

MAMFOK I TALAYAN HINEMLO': WEAVING RESISTANT RELATIONALITIES TO PROMOTE QUEER AND TRANS PACIFIC ISLANDER WELL-BEING

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In this project, we collaborated with Washington Pasifika communities to gather stories of well-being from eleven Queer and Transgender Pacific Islander (QTPI) community members. Using collaborative qualitative analysis, we sought to understand (1) how QTPI resist settler colonial constructions of Indigeneity, (2) how QTPI Indigeneity relates to QTPI health, and (3) how QTPI build Indigenous connectedness to promote cultural determinants of health. We found that practices of building relationality—such as love and care for spirit, extended kinships, and storytelling—improved QTPI well-being by healing the disconnectedness they experienced from their ancestors, families, communities, and cultures. These findings suggest a need to promote relational practices within Pasifika communities and health promotion programs to support the health and well-being of QTPI.

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INTRODUCTION

Settler colonialism poses unique challenges for Queer and Transgender Pacific Islander (QTPI) belonging and well-being through the racialization of Pasifika Indigeneity. United States (US) policies and state systems controlling access to land, welfare, and citizenship pressure Pasifika communities to perform settler constructions of Indigeneity as a requirement to retain lands and resources (Arvin, 2019; Camacho, 2015; Kihara, 2022; Osorio, 2020, 2021; Teves, 2018). Pasifika communities internalize settler colonial logics of elimination and systems of power and perpetuate the policing of Indigenous gender identity and intimacies through violence and the social exclusion of QTPI (Kahikina, 2024). This policing and exclusion of QTPI, rooted in settler colonialism, has significant effects on the health and well-being of QTPI. Despite settlers' attempts to domesticate, assimilate, and disrupt QTPI Indigeneity, QTPI still exist in defiant opposition to the erasure they experience in their communities. Our study uses stories about well-being from QTPI communities living in Washington State to better understand the relationship between QTPI resistance to settler constructions of Indigeneity, experiences of Indigenous connectedness, and their well-being.

Rooted in settler colonialism, QTPI experience health disparities throughout their lives. In their 2021 National Survey on LGBTQ Youth Mental Health, the Trevor Project found that only 30% of QTPI youth lived in households that affirmed their gender and sexuality, and 17% were able to find affirming community events (Price et al., 2021). Indigenous children's well-being is dependent on Indigenous connectedness—the strength of their relational practices with their families, communities, cultures, ancestors, lands, seas, and skies (Ullrich, 2019). Pasifika conceptual models of health, such as the Fonofale model developed by Sāmoan Fa'afafine scholar, Fuimanao Karl Pulotu-Endemann (2001), similarly uplifts the importance of connectedness to family for Pasifika health. In Fonofale, Pasifika health is comprised of four key elements, all sharing the same foundation: family—immediate, extended, and close intimacies—that Pasifika people have within their lives like the foundation of a fale, or house (Pulotu-Endemann, 2001).

For QTPI youth, lacking familial, communal, and social connectedness can lead to negative mental health outcomes such as psychological distress, depression, and suicide (McConnell et al., 2016; McDonald, 2018; Price et al., 2021). QTPI also experience health challenges into adulthood that stem from these challenges of (dis)connectedness. In an analysis of national survey data from the

Gallup Share Index by the University of California Los Angeles's Williams Institute, researchers found that QTPI adults reported being diagnosed with depression at nearly two times the rate reported by straight and cisgender Pacific Islanders (Choi et al., 2021). The lateral oppression QTPI experience within their families and Pasifika communities has long-term consequences on QTPI well-being over the course of their lives. This lateral oppression is rooted in the introduction of cisheteropatriarchy into Pasifika communities, cultures, and governments by settler colonial powers.

The Advent of Patriarchal Cisgender Systems of Power in Pacific Cultures

By restructuring Pasifika familial systems to cisheteropatriarchal nuclear units in community and policy, settler missionaries instituted power and control over Indigenous bodies, political systems, and everyday life (DeLisle, 2022; Diaz, 2010; Goodyear-Ka'ōpua, 2014; Hattori, 2004; Naputi, 2019; Osorio, 2021). During Spanish colonialism in Guåhan between the sixteenth and early nineteenth century, holy matrimony was introduced by Catholic missionaries, which altered Chamoru matrilineal-clan and political systems that managed land and resource distribution through maternal genealogy (Cunningham, 1992; DeLisle, 2022; Na'puti & Bevacqua, 2015; Natividad, 2012). These disruptions consolidated the power of resource and land distribution under cisgender men and heterosexual couples, thus renorming genealogy and reconsolidating power and control in Chamoru society to align with cisheteropatriarchy (Cunningham, 1992; Diaz, 2010; Naputi, 2019; Souder-Jaffery, 1992). These sociocultural changes, instituted through the establishment of Christianity, were later enforced by the US through settler governance and policies that control gender and family structures, with the aim of policing and assimilating Pasifika communities into US systems of social citizenship.

The assimilation of cisheteropatriarchy and cisheteronormativity in Pasifika societies was perpetuated by policies that restricted land tenure and civil rights along rigid cisbinary gender roles, cisheterosexual intimacy, and patriarchal power, which reshaped familial structures and policed diverse gender expression (Diaz, 2010; Goodyear-Kā'ōpua, 2014; Naputi 2019; Pihama et al., 2016; Young, 2015, 2019). For example, early blood-quantum stipulations in the 1921 Hawaiian Homes Commission Act forced Kanaka Maoli women to pair with Kanaka Maoli men in order to meet blood-quantum requirements and pass land on to their descendants (Goodyear-Kā'ōpua, 2014; Osorio, 2020).

In post-WWI Guåhan, cohabitation was criminalized by the Naval colonial government to “civilize” and domesticate Chamoru kinship and intimacy into nuclear families by requiring children’s legitimacy through state- or church-recognized marriage arrangements (DeLisle, 2022). In Hawai‘i during the 1970s and 80s, a public ordinance required mǎhū wāhine to wear a button stating “I am a boy” in public spaces. Law enforcement policed mǎhū gender expression through carceral and sexual violence (Young, 2019). US and colonial policies structurally shifted sociocultural norms around genders and intimacies that are acceptable to colonial settler regimes.

Cisheteronormativity and cisheteropatriarchy are central components of settler citizenship, which grants civil rights, welfare, land, and political power to those who conform to these ideologies (Jespersen, 2022; Morgensen, 2010). By limiting citizenship through settler policies, settler colonial systems pressure Pasifika communities to reproduce cisheteropatriarchy and cisheteronormativity in attempts to maintain land, resources, and political power. However, despite structural violence and attempts to disenfranchise and distance QTPI from their communities, QTPI persist to resist settler oppression. QTPI continue to practice their intimacies, embody their gender, and fulfill cultural responsibilities in ways that counter the norms of settler citizenship and structures of oppression.

