



## Samoa Team: Rheumatic Fever Co-Design Initiative

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November 2023



**MEASINA**

# Co-designing with communities and other system stakeholders

*doing with, not doing to*

*the community voice is vital,  
especially those with lived experience  
– children and young people and their  
whānau*

*it is not the community's problem to solve*

## to identify and embed innovative and sustainable system improvements

*understanding and taking action*

*new perspectives that continue beyond this initiative*

*the system is where change is needed*

## to preventing and managing rheumatic fever

*reducing the number of people who  
develop rheumatic fever*

*improving experience/  
outcomes for people who  
develop rheumatic fever*

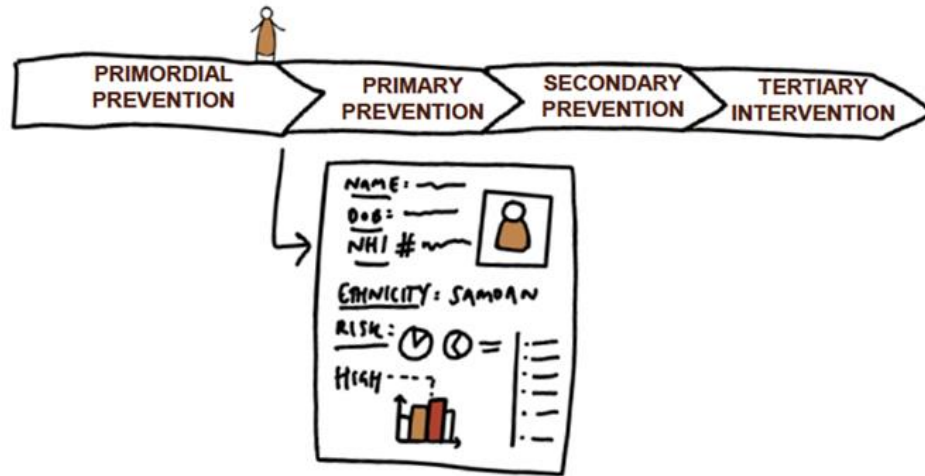
*Group A streptococcus,  
rheumatic fever and rheumatic  
heart disease*

