofa lava</td>
<td>Tah-low-far lava</td>
</tr>
<tr>
<td>How are you?</td>
<td>Uà mai oe?</td>
<td>Waa-may-oi</td>
</tr>
<tr>
<td>I’m well thank you</td>
<td>Manuia fa’afetai</td>
<td>Man-weir Fa-ah fe-tie</td>
</tr>
<tr>
<td>Thank you</td>
<td>Fa’afetai</td>
<td>Fa-ah fe-tie</td>
</tr>
<tr>
<td>Goodbye</td>
<td>Tofa soifua</td>
<td>Tow-faay soy-four</td>
</tr>
<tr>
<td>Have a good day</td>
<td>Manuia le aso</td>
<td>Man-weir Le a-sew</td>
</tr>
</tbody>
</table>

4.3 General communication recommendations

When communicating with the Samoan community it is important to:

- Be relaxed and friendly while maintaining formality
- Use a conversational style
- Use common Samoan words including *vai* (fluid) and *masima* (salt)
- Replace negative words such as “avoid” and “don’t have” with encouraging words such as “work on”, “try to” or “swap”
- Use hand gestures to demonstrate everyday actions such as adding salt to food by ‘shaking a salt container’ or drinking by ‘bring a cup to your mouth’
- Minimise use of notepads and books where possible
- Check patients understanding. For example, ask “do you understand what the doctor told you about salt? Can you tell me what he said?” Avoid questions that require a ‘yes’ or ‘no’ answer. Asking a client to answer a question based on a scale may provide a more accurate response.
Establish rapport by asking the following conversational questions:

- Did you come with your husband/wife/daughter/family member today?
- Who do you live with/how many children do you have?
- Who does the cooking at home?
- What is your favourite food?

If the patient is male, encourage him to bring his wife or children to his appointment, as male patients often return home from hospital without communicating the significance or consequences of the health condition. It is also important to discuss dietary management plans with family members, as they are likely to encourage compliance. Seek opportunities to contact the patients’ family. For example, if the patient is brought to hospital for treatments by a family member, ask to meet the family at the next visit and encourage them to bring their family members.

### 4.4 Communication related to kidney disease and heart failure

**Kidney disease**

- Many patients have kidney disease without any symptoms. As such, many Samoan community members are in denial about their health condition, and often crash land in hospital on dialysis, not really understanding why.
- While kidney disease is progressive, there is a misconception that dialysis cannot be delayed. It is therefore important to explain the importance of making healthy dietary choices, such as reducing salt and fluid intake, to delay dialysis. Suggested phrase:
  - “If you look after your health and the foods you eat, you can delay the need for dialysis.”
- Some Samoans associate dialysis with death and ‘waiting to die’. It is helpful to talk about it in a positive way that focuses on improving quality of life. Suggested phrase:
  - “We can’t change the past, but we can improve the future. By looking after your kidney health now you can continue to do the activities you enjoy such as family, community, church and exercise.”

**Heart failure**

- Due to the common attitude that there is nothing that can be done once a serious disease state is reached, it is important to stress to patients that there are things that they can do everyday to help manage their symptoms that may improve their day-to-day-quality of life. As discussed in the kidney disease section, suggested phrasing for promoting a positive message may include:
  - “While heart failure isn’t reversible, there are lots of things that you can do now to help to manage your symptoms so that you can keep doing the things that you enjoy such as playing with the kids, going to church and attending family and community events.”
Linking diet with disease

- Many Samoans are often in denial about their health. In order to link diet with kidney disease, start by asking about symptoms such as whether or not the patient experiences puffy or swollen feet and ankles. Proceed by asking if the patient understands what the doctor has told them about their diet (i.e. salt and fluid) and kidney disease or heart failure. This will help to clarify patients understanding of their condition and need for further explanation.

- It is important to explain what blood pressure is. A simple explanation has been provided on the nutrition resources.

- Try to avoid medical terms as these are less understood, and there are no equivalents in Samoan language for some terms.

- Ask the patient if they know of any family members who have/had kidney disease or heart failure. This will help to link the illness back to family and tie in with core values.

- Use aiga (family) and fanau (children) as a motivating factor for reducing salt and managing fluid intake. For example:
  - “In order to be around for your aiga and fanau (family and kids) you can get better by looking after your diet.”