Resistance and Power in Indigenous Gender and Intimacies

QTPI Indigeneity is deeply intertwined with Pasifika practices and embodiments of intimacy and gender. Despite colonial influence, QTPI have always had cultural responsibilities as caretakers, healers, and cultural stewards in various Pasifika genealogies. For example, Chamorus rely on Gela’, Manmalao’an, Manmalalahi, Tinalao’an, Machom, and Mamflorita (see Table 2 for definitions) to care for and nurture children—when a child’s given parents are no longer able to—through a cultural practice called poksai (Camacho, 2015). Some Pasifika communities, like Kānaka Māoli and Sāmoans, have genealogical records in stories that identify Mǎhū- and Fa’afafine-embodiment genders, respectively, as well as practicing intimacies and culturally significant roles beyond heterosexuality and cisbinary gender (Wong-Kalu et al., 2014; Kihara, 2022; Teves, 2018). Pasifika gender-role divisions and intimacies became rigid only amidst the forced introduction of the nuclear family through Christian ideologies and western influence (DeLisle, 2022; Diaz, 2010; Naputi, 2019; Souder-Jaffery, 1992; Arvin et al., 2013). Despite QTPIs enduring

existence, settler colonial societies and institutions continue to seek the erasure of our Indigenous ways of being through systematically normalizing white, western, and Christian ideologies of race, gender, and intimacies among Pasifika peoples.

Due to the introduction of cisheteropatriarchy and the Christianization of Pasifika spiritualities and cultures, QTPI intimacies and genders have become distanced from Pasifika Indigeneity. Particularly, perceptions of QTPIs' culturally specific embodiments of gender and intimacy have shifted, where QTPI identities are now codified as too proximal to western culture and whiteness to be deemed "authentically" Indigenous or cultural by their respective communities (Arvin, 2019; Camacho, 2011; Diaz, 2011; Osorio, 2020; Teves, 2018). For example, in the Guåhan legislature, Senator Telenia Nelson justified her opposition to a 2019 anti-discrimination law reform—one that would provide civil protections and accommodations for Trans people at businesses and government agencies—using transphobic rhetoric under the guise of her cultural responsibilities as a Chamoru Catholic godmother (Guam Legislature Media, 2017). Nelson's rhetoric suggested that allowing Trans people the rights and protections to use the restroom most aligned with their gender would harm her godson's moral innocence. This framing of Trans people as threatening to children ignores Trans Chamoru roles and cultural responsibilities to protect and nurture children (Camacho, 2015) by privileging existing conservative US political rhetoric that demonizes Trans communities as threats to children's safety and moral innocence.

Though settler colonialism has disrupted and complicated QTPI connectedness, belonging, and ultimately well-being, QTPI continue to embody their Indigenous genders and intimacies (Arvin, 2019; Camacho, 2015; Kihara, 2022; McMullin & Kihara, 2018; Osorio, 2020; Teves, 2018). QTPI continue to practice and honor their cultural responsibilities, passed down to them by their ancestors, through practices of Defiant Indigeneity—a refusal or counter-performance to settler colonial systems and rigid racialization of Indigeneity (Teves, 2018). In resistance to cisheteronormative constructions of Indigeneity that challenge the scrutiny of QTPIs' cultural or Indigenous authenticity and belonging, QTPI assert their Indigenous ways of being.

For example, during the COVID-19 pandemic, Guma' Gela' produced a zine known as *Guaiya Yan Puspus*. This publication featured the works of Gela', Mamflorita, Manmalao'an, Manmalalahi, Machom, Tinalao'an, Queer, and Trans Chamoru artists. Their pieces explored Chamoru sex and intimacy, honoring their existence

and connection to Chamoru culture through counter-storytelling (Velasco, 2020). By resisting hegemonic structures that suppress narratives of Queer and Trans Chamorus, this zine was a defiant practice of Indigeneity that explored Queer and Trans intimacy drawn from genealogies that bind these artists to their Chamoru ancestors. Defiant Indigeneity and the resurgence of QTPI genders and intimacies may support QTPI well-being by promoting Indigenous connectedness.

This study was designed and conducted with two QTPI-led organizations—the Guma' Gela' Queer and Trans Chamoru Art Collective (Guma' Gela') and the United Territories of the Pacific Islanders Alliance of Washington (UTOPIA WA)—where we examined communities' stories of health and well-being to illuminate the relationship between QTPI resistance to settler constructions of Indigeneity, Indigenous connectedness, and their well-being. Towards this purpose, the current study seeks to learn (1) how QTPI weave resistance to settler constructions of Indigeneity and (2) how experiences of Indigenous connectedness foster health and well-being. Utilizing collaborative qualitative analysis (CQA) (Richards & Hemphill, 2018) on data from a 2019 study examining the health perceptions of five Chamoru and six Sāmoan QTPI Islanders from Washington State, we illuminate (1) how QTPI resist settler colonial constructions of Indigeneity, (2) how QTPI Indigeneity relates to QTPI health, and (3) how QTPI build Indigenous connectedness to engage cultural determinants of health. Through this work, we seek to better understand how Defiant Indigeneity can inform culturally grounded health promotion work for QTPI and its implications for mobilizing Pasifika communities to improve QTPI well-being.

METHODS

Using CQA, we examined eleven semi-structured interviews conducted with QTPI adults (18 years of age or older) living in Washington State (WA). The data used in this analysis came from a 2019 Indigenist Collaborative Research (ICR) project (Walters et al., 2009) with our partner organizations. Collaboration in this project was guided by relational ethics drawing from inafa'maolek, the Chamoru value system for making collective good (Perez-Iyechad, 2018; Tisnado et al., 2010). Following Pasifika cultural and ICR ethical protocols, QTPI community leaders working with these organizations were selected to serve on

a Community Advisory Committee (CAC) based on their communal, professional, and personal experiences as QTPI. The CAC ensured the protection of our community's stories through collaborative design, analysis, and dissemination processes, centering those stories to capture QTPI challenges and empower their well-being. Our full research team—including the principal investigator, research assistants, faculty, and community members—identified as Queer, Trans, and/or Pasifika. In our practice of inafa'maolek as ethics, publications stemming from the original research project (Camacho et al., 2023, 2024) are written from a place of love and care for our community and their stories, with the intention to mobilize QTPI towards collective well-being and liberation. This study attained exemption status from the University of Washington's institutional review board.