## for Māori, Samoan and Tongan people in Tāmaki Makaurau.

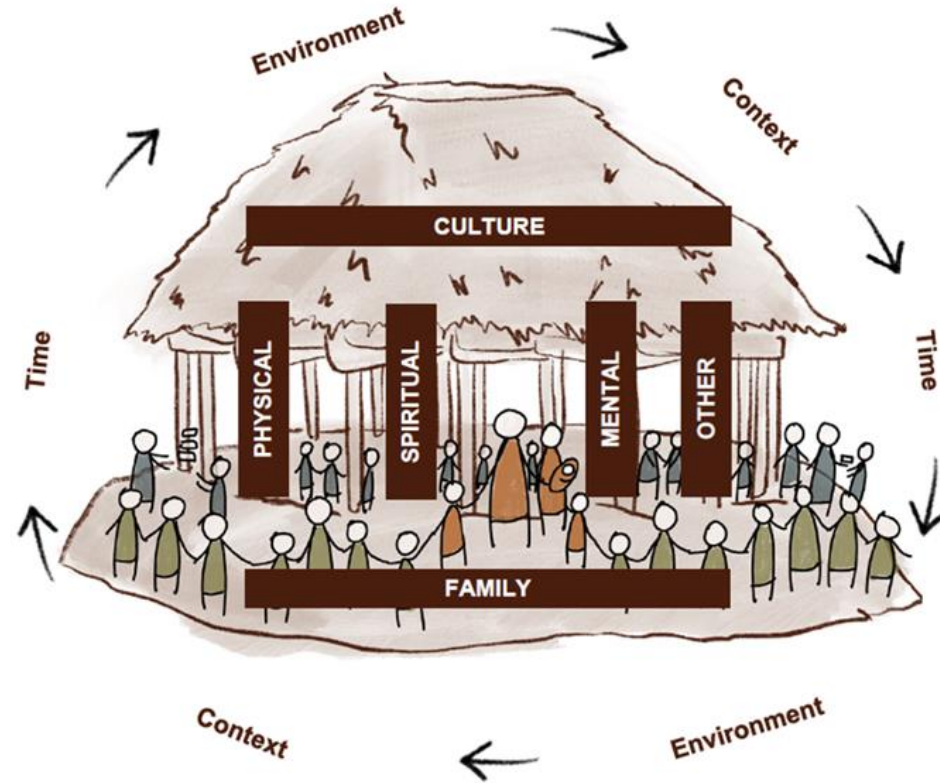
*identified priority groups*

*identified priority location  
(includes the three DHB regions)*

## HOW THE SYSTEM SEES ME



## HOW I WANT THE SYSTEM TO SEE ME



Adapted from Fonofale model by Fuimaono Karl Pulotu-Endemann

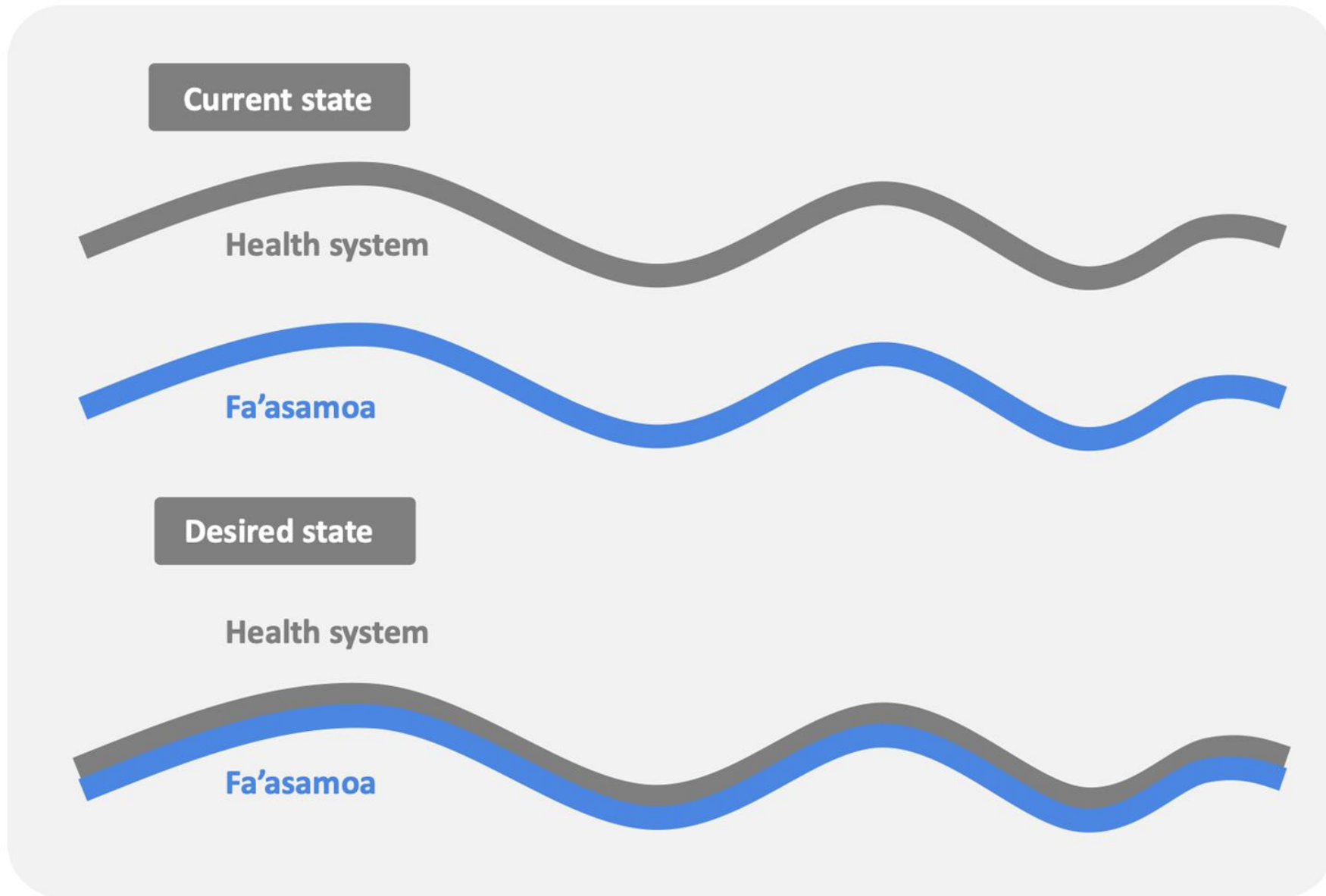
# Soālaupule Case Study



**Link to case study video on Te Whatu Ora Website**  
[Rheumatic Fever resources for health professionals – Te Whatu Ora - Health New Zealand](#)

