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Double Epistemologies and 'Respons-ability' in Public  
Healthcare:

*Talanoa* with Tongans in New Zealand

A thesis presented in partial fulfilment  
of the requirements for the degree of

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## **Abstract**

Pacific health policy in Aotearoa/New Zealand focuses on reducing health inequities between the majority population and Pacific Islander communities. At the same time, the public health system increasingly promotes a neoliberal form of ‘responsibilisation’ that emphasises individual self-help, risk management, and risk reduction. This research engages with Tongan epistemological scholarship to ask: how do concepts central to contemporary western public health philosophy and practice, such as personal health management, individual risk, or managing increased genetic risk, factor for New Zealand Tongans? Using the talanoa methodology of Pacific research, this thesis investigates how members of the Tongan community in Auckland understand the divide separating biomedical models of genetic risk and their own cultural views of health, relatedness, and responsibility. I argue that responsibility-focused public health policy in A/NZ, despite effort to create culturally responsive ethnically-targeted health messaging, can have unintended pathologising consequences for Tongan people. The focus of A/NZ public health policy on ‘reducing inequalities’ makes it harder for the health system to fully recognise the cultural and ontological embeddedness of Tongan models of health. Acknowledging that many Tongans do move within the ‘interstitial space’ (*vā*) between epistemologies I ask how Tongans and their public health practitioners can be ‘responsible’ to one another if they do not understand each other’s realities.



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