Sample

Community members were recruited using purposive and snowball sampling with flyers distributed through social media and listservs managed by UTOPIA WA, Guma' Gela', and the Associated Students of the University of Washington's Pacific Islander Student Commission. Community members were purposively selected to balance the sample for gender and ethnicity to (1) ensure an adequate representation of Trans communities and (2) prevent dominant narratives from one ethnic group to guarantee the representation of a diverse set of experiences of QTPI. All individuals interested in participating were asked to complete a screening form to determine their eligibility for the study. Of the twenty-three individuals who expressed interest in participating, only twenty-one met the eligibility criterion—adults who self-identified as QTPI living in the greater area of Puget Sound, WA—and were asked via email to participate in the study. The other two individuals were not eligible due to their location and racial identity. Twelve people completed interviews, were compensated with a \$20 Visa gift card, and were asked to share the study flyer and digital interest form with other QTPI community members.

Demographics

QTPI who completed interviews for the study (n=12) self-identified as Pasifika—Chamoru (n=5), Sāmoan (n=5), Sāmoan-Tongan (n =1), and Filipino (n=1); also identified as Queer, Transgender, and/or used culturally specific terms to describe their intimacy¹ or gender; and ranged in age from 22–42 years old (see Table 3). To honor our participants self-identification and to align with current data disag-

gregation practices for Native Hawaiian and Pacific Islander communities (Morey et al., 2022), we excluded the single Filipino interviewee from our analysis. To protect the anonymity of one QTPI participant, their ethnicity was recategorized as Chamoru and their gender and sexual orientation as “unquantifiable.” Our refusal to categorize this QTPIs’ gender and intimacy as “other” or an existing category was done to honor that QTPIs’ Indigenous identity and connection to the Chamoru people (Tuck & Yang, 2012).

Data Collection

Hour-long semi-structured interviews were collected from QTPI in-person (n=6) at both the University of Washington Seattle and the UTOPIA WA office in Kent, WA, as well as online via Zoom video conferencing (n=5) to maintain community health and safety amidst the outbreak of the COVID-19 pandemic. Through interview protocols developed with our CAC, we encouraged QTPI to engage in storytelling in their responses to the interview questions. QTPI were asked about their perceptions and experiences of their health, their interactions with health-care providers, and the relationship between their culture and their health. We also guided QTPI through a mapping activity, where they were asked to reflect on the differences and similarities of health experiences of Pasifika and QTPI using a coconut tree as a metaphor for QTPI well-being (see Figure 1). QTPI were asked to imagine the tree as a representation of community health, where the left side represented the Pasifika community broadly, and the right side represented the QTPI community specifically. The tree contained three levels: The leaves represented common health conditions, the roots represented the root causes of the health conditions, and the trunk represented traditions, practices, and or values from their cultures or ones they held personally. QTPI were asked to list and identify the components of the tree by phase—first the roots, then the leaves, and finally the trunk—providing their responses between PI broadly and QTPI specifically in each section. When discussing the trunk at the end of the activity, QTPI were asked to highlight the important factors from their culture that promoted their health. Deeper discussion and storytelling occurred around each of the highlighted components.

Data Analysis

CQA uses structured team coding and development of a detailed audit trail to improve the trustworthiness and rigor of thematic analyses. We modified Richards and Hemphill’s (2018) proposed procedures to align with ICR principles and

honor Pasifika relational ethics. This included having a CAC member serve as an analyst and community expert to empower (1) QTPI knowledge and worldview throughout the analysis and (2) the use of collective decision-making processes when drafting each iteration of our codebook, diverging from CQA's use of lead researcher decision-making between each analysis phase.

Our analysis team included three coding researchers—the first-listed author and two research assistants—as well as one non-coding peer debriefer, a member of the CAC. This four-step analysis began with an initial meeting to create an overarching plan of analysis and review the underlying frameworks and research questions guiding the analysis (see Figure 2). To prepare the coding team for the process, the following were created: (1) a weekly plan and analysis journal to document observations, (2) coding challenges, and (3) detailed researcher memos. Each subsequent step of analysis refined our coders' collective understanding of the data and themes arising from each interview. Between each phase, the debriefer met with coders to review the drafted codebook with exemplar quotes and adjusted the codebook organization, definitions, and recommended coding conventions. In the second phase, a preliminary codebook was drafted from inductive line-by-line coding on six transcripts split evenly between coders and predetermined axial codes to support the organization of codes. In the third phase, coders took the edited codebook and trained it against three new transcripts and collectively edited definitions, organization, and coding conventions. In the fourth phase, all transcripts were divided among coders and were split-coded. A final meeting was held to organize the exemplar quotes and extract themes from the final codebook and the research team's overall observations. Finally, our results were reviewed by our CAC to provide greater contextual understanding and ethical considerations for dissemination for our findings.

RESULTS

We weave the following QTPIs' stories together to share their collective experiences. To honor their connections to their genealogies, communities, and cultures, while also protecting their anonymity, we gave each QTPI a “drag name,” specifically names of ancestors in Chamoru and Sāmoan story and legend—deified, heroic, elemental, and non-elemental beings. Below we've listed these names and their QTPI identities in the order their stories are shared (see Table 1).

TABLE 1. Names and QTPI Identities

NAME	ETHNICITY	GENDER/INTIMACY
<i>Gadao</i>	Chamoru	Queer and Trans Pacific Islander (QTPI)
<i>Papa'ele</i>	Sāmoan	Queer woman
<i>Tilifaiga</i>	Sāmoan	Fa'afafine Trans woman
<i>Puntan</i>	Chamoru	Tinalao'an Trans Non-binary
<i>Sirena</i>	Chamoru	Queer and Gela'
<i>Fonuea</i>	Sāmoan	Fa'afafine Trans woman
<i>Taema</i>	Sāmoan	Fa'afafine Trans woman
<i>Ko'ko'</i>	Chamoru	Queer and Gela'
<i>Nafanua</i>	Sāmoan	Fa'afafine Trans woman

Our findings demonstrate how these QTPIs’ resistance to the normalizing forces of settler colonialism—through relational practices with their spirit, their extended kin, their communities, and their ancestors—contribute to their overall well-being.² Through these resistant and resurgent cultural practices of relationality, QTPI improve their well-being by directly addressing the lateral, interpersonal, and systemic oppression they face within and beyond their communities. These relational practices allow QTPI to heal the disconnectedness with family, community, cultures, and their ancestors, even those who are forgotten. Though lateral and systemic colonial oppression negatively impact their well-being by perpetuating this disconnectedness, QTPI share a futurity in which remembering QTPI histories and perpetuating stories could help heal the disconnectedness they experience and promote their individual and their community’s well-being.

Generally, QTPI resist settler colonial oppression through building relationality as a cultural practice in their everyday lives. Gadao, a Chamoru QTPI, shares that in Chamoru culture, relational values and practices create a system of reciprocity that provides resources for QTPI health and well-being.