Collecting data from the patient

- Let the patient know you are on the same page as the doctors and other health professionals by stating:
  - “I’ll talk to the doctor and nurse”.
  - “I’ve seen your blood test results, are you sure you have only had two pinches of salt?”

- Let the patient know that you are also on the same page as them. Provide reassurance and let them know that it is okay to not always make the healthiest food choices.

Salt

- Explain what salt is by referring to the ‘salt shaker’. The most familiar brands of salt among the Samoan community are Saxa and Homebrand in the red and white containers. Mention these brands when explaining what salt is, as well as other key sources of salt in their diet including processed (canned corned beef or pisupo), packaged (i.e. two-minute noodles) and takeaway foods (deep fried chicken and chips).

- Explain that salt is an acquired taste and it is possible to retrain tastebuds by reducing the amount of salt added to cooking or at the table. Recommend patients use dry herbs and spices in cooking as an alternative to salt. Make the following practical suggestions:
  - Purchase dry herbs and spices found in packets or containers in the supermarket. Highlight that these salt alternatives are cheap and last a long time.
  - Look at top and bottom shopping isles for low or reduced salt varieties of sauces, seasoning, herbs and spices.
Fluid

- When gathering information on diet history and fluids, enquire about diet/slimming/natural shakes or supplements, as these are sometimes consumed by Samoans.
- Suggestions from the Samoan community recommend using standardised bowls, measuring spoons and cups when gathering serve size data of foods consumed. Having this equipment available to show while taking a diet history might be beneficial. Make suggestions to patients of where to buy simple measuring equipment and recommend purchasing to measure fluid at home.
- Use colour images of traditional Samoan foods when taking a diet history. These could be enlarged laminated versions of the pictures provided in this guide. Having culturally recognised foods on display will demonstrate an interest in Samoan cuisine and culture, and therefore help build rapport.
- Samoans do not have set eating times, so don’t ask in a systematic way such as breakfast, lunch and dinner, instead ask the next food or fluid consumed.
- When establishing serve sizes of foods during diet history, use hands to indicate sizes for example (e.g. use your hand to indicate a handful of rice as one serve).

4.5 Future considerations

- Purchasing of inexpensive plastic measuring jugs to give to patients for measuring fluid at home. If sufficient funds, purchase one from a local store as a model, to explain the cost and location of where to purchase for themselves.
- Nutrition education sessions, which could link in with existing health education talks. Potential topics for discussion may include:
  - General nutrition for kidney disease or heart failure. This session could include a Samoan patient with kidney disease or heart failure telling his/her journey during treatment to those that have not yet experienced it.
  - Label reading, how to read a nutrition panel, specifically looking for sodium content and how to interpret an ingredient list for potassium, sodium and fluid. Other names for potassium, sodium and water to look out for.
- Serving plate with quarters marked for vegetables, meat, taro etc will help to show portion sizes (see images below).
5. Notes to Accompany Salt and Fluid Resources for Kidney Disease (blue resource) & Heart Failure (yellow resource)

5.1 Salt resource

- The food swaps listed on the back page compare the difference in sodium per serve or 100g. Some patients may not understand what, for example, 854mg per 100g means. Therefore, it is important to explain how much salt is contained in each food compared to their daily requirement.

5.2 Fluid resource

- The ‘fluid content’ table on the fluid resource is a guide only. Serve sizes of taro for example are different for all individuals, and therefore difficult to standardise. Ensure accurate collection of serve size details during consultations.
- Tips for managing fluid intake: encourage patients to spread fluid intake across the day. For example, some Samoans will skip meals and have large portions in the evening or after church, including large amounts of fluid. Encourage smaller meals and snacks to evenly distribute fluid and have less stress on the kidneys.
6. Suggested Readings and Resources

http://www.fao.org/docrep/007/y5432e/y5432e00.htm

The Health of Queensland’s Samoan population 2009

A Focus on Pacific Nutrition: Findings from the 2008/09 New Zealand Adult Nutrition Survey
http://www.health.govt.nz/publication/focus-pacific-nutrition

Samoan Food and Cultural Profile

Samoan Food and Cultural Profile (ADIME)

Ready Reckoner of Common Samoan Foods

Ready Reckoner of Healthy Samoan ‘Swaps’