

CASE STUDY: FOSTERING INCLUSION THROUGH COMMUNITY CONSULTATION IN FIJI



Summary

The SECURE Pacific program harnesses the views of people at risk of vulnerability and marginalised groups for designing health information and activities that are inclusive, accessible, and tailored to their needs through a thorough process of community engagement.

Overview

The SECURE Pacific program aims to enhance community epidemic preparedness in Fiji. The Fiji Red Cross Society is leading the implementation with the support of Australian Red Cross and funding from the Australian Government Department of Foreign Affairs and Trade (DFAT). This 3-year program will cover 310 communities of the Northern, Western and Central Divisions in Fiji that are most at risk of disease outbreaks.



Community voices

"We need more awareness in my community because of these diseases – leptospirosis, dengue, diarrhoea".

Community Health Worker (CHW), Ba, Western Division, Fiji.

What has changed?

Community consultation has actively involved individuals and groups in program design and decision-making that impacts them and their communities. The program has created opportunities for meaningful dialogue from a wide range of community members and intentionally engaged those who are not always able to participate or be heard, such as women, youth, elders, people with disability, people of diverse gender or sexual orientation, pregnant women, farmers, single-headed households and widows/widowers.

The program also conducted interviews and discussions with people who have influential roles in communities; health workers, teachers, school committees, water committee officials, veterinary officers, area administrators, community health workers, and community leaders.

The information received is being used for planning and implementation of activities to ensure the program is inclusive, accessible and meets the community's needs in regard to preventing, detecting and controlling disease outbreaks.



Community voices

"Due to my disability I would prefer house to house visits of health workers and check-ups because we live far from each other".

Person with a disability, Macuata, Northern Division, Fiji.

Community perspectives and preferences for health information and activities

Using anonymised mixed-methods questionnaires, random selection of locations and purposive selection of respondents, 150 community members, leaders and service providers participated in the consultation. Of the sample, 53% were women, 6% people with disability, 7% elders, 8% youth, and 22% were from other vulnerable groups such as widows/widowers, single-headed households, and people of diverse gender or sexual orientation.

When asked, many people voiced that they experience barriers to participating in activities, most notably:



89% of people with a disability.



61% of pregnant women.



53% of grandparent head of households.



52% of widows/widowers.



42% of single parent households.

What methods of engagement are most meaningful to the community?

Respondents identified a variety of activities that they felt would meaningfully engage the community and encourage participation in health awareness sessions. This included in-home visits for health information and check-ups, community Talanoa sessions, clean-up activities, and fun days that incorporate health messaging into sports, fishing, arts and crafts, and social events.

Women voiced their preference for home visits, group discussions, environmental clean-ups and handwashing demonstrations. Door-to-door visits were strongly preferred by people with disability (89%), gender-diverse participants (80%), and elders (91%), indicating that flexible approaches may help to reduce the common barriers experienced by people at risk of vulnerability and marginalised communities.

"Living in these remote areas of Seaqqa, house-to-house check-ups hardly reach us. I would prefer if they reach us".

**Elderly person,
Korotulutulo
Macuata, Northern
Division, Fiji.**

Community voices



What is Talanoa?



Talanoa is a form of dialogue in the Pacific Islands that brings people together to share opposing views without any predetermined expectations for agreement. It is focused on group decision making, based on principles of respect, tolerance, flexibility, openness and fairness.

Use of technology

While overall preference for technology-based channels was low, some variation emerged across groups: elders strongly prefer radio, youth and gender-diverse respondents rely on Facebook and television, and people with disability are still open to using radio. However, several respondents also noted network limitations in remote settings.



Opportunities to improve health literacy

Across groups, people showed limited understanding of underlying disease risks and could benefit from more health information, most notably in the following areas:

Vaccine-preventable diseases



Only **12 %** of respondents were aware of vaccine preventable diseases.

Airborne diseases



Only **14%** of respondents were aware of airborne diseases.

Safe slaughterhouse practices



Only **17%** of respondents were aware of health risks linked to slaughterhouse practices.

Most groups, however, had moderate awareness about animal contact (63%), mosquito-borne diseases (60%), and unsafe water (53%). The gender-diverse participants more often identified rubbish waste as a concern (60%), compared to other groups. Elderly respondents were less likely to identify the risks from livestock near water sources as a potential source of disease (36.4%).

How has the project contributed to change?

The community consultation plays a crucial role in ensuring key aspects of the program, such as gender equality, disability and social inclusion, are embedded. Fiji Red Cross Society gained valuable insights on how the program can be inclusive and accessible.

Specialist organisations focused on women's welfare and disability support were also consulted and provided valuable input into the design, methodology, and questions, to ensure they were sensitive and respectful.

The Fiji Red Cross Society will use these findings to guide the design of tailored health information delivery, with systems in place for ongoing monitoring of accessibility, inclusion, relevance, and satisfaction, ensuring continuous learning and adaptation throughout the program.