GADAO: Well, so one thing is, like, *manggâfa*, right...having values that keep you connected to your family...with *poksai*, like, being able to, you know, being able to have kin who are family, right...like the practice of *chenchule*, you know. And I think about that as, like, also a system of reciprocity, right. So, if you can build a system with your fam—chosen and not—where you're taking care of each other's needs in the best way possible, then I think, you know, it's, like, the more resource that you have, right, the more access you have to a state of well-being and health...

These cultural practices and others, such as “*dance and prayer and chant...speaking [their] language*,” that Gadao notes resist the indoctrination of western ideologies and allow them to nurture a deeper connection to their ancestors who support them in making health decisions. Through relationality, QTPI heal the disconnectedness they experience from ancestors, families, communities, and cultures perpetuated by the oppression of their Indigeneity. In defiance, QTPI build practices of relationality with their inner spirit, their extended kin, chosen family, and community to resist the suppression and policing of their gender, intimacies, and ways of being.

Building Inágofli'e' and Alofa for Spirit

To resist lateral oppression and heal the disconnectedness that QTPI experience with their families, community, cultures, and ancestors, many QTPI build a practice of relationality and reciprocity within themselves that is rooted in cultural values. In a previous analysis, our community advisory board identified two relational values that improved QTPIs' well-being when they were received or nurtured: (1) *inágofli'e'*—a Chamoru way of being centered on showing love and expressing care through “deeply” seeing or understanding someone for who they truly are, and (2) *alofa*—a value of *fa'asamoa*, or the Sāmoan way of life, that represents all the ways Sāmoans share love, underlying how Sāmoans build relationality with each other (Camacho et al., 2023, 2024).

In this analysis, QTPI built inágoŋi'e' and alofa with their spirit to resist the oppression of their Indigeneity that disconnected them from their families, communities, cultures, and ancestors. Spirit can be defined as one's life-force energy or the essence that makes someone Indigenous—the cultural ways of being that maintain their genealogical connection to place, their land, sea, skies, and ancestors (Ullrich, 2019). In Chamoru and Pan-Polynesian epistemologies, this kâna or mana exists within and beyond one's body (Spencer et al., 2023) and is nurtured through cultural practices that center relational ways of being (Spencer et al., 2023; Ullrich, 2019; Walters et al., 2020).

When asked how her culture, gender, and intimacies impact her health, Papa'ele, a Queer Sāmoan woman, responds that having a sense of love for herself is important to maintain her health when challenged by oppression within her family, community, and culture.

PAPA'ELE: *Queer identities aren't really accepted unless it's for entertainment, and you do get put down. Well, I got put down a lot, like, growing up with the culture—and I love my culture—but that is one thing that they're very strict about due to, um... just family traditions and religion....But it does make you focus a lot more on yourself and...just trying your best to love yourself is the biggest thing, and I think that's really good. Upkeeping with your health. Does that make sense?*

For QTPI, when cultural identity is positioned at odds with their gender and intimacies, they have a greater sense of disconnectedness from their families, communities, cultures, and ancestors. This disconnectedness is perpetuated by lateral oppression from the policing of QTPIs' Indigeneity by their families, communities, and cultures that pressure QTPI to conform to settler constructions of cisheteronormativity and cultural authenticity. Thus, disconnectedness is a mechanism that underlies how lateral oppression contributes to challenges QTPI experience while maintaining their well-being.

For Tilifaiga, a Sāmoan Fa'afafine Trans woman, the lateral oppression she previously experienced—the rejection from her family and expectations to perform rigid cisheteronormative femininity perpetuated within the Trans community—had negative consequences on her well-being when she began her gender transition.

TILIFAIGA: *My mental state was telling me that in order for me to be a part of a specific community, that I'd have to look the part, I'd have to sound the part—sound feminine—in order for me to fit in and that kind of played with a lot of how I was thinking and how I would go out in society for a very long time. And so, it kind of, like, really fucked me over for a while. Part of it, too, was being disowned from my family for trying to go through this transition and living myself authentically, where my parents disowned me because they didn't think that, well, they're very religious Christians and that was against their beliefs.*

As she explains, in Sāmoan families, “everybody has a Fa’afafine child. But when somebody starts transitioning—or when a Fa’afafine transitions to live their life as a woman and starts changing—adding whether it be top surgery or whatever—it becomes a harder conversation culturally.” Between cultural and western Queer and Trans spaces, QTPI find it challenging to articulate their identities and find belonging. For Tilifaiga, the lateral oppression she experiences is the source of disconnectedness that has negative consequences for her mental and physical well-being. QTPI who face disconnectedness from their families, communities, and cultures discuss the importance of having a strong sense of wholeness in their Indigeneity in promoting their well-being.

We ask Puntan, a Tinalao’an and Trans Non-binary Chamoru, how their cultural identity, gender, and intimacies impact their health. Puntan shares, “*When I exist with my sexual and gender identity, when that all intertwines and exists together with my Chamoru identity, it makes me feel whole and grounded.*” Puntan also shares that this feeling of wholeness provides them with a greater sense of mental well-being.

For QTPI, relationality to spirit is resistance to cisheteronormativity and western Queer and Trans norms. For example, Gadao shares that by unlearning western normative gender and sexuality—in this instance, western Queer sexuality and Transgender gender identity—they are able to build an interconnected relationship between their gender, intimacies, and Indigeneity.

GADAO: *I think one thing that I've been kind of trying to wrap my head around...our current concept about...Queer sexuality and even sometimes like Transgender-ness, have to do with the way that we've been indoctrinated by the west to think about sexuality and gender as having a normative sexuality and gender, right. And so, like one of the projects that I've been embarking on...like, in an effort to undo that...I've been really trying to, like, understand my sexuality and my gender identity from within the context of an Indigenous worldview, which to me is, like, even beyond the body. And in the spirit.*

By building practices of relationality with their spirit, QTPI are able to nurture a sense of wholeness in their Indigeneity. This, in turn, helps heal the disconnectedness they experience with their families, communities, and cultures, which promote their physical, mental, and spiritual health. Some QTPI discuss the tension they experience with their spirit in this process.

Sirena, a Queer and Chamoru Gela' woman, shares how she practiced chenchule' during her journey of building a better relationship with her spirit. She describes chenchule' as giving time, caring for others undergoing hardship, and building reciprocity with one's spirit, "*making sure we fill our cup back up in the same way we poured it out.*" As an extension of chenchule' for her spirit, Sirena forgives past versions of herself that had shame around being Gela', which help her gain a sense of happiness and liberation.

SIRENA: *You know what's interesting...the practice of chenchule'... When I first came out...I wasn't gracious with myself in this new identity that I was building. I'm coming to terms with and I need to forgive myself for ever doubting my feelings...forgiving ourselves that we're not doing anything wrong....we're only speaking, you know, to our own happiness and to our own liberation, which is then collective liberation.*

Sirena's discussion of building a practice of chenchule' with her spirit is similarly discussed by other QTPI. For several Fa'afafine and Trans QTPI, undergoing gender-affirming care and transition is a practice of building relationality with their spirit that brings a sense of liberation. For Tilifaiga, her family's normative

expectations for her Indigeneity, specifically her gender, create a barrier to starting her transition. After she began her transition to honor her truth as a Fa'afafine and as a Trans Woman, it was easier for her to maintain her mental well-being, because transitioning affords her a sense of liberation.

TILIFAIGA: *And so, when all of that happened and I transitioned and I started living...you know, truth—my truth—I was the happiest person. I think most of all of my anger, all of that just disappeared...to see the world from a different perspective, where it's not so dark all the time...being free from what was tying me down after coming out...I put my mind at ease from, you know, all what people would think or what society would say about how a woman should look like or act or sound.*

Tilifaiga shows how liberation and resistance—through relational practices with one's spirit—can facilitate healing for QTPI, particularly through gender transition. As Sirena notes, this sense of liberation that comes through building relationality with one's spirit can, in turn, lead to collective liberation. This sense of liberation is something similarly discussed by other QTPI, who collectively share that liberation is achieved through the relationality they build with other QTPI, their more-than-human relations (ancestors, lands, waters, skies), chosen kin, and the communities they find belonging in.

We ask Papa'ele how culture promotes QTPI health. In response, she shares her admiration of the strength of other QTPI that inspire her to have greater strength and courage to be open about her Queer identity.

PAPA'ELE: *I do value...all QTPIs' strength through everything that happens...and glitter...glitter everywhere...the ones that are out and proud and, you know, like, don't give a damn. They're out there doing their own thing. And like, "This is who I am. I'm going to, like, fully dress up and, you know, do my drag makeup today and I'm going out or I'm going to wear, like, my rainbow Vans, and shoes and like, I don't care if I go out and people see me like this."...I appreciate the strength of all those that can do that because sometimes I cannot.*

As Papa'ele describes, the “glitter”—one's strength and resiliency—she sees in other QTPI who have developed inágoſi'e' and alofa with themselves as a cultural practice, promotes QTPI well-being and has a ripple effect from individual to community. QTPI can share these practices within their communities in ways that help to heal the disconnectedness QTPI experience with their families, communities, cultures, and ancestors through extended kinship networks. The sense of liberation then, in turn, allows QTPI communities to improve their well-being.

Poksai, Extended Kin, and Community Care

FONUEA: *It's important to choose and pick who to keep within your life. But I have a ton of support with UTOPIA, as my second or chosen family. And there as a collective group, we're able to share stories and share experiences and to encourage each other to face adversity.*

Generally, familial and community connectedness is identified by QTPI as an important facilitator of QTPI health. In its absence, QTPI feel low self-worth and poor well-being. As Fonuea, a Sāmoan Fa'afafine Trans woman, shares above, chosen family and community are important factors in maintaining QTPI well-being because they are spaces where QTPI can share their stories and experiences of oppression. QTPI find familial connectedness outside of their given families—in their chosen families and extended kinship practices.

As Taema, a Sāmoan Fa'afafine Trans Woman, states: “*Second families are much more like our family.*” QTPI and Pasifika peoples have long practiced forms of extended familial kinship with those they have no blood relation, like the Chamoru practice of poksai. When QTPI are asked how chosen family and culture contribute to their health, many QTPI discuss how fostering relationality and reciprocity with chosen family members or extended kin contributes positively to their overall health.

Here Ko'ko', a Queer Chamoru Gela', defines poksai and chosen family as extensions of these practices that positively contribute to their well-being through a greater sense of familial connectedness. Their chosen family provides support or empathy when their given family cannot.

KO'KO': *In my culture, we have that concept of, like, poksai, right. Being able to have, like, adopted “like children” or adopted family. Like, you’re not blood related, but you’re related because you’ve been through some stuff or you’re there for one another...as I am going through the world and having these life experiences, my biological family isn’t necessarily who I can turn to so much for guidance or support...so to have people that are...going through something similar and being able to converse with them and seek their advice and visa-versa and all those things, I think, is definitely good for my well-being and definitely takes away a lot of feelings of isolation.*

Familial disconnectedness from given family is common among QTPI. Nafanua, a Sāmoan Fa’afafine Trans woman, notes that though she had a strong and healthy relationship with her given family, they “never understood [her transition] because they’re not trans, they’re not Fa’afafine...and as much as they want to understand...to support [her], they will never truly.” The disconnectedness Nafanua experiences with her given family is driven by cisheteronormative norms within QTPIs’ given families and communities. Chosen families and extended kin are places of refuge and care.

Tilifaiga shares with us that UTOPIA WA is the space where she found her chosen family in diaspora. For her and other QTPI, chosen family is a second home, a place of refuge amidst the harm they experience from their families, communities, cultures, and spaces they must navigate.

TILIFAIGA: *UTOPIA has always been that safe haven for a lot of us who move here and try to find a home...it’s very important that...this community exists here in the Pacific Northwest so that we can come together and unpack all the harm, unpack all—a lot of shit that’s been thrown at us in society—and just try to find a place to heal, find a place where we can be able to connect not only to ourselves, but back to our land, back to our ancestors, back to our family and back to our culture and everything that we know; that we came here and that we want to be able to continue that legacy that our family has put out for us.*

Regardless of where it had occurred, experiences of cisheteronormativity and oppression are identified by QTPI as consequences of settler attempts to suppress and eliminate QTPI cultural practices and ways of being. As Taema shares, QTPI experience policing and oppression of their identities outside of their communities within broader social and systemic contexts. She discusses that Fa'afafine and QTPI are policed and criminalized because they do not fit into settler systems that privilege whiteness and cisheteronormativity.

TAEMA: *You know, like, all of these different identities that continue to compound criminalization of Trans people, but also like, you know, Fa'afafine, you name it, like, any cultural identity, because in the eyes of, you know, white America or police, like, they don't know you're Fa'afafine, they know you're, you know, you're definitely not cis. So, you're policed for that, right. And criminalized.*

When discussing their experiences with the medical system, QTPI share that they feel their Indigeneity is disregarded and diminished by providers who fail to understand how their Indigeneity informs their health and well-being. Tilifaiga describes one such interaction during her transition, when she met with a mental healthcare provider while seeking support. She shares that her provider had asked her, “Why do you continue to value something that has hurt you?” Tilifaiga responded, “*Because, you know...that's who I am. No matter where I go...I will always be a Sāmoan Fa'afafine who is rooted in family values, my Sāmoan culture, and my Sāmoan traditions.*”

Some Trans QTPI also discuss the medicalization of Trans identities and the bounding of Pasifika Indigeneities in clinical settings. Though not explicitly stated, QTPI stories reflect how medical systems require, normalize, and privilege binary Trans experiences in gender-affirming healthcare (Fraser et al., 2021; Stroumsa et al., 2024; Vipond, 2015).

