

The Lotu Factor Project: An Overview

The Lotu Factor Journey

Mālō e lelei, tēnā koutou katoa, and warm Pacific greetings.

Today marks an important moment in the journey of the **Lotu Factor Project**. We are gathered not simply to launch a final research report, but to acknowledge a journey that began with a difficult question arising from one of the most difficult periods our communities have experienced.

Why did we begin this project?

The COVID-19 pandemic was more than a public health crisis. For Pacific communities, it was also a social, cultural, spiritual and theological crisis.

When COVID-19 arrived, our communities naturally turned to the institutions, relationships and beliefs that had sustained us through previous crises. For many Pacific peoples, one of the most important of these was **lotu**.

Lotu is deeply woven into Pacific life. It provides belonging, meaning, hope, identity and community. During COVID-19, churches mobilised resources, families prayed together, faith leaders provided pastoral care, and Christian beliefs helped many people make sense of fear, uncertainty, illness, isolation and death.

But the pandemic also exposed another side of the relationship between religion and wellbeing.

We heard theological claims about why COVID-19 was happening. We encountered competing interpretations of Scripture, divine protection, punishment, healing, vaccines, government restrictions and the end times. In some situations, religious convictions strengthened people's capacity to respond to the crisis. In others, certain interpretations potentially complicated public-health messages and decisions.

This tension became the starting point for the Lotu Factor Project.

We wanted to move beyond the simplistic question: **Is religion good or bad for health?**

Instead, we asked a more difficult and useful question:

When does lotu become a source of resilience and wellbeing, and when might particular forms of religiosity become a source of risk?

That question has guided this project.

What did we set out to do?

At the heart of the project was an attempt to understand the relationship between **religiosity, COVID-19 and Tongan wellbeing in Aotearoa New Zealand**.

We wanted to listen carefully to people's experiences rather than begin with assumptions about what religion was doing.

We wanted to understand how people drew upon faith during the pandemic; how Scripture and theology shaped their understanding of COVID-19; how church leadership influenced decisions; how people negotiated tensions between religious belief and public-health advice; and how all these things affected individual, family and community wellbeing.

Importantly, we did not approach lotu as something that could simply be categorised as either beneficial or harmful.

The reality is much more complex.

Lotu can provide extraordinary resources for resilience: hope, prayer, belonging, service, compassion, identity and collective responsibility.

Yet religion can also become problematic when interpretations are disconnected from people's lived realities, when spiritual authority discourages critical questioning, or when theological claims contribute to fear, stigma, exclusion or resistance to sound health advice.

Our task was to understand that complexity.

Our approach

For us, the methodology was as important as the questions.

This could not be research conducted *on* Pacific communities from a distance. It needed to be research conducted **with our communities**, grounded in Pacific ways of knowing, relating, listening and interpreting experience.

So conversation became central.

Through interviews, tālanga and forms of **kau‘i-talanoa**, participants were invited to tell their stories in their own ways.

We listened not only for answers to predetermined research questions, but for the meanings people themselves attached to their experiences.

This was especially important because lotu cannot be understood simply as a set of doctrines or beliefs.

Lotu is lived.

It is experienced through families, churches, prayers, hymns, sermons, Scripture, relationships, obligations, leadership, culture and everyday decisions.

Understanding the "Lotu Factor" therefore required us to listen to the lived experience behind the statistics.

The communities behind the research

The most important people in this project are not those of us whose names appear on the report.

They are the people who trusted us with their stories.

Our participants spoke about faith and fear, churches and families, vaccines and prayer, pastors and health professionals, Scripture and science, isolation and community, resilience and uncertainty.

Some stories affirmed the extraordinary strength of Pacific spirituality.

Others challenged us.

Some revealed contradictions.

And some required us to confront questions that churches, health systems and researchers cannot afford to avoid.

We are deeply grateful to everyone who participated.

Their voices are the foundation of everything we launch today.

The journey

Like most significant research projects, the Lotu Factor has not travelled in a straight line.

It has been a journey of listening, analysing, questioning, revisiting assumptions and learning from one another.

Our research team brought together different disciplinary perspectives and experiences. That diversity mattered because the questions we were asking sit at the intersection of religion, theology, culture, health and community wellbeing.

Along the way, we have shared emerging ideas with communities, researchers, church leaders and others. Those conversations helped us sharpen our thinking.

And gradually, something became increasingly clear.

A conventional academic report was not enough.

If communities trusted us with their experiences, then our responsibility could not end with publishing research findings.

The findings needed to return to the communities in forms that could actually be used.

That conviction changed the direction of the project.

From research to resources

This is why today we are launching not only the **Final Report**, but also a collection of practical tools and a dedicated **Lotu Factor website**.

The report documents what we learned.

The tools ask: **What do we do with what we have learned?**

They translate the research into practical resources for people working where faith, health and community life intersect.

They are intended to assist health professionals engaging with Pacific faith communities; support faith leaders navigating health crises; encourage more responsible engagement with Scripture in times of crisis; and create space for difficult conversations about religion, wellbeing, inclusion and community responsibility.

And the website gives the project a life beyond this launch.

It provides a place where the research and resources can remain accessible, shared, discussed and developed.

What this journey has taught us

Perhaps the most important lesson of the Lotu Factor Project is that we should resist two temptations.

The first is to romanticise lotu, as though everything associated with religion automatically contributes to wellbeing.

The second is to pathologise lotu, as though religious belief itself is the problem.

Neither position adequately reflects the experiences we heard.

Instead, our research invites us to become more discerning.

The question is not simply whether Pacific communities are religious. We already know that lotu remains profoundly important.

The more important questions are:

- ◇ *What kind of lotu are we nurturing?*
- ◇ *What kinds of theological interpretation promote life and wellbeing?*
- ◇ *What happens when religious authority and health knowledge meet?*
- ◇ *How can churches and health systems work together without either dismissing the knowledge and contribution of the other?*

And perhaps most importantly:

- ◇ *How can the enormous spiritual, relational and communal resources of Pacific faith communities be mobilised for flourishing rather than fear, exclusion or harm?*

A beginning rather than an ending

Although today marks the completion of an important stage of the Lotu Factor Project, I do not regard this launch as its ending.

Research has value when it returns to the communities from which knowledge emerged and contributes to change.

So today we return the research to the community.

The report is not intended to sit on a shelf.

The tools are not intended merely to be displayed.

And the website is not intended simply to record what we have done.

We hope they will be used — by churches, ministers, health workers, community organisations, policymakers, researchers, theological educators, families and Pacific communities.

We also hope they will generate further conversations, including conversations that may sometimes be uncomfortable.

That is part of the purpose of research.

The Lotu Factor Project began with a crisis.

But it has led us towards a larger question about our future:

- ◇ How might lotu become an even stronger partner in the health and wellbeing of Pacific peoples?

That is the journey we invite you to continue with us today.

To our participants, our communities, our research team, our partners, the Health Research Council of New Zealand, and everyone who has accompanied this project: **mālō ‘aupito**.

This work belongs not only to the researchers who produced it, but also to the communities whose experiences made it possible.

Mālō ‘aupito, and thank you.