**E ui ina sui faiga, ae tumau pea fa'avae.**

**Though the approaches may change, the foundations  
remain the same.**



**Community-led  
design**



**System  
capability  
building**



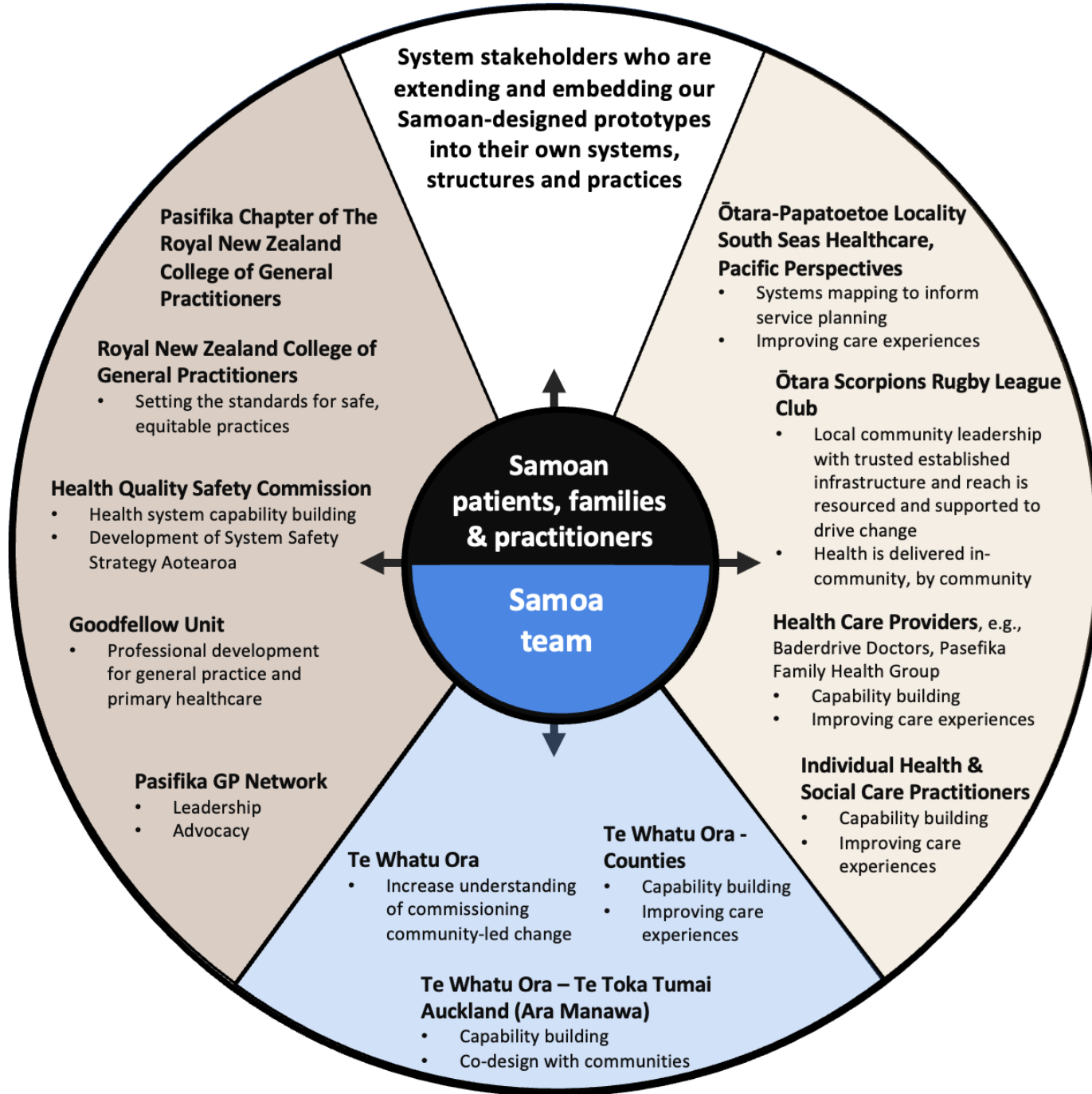
**Family-centred**



# ECOSYSTEM

## OF INFLUENTIAL SYSTEM STAKEHOLDERS

A more equitable, accessible, cohesive and people-centred system.



<p><b>Community organisations</b></p>	<p>You have <b>trust and relational capital with families</b> and are in a position of influence.  <b>Incorporate rheumatic fever awareness</b> into your engagements with Samoan families.  There are now suitable tools and a network of competent and caring health professionals to support you to do this.  <b>Be open to ways to partner differently</b> with government; the system needs to acknowledge the work you are doing and to recognise it.</p>
<p><b>Health practitioners</b></p>	<p><b>If you are</b> using Soālaupule practices already, <b>keep doing it!</b> And use the tools we've created to talk about why you use Soālaupule practices with colleagues who don't.  <b>If you don't</b> use Soālaupule practices already, <b>make the most of the tools</b> we've created and find ways to build power sharing practices into how you engage with Samoan families. We don't expect you to be an expert, we simply ask that you acknowledge that power imbalances exist and <b>be open</b> to the potential ways you can shift that.</p>
<p><b>Employers of Pacific health / social workforce</b></p>	<p>Take a moment to <b>reflect on the value</b> that your Pacific workforce are bringing to your organisation, despite it not being recognised.  Review job descriptions, review organisational structures to ensure that this <b>value is made explicit</b> and <b>situated appropriately</b> within organisational structures to influence decisions, and is <b>recognised</b> through remuneration.</p>
<p><b>Policy makers / commissioners / funders</b></p>	<p><b>Recognise and listen to</b> the Pacific leadership voices that are connected to the community, know what is required and have the energy to drive change. <b>Invest</b> in these people and create a platform for a wider leadership remit.  Take learning from this initiative in terms of <b>time, space, and resource for power to be shared</b> and for community-led solutions to be embedded across the system. We won't get different outcomes if we keep operating as we always have.</p>

# Fa'afetai tele lava