Nafanua discusses specific expectations by medical providers to perform normative Trans experiences when she sought out hormone replacement therapy, much like how Tilifaiga describes having to conform to settler constructions of cisbinary femininity in specific ways to be a part of white and western Trans communities.

NAFANUA: *When I'm being asked questions, I will...especially, like, as a Trans woman trying to seek, you know, hormone therapy...I worry about saying the wrong thing and say, "Oh, they're not qualified. Maybe you need to go through some counseling and things like that."*

Chosen family and community are spaces that QTPI are able to (1) heal the disconnectedness they experience in their given families, larger communities, cultures, and with their ancestors and (2) find care and support for experiences of oppression. In these spaces, QTPI resist disconnectedness through maintaining and generating new cultural practices and traditions.

As Taema shares, chosen families are spaces where QTPI can nurture connectedness to each other and their culture. For QTPI, chosen family is a space of resistance where they can maintain, practice, and grow their culture rooted in ways of knowing that are suppressed through cisheteronormativity and colonization. For Taema, this space improves her mental well-being.

TAEMA: *I have...like little villages of chosen families. And, you know, I will always have strong ties to...my Fa'afafine siblings, because—and it's not just a Fa'afafine thing, it's a Pacific thing...And that's something that I've always been, you know, I've always admired about our people...needing to stay together, you know, to protect one another...Like Fa'afafine who don't have access or ties to their own families, this local community becomes that for them...they're able to continue to practice their rituals, their cultural practices, but also they begin to create new practices, right. And an honor to the elders, you know, in the past...[who] wouldn't have been given the same honor, the same respects given to cis folks.*

QTPIs' practices of gathering, supporting, protecting, and caring for one another in chosen family is an extension of Pasifika genealogies of kinship. QTPI identify chosen family as interconnected with community and relationships where care and the proliferation of cultural knowledge also occur. Community care and

chosen family are highlighted by QTPI as essential to their health and well-being because they facilitate greater connectedness to family, community, culture, and spirit. Through these resurgent extended kinship practices, QTPI promote their healing by providing safety, social and emotional support, and cultural knowledge to each other.

In culmination, by developing colonial-resistant practices of relationality with their chosen kin, communities, ancestors, and their own spirits, QTPI honor shared Pasifika values—rooted in their worldviews—to improve their well-being. Relationality disrupts settler colonialism's attempts to suppress QTPI ways of being and restore their connectedness with their families, communities, cultures, and ancestors. QTPI also share the importance of recording, knowing, and remembering histories of QTPI ancestors, sharing their personal stories with other QTPI in their communities, and empowering future generations of QTPI to maintain this relationality. Through storytelling, QTPI imagine and dream worlds where all QTPI are reconnected to their families, communities, ancestors, and lands.

Mo'na: Histories, Stories, Dreams of QTPI Identity and Existence

FONUUA: *There is power through storytelling. And it's important to keep history alive...passing on the torch of those before you, your ancestors. And it's immortalizing all of the shared history and projecting that into the future...receiving the stories or hearing their stories...can surpass all of the other things that I've listed.*

Stories play an important role in how chosen family and community care improve QTPI well-being. Above, Fonuea highlights the power of storytelling in the continuation of QTPI knowledge, existence, and in perpetuating QTPI well-being into the future. Mo'na, the Chamoru circular cosmology of time, denotes that the past, present, and future constantly move in a grandiose cycle (Bevacqua, 2019). Similarly to this concept, remembering and documenting these stories, histories, and everyday experiences allow QTPI to find empowerment, wholeness in their Indigeneity, and healing from disconnectedness for contemporary and future generations of QTPI.

We ask Papa'ele how her peoples' history contributes to her health. Papa'ele shares the following:

PAPA'ELE: *...the rise of Fa'afafines. Not only were they looked at for entertainment, but for a lot of other Queer people as an inspiration, I'd say, for our culture...it's a big stepping stone for all types of Queer people in [Pacific] Islander culture, because I'd say they're the ones that face the most harsh comments and criticism. And to see them go through it makes it really encouraging for the rest of us.*

Remembering the histories and stories of resistance of QTPI ancestors empowers QTPI resistance and reaffirms their belonging in their communities and cultures for generations to come. Several QTPI discuss how stories about QTPI allow them to feel greater connectedness between their genders, intimacies, Indigeneity, and cultural identity. Despite the resistance through remembering, documenting, and telling QTPI stories, some QTPI note how the influence of colonization on QTPI histories and stories create experiences of disconnectedness from their families, communities, cultures, and their Indigeneity.

Some QTPI note how QTPI stories within their Indigenous histories are often altered by colonization. Sirena shares how the influence of Catholicism and Christianity on Chamoru culture impacts historical narratives of Queer and Trans Chamorus. Sirena says that “Anytime I hear anything about, like, cultural and, like, historical with being Queer and being Chamoru, just like, that’s the first thing that comes to my mind...There’s so much shame. And honestly, I don’t even know...when that started.” This shame leads QTPI to feel disconnectedness within their Indigeneity, which is evident in Puntan’s discussion of feeling like an “imposter” amidst their family and culture that pose challenges for their mental well-being.

PUNTAN: *The colonization of our islands...took a huge toll on my gender and sexual identity. And just having to unlearn and relearn...patriarchal roles and stereotypes that we are taught...I guess just like navigating being Trans Non-Binary in a cishetero world...Heteronormativity in the Chamoru culture right now*

is very conflicting, especially like around my Chamoru family and...it does create imposter syndrome for me...it was something you just didn't talk about....and it's confusing for them...the possibility that like there are genders other than male or female or not male and female at all. So, it just gets really tiring...to keep explaining it, like, from the start, over and over again.

QTPI face oppression or rejection when trying to articulate their Indigeneity to their Pasifika communities due to the erasure of QTPI stories. In a previous analysis, we identified that the policing, erasure, and invisibility of QTPI identities, as well as experiences of violence, all had negative consequences to QTPI well-being (Camacho et al., 2023, 2024). The obscuring of QTPI stories reinforces and assimilates cisheteronormativity in QTPIs' families, communities, cultures, and everyday lives. QTPI note how archiving QTPI stories counteracts these disruptions that settler colonialism and cisheteronormativity cause to Pasifika communities. Stories are seen as *āmōt* or *vai fofō* (medicine) to unlearn logics of power, like cisheteronormativity, within Pasifika communities and facilitate greater belonging of QTPI.

We ask Puntan what cultural aspects were important to improving QTPI health. Puntan shares, *"I would add more of, like, initiative or emphasis...to unlearn homophobia. And, like, Trans and like, gender diversity is also very rooted within our culture. And how that was also a tradition in ancestral times."*

Generating new QTPI histories and stories are also seen to improve QTPI well-being. Sirena notes the presence of this practice within QTPI communities and its potential for promoting QTPI belonging.

SIRENA: *I feel like, though...we're creating a new history for ourselves, especially for being more accepting, not just of, like, people and who they love, but also in the ways in which love can look like, whether that means, like, starting a family...or I don't know. I feel like we're in the path of creating our own history. It feels exciting and scary at the same time.*

As Fonuea notes, stories can project knowledge, project power, and promote the well-being of contemporary and future generations of QTPI. By remembering, regenerating, creating, and archiving QTPI stories—legends, histories, genealogies, etc.—QTPI foster greater connectedness to their QTPI ancestors, families, communities, and cultures and promote greater belonging of their Indigeneity. By connecting the past, present, and future in a full circle, QTPI disrupt settler colonial systems of power that disconnect them from their community to actualize futures where QTPI belonging in their Pasifika communities is restored.

DISCUSSION

The stories QTPI share illuminate the relationship between QTPI Indigeneity, resistance to settler colonial logics, and experiences of Indigenous connectedness with their health and well-being. Through colonial-defiant practices of relationality and reciprocity with their chosen family, community, ancestors, and own spirit, QTPI resist settler constructions of Indigenous authenticity and cisheteronormativity. Consequently, QTPIs' defiant practices of relationality help to improve the belonging and Indigenous connectedness of QTPI, and, in turn, improve their well-being.

Relationality is an important Pasifika practice that directly addresses the imbalance of Indigenous well-being that settler colonialism and racism perpetuate (Blaisdell, 1996; Diaz et al., 2020; Pihama et al., 2017, 2020; Spencer et al., 2023). In fact, culturally grounded health interventions and traditional healing practices rely on restoring relational ways of being to improve Indigenous communities' health (Diaz et al., 2020; McGrath & Ka'ili, 2010; Paglinawan et al., 2020; Walters et al., 2020). Our findings suggest that QTPIs' resurgent and defiant Indigenous practices of relationality in their everyday lives nurture connectedness to their families, communities, cultures, and ancestors which, in turn, improve their well-being.

By building *inágofi'e* and *alofa* with their own spirit—a defiant and resurgent cultural practice—QTPI share deep care and love for their spirit. QTPI practice this in non-traditional ways like self-forgiveness and gender transition to heal their disconnectedness by nurturing love and care for all parts of their spirit. Panglinawan et al. (2020) suggest that cultural practices that promote health must have totality in

both (1) essence—the underlying factors that make a cultural practice Indigenous, like an Indigenous practitioner or a genealogy of that practice—and (2) form—the motions and actions that constitute the practice. Though some QTPI practices do not take on traditional form, QTPIs' ability to generate a harmonious balance between these forms of defiant practices and their relational essence acts as an extension of Pasifika relational values. Defiant practices of Indigeneity, therefore, maintain this balance of essence and form because—though they may not appear authentic in settler ideologies—they remain genealogically connected to land and one's ancestors (Teves, 2018).

Toxic narratives imposed on QTPI bodies, minds, and spirits by settler colonialism—ones that attempt to confine their cultural identity, gender, and intimacy (Walters et al., 2011, 2020)—are transformed when QTPI nurture *ināgofli'e* and alofa with their spirit. For our interviewees, gender transition was a critical step that allowed QTPI to build healthier relationality with spirit because it affords QTPI a sense of wholeness in their Indigeneity. For Pasifika and Indigenous Trans people, transitioning can be a defiant cultural practice that alleviates embodied historical and ongoing trauma they experience due to settler colonialism (Fieland et al., 2007; Walters et al., 2011; Brave Heart et al., 2011). However, transitioning as a defiant practice, as Tilifaiga's narrative demonstrates, is not done to conform to western ideals of settler Transness, where transitioning's goal is thought to be cis-passing (Jespersion, 2022). Rather, transitioning as a defiant practice for QTPI is a personal journey of transformation that allows Trans QTPI to nurture a deep interconnected relationship between their vessel (body) and their spirit.

QTPI experiences of disconnectedness and health challenges are partially attributed to the lateral oppression they experience from other non-QTPI Pasifika, Queer, and Trans community members. Homonationalism and settler transnationalism—performances of Queer and Trans identity that uphold cisheteronormative ideologies and, in turn, the settler state—legitimize Queer intimacies and Trans gender identities that conform to cisheteronormativity while subjugating Indigenous gender and intimacy through western legal systems that limit settler citizenship (Camacho, 2015; Tapu, 2020; Morgensen, 2010; Puar, 2015; Jespersen, 2022). In this sense, LGBTQIA+ recognition politics can perpetuate the oppression of Queer and Trans Indigenous people because they paradoxically form Queer and Trans belonging around settler citizenship, whiteness, rigid binary gender, and homonormative intimacy (Jespersion, 2022; Morgensen, 2010; Puar, 2015; Tapu, 2020).

Pasifika, Queer, and Trans communities must work towards unlearning settler logics that police, suppress, and erase QTPI gender and intimacy in order promote belonging and well-being among QTPI.

QTPI ways of being transcend what western Queer and Transgender identities can articulate, and health services for QTPI must be equipped to address this reality (The QTPI Village, 2025). Cisheteronormativity in the US healthcare system can also perpetuate systemic racism against QTPI, Two-Spirit, and gender-diverse Indigenous individuals seeking gender-affirming healthcare. A recent study by Harner et al. (2024) found that culturally diverse Trans patients' needs were not adequately addressed by the US medical system's cisnormative, culturally exclusive structures, policies, and care protocols. Indigenous gender and intimacies have always been threats to settler colonial systems because they do not conform to cisheteronormativity (Jespersion, 2022; Morgensen, 2010; Puar, 2015; Teves, 2018), and "passing" has historically been a tool to police and eliminate Indigenous Trans people within the US empire (Jespersion, 2022; Young, 2019). Gender-affirming healthcare for Trans QTPI, Two-spirit, and gender-diverse Indigenous people requires flexibility and expansiveness to improve their access to essential health services, including gender-affirming healthcare and transition care (Oliphant et al., 2018). Improving Trans QTPI well-being requires structural changes in the medical system that decenter cisheteronormativity.

Family is at the core of Chamoru, Sāmoan, and Pasifika ways of being, which has historically included extended kinship practices. For QTPI, chosen family is a defiant practice and everyday articulation of extended kinship practices that promotes their well-being. Chosen family provides QTPI with familial connectedness. As Ullrich (2019) notes, for Indigenous communities, familial connectedness can extend beyond one's blood relatives to others with whom Indigenous people experience deep spiritual connectedness. Chosen kinships and intimacies that QTPI share with one another are a refusal of settler colonialism's attempts to assimilate and domesticate Pasifika kinship practices into cisheteronormativity—specifically nuclear family units (Young, 2019). Through these resurgent and resistant practices, QTPI are able to nurture familial connectedness and improve their well-being.

Community is also described as a resurgent and resistant extended-kinship practice that is synonymous with chosen family. Chosen family and community provide safety and care for QTPI from systems and spaces where QTPI Indigeneity

is oppressed or policed. As Pasifika scholars have noted, criminal justice systems have extensively surveilled and policed femininity, gender diversity, intimacy, and kinship among Pasifika peoples (Camacho, 2015; DeLisle, 2022; Hattori, 2004; Kihara, 2022; Young, 2025, 2019). By creating networks of care, QTPI and Pasifika communities can offer protection, social support, resources, collective care, and spaces to sustain cultural ways of being—especially amid systems that oppress and police Pasifika communities in order to assimilate them into settler citizenship and society (Young, 2019). Furthermore, extended kinships are crucial for health promotion in Indigenous communities because, in an Indigenous worldview, these types of kinship are part of the foundation for Indigenous well-being, especially in healing processes for historical trauma and colonial harm (Evans-Campbell, 2008; Schultz et al., 2016; Ullrich, 2019; Pulotu-Endemann, 2001; Paglinawan et al., 2020).

Remembering and perpetuating QTPI stories of the past and present is a relational practice with ancestors, one central to promoting QTPI well-being. Storytelling is a powerful practice and medicine (*āmot, vai fofō*) that directly addresses the settler suppression of QTPI knowledge and ways of being. The suppression of QTPI histories, stories, and knowledge is a means by which settler colonialism has historically limited QTPI claims to Indigeneity and, ultimately, land (Osorio, 2020; Teves, 2018). Stories provide a space for a place of refuge for QTPI within their Indigenous ways of being (Osorio, 2021). They offer ways in which Indigenous peoples can understand the world, engage and pass down their Indigenous knowledge, heal from colonial harms, and actualize and experience their liberation (Duarte & Belarde-Lewis, 2015; Million, 2011). In the Pacific, stories have existed as a relational way of being (Tecun et al., 2018) that can transform embodied narratives of settler colonialism and restore belonging (Osorio, 2020, 2021; Walters et al., 2011, 2020). QTPI communities should continue to gather, create, and retell stories to foster connectedness with ancestors, promote their well-being, and actualize futures of QTPI belonging and well-being.

LIMITATIONS

As noted in a previous analysis of the data, our data collection and sample are limited by geographical location, size, and representation of QTPI experiences beyond Chamoru and Sāmoan communities (Camacho et al., 2023, 2024). Stories of diverse QTPI from spaces outside of WA state should be analyzed to further examine the connections between QTPI resistance, Indigenous connectedness, and well-being. Furthermore, we did not ask specifically about Indigeneity, Indigenous resistance, and Indigenous connectedness in our interview protocols—though not a direct limitation, as these naturally surfaced within stories QTPI shared with us. Future studies should analyze these constructs more intimately to gain greater insight into QTPI Indigenous connectedness and their well-being.

CONCLUSIONS

Resurgent practices of relationality are important to improving the health and well-being of Indigenous communities as they directly address our continued oppression (Million, 2020). QTPI have everyday defiant practices of relationality that foster connectedness to family, community, ancestors, and spirit that nourish their well-being. Our findings suggest that culturally grounded health interventions can build on defiant practices—e.g., building relationality with one's spirit, generating spaces that foster chosen family and community, and perpetuating oral histories and stories of QTPI—to improve QTPI well-being. Our findings also suggest that culturally grounded health promotion can utilize colonial-defiant cultural practices, as they have the potential to improve the well-being of QTPI, Pasifika, and Indigenous communities. Our findings also point toward (1) a need for Pasifika communities to promote QTPI belonging through collective processes that support the development of critical consciousness among Pasifika communities and (2) a need for structural and systemic changes that decenter cisheteronormativity within Pasifika communities. Our relations and our responsibilities to one another is like a fishing net that—when broken, damaged, or altered by settler colonialism—can entangle us and harm our well-being, along with that of all those connected to us (Osorio, 2021). QTPI continue to promote their and others' well-being by weaving defiant relational practices and unweaving these entanglements that continue to harm our collective well-being.

APPENDIX

TABLE 2. Queer and Trans Pacific Islander (QTPI) Gender and Intimacy Terms

QTPI TERM	PASIFIKA GROUP	DEFINITION
<i>Gela'</i>	Chamoru/ Chamorro	This term was used to describe Chamoru men who were feminine or who had Queer intimacies with other men. According to Chamoru stories, Gela' was derived from "Miguela," a nickname given to a Queer Chamoru ancestor whose name was named Miguel. This term became colloquially used by Chamoru communities. Today, this term is more commonly used as an umbrella term for Chamorus who embody gender and intimacy beyond cisheteronormativity.
<i>Mamflorita</i>	Chamoru/ Chamorro	Like Gela', this term was used to describe Chamoru men who were feminine, who had Queer intimacies with other men, or those who would be contemporarily labeled Trans feminine. The term's literal translation is "to act like" or "become" a little flower, using the verbalizing prefix <i>ma-</i> with the word <i>florita</i> or "little flowers." Mamflorita is used less often today but is also used as an umbrella term.
<i>Manmalalahi</i>	Chamoru/ Chamorro	A term to describe Chamorus "who act like men." This term has been used historically to refer to Chamoru women who were queerly intimate with other women.
<i>Manmalao'an</i>	Chamoru/ Chamorro	A term to describe Chamorus "who act like women." Some have suggested that this term is used by some Trans women and other Trans feminine Chamorus/Chamorros from Sa'ipan.
<i>Tinalao'an</i>	Chamoru/ Chamorro	A term used by Chamoru elders to describe Gay and feminine Chamoru men. While it can be translated as "not" (ti) "a woman" (palao'an), some Chamoru language teachers suggest that the term does not necessarily imply that the person it describes is a man. It does not map neatly onto binary gender constructs.
<i>Mâchom</i>	Chamoru/ Chamorro	A Chamoru word that may have been used to describe Chamoru men who had Queer intimacy with other men or who were feminine. It's literal meaning is "to be impassable and covered in vines." It is unclear why it was used to describe Chamorus who exist beyond cisheteronormativity.
<i>Fa'afafine</i>	Sāmoan	A word that describes a Queer Sāmoan's journey between masculinity and femininity with no destination or set presentation; a general term used by Queer and Trans Sāmoans, despite the term being used to primarily describe or align with Trans feminine Sāmoans' experiences.

<i>Fa'atane/Fa'atama</i>	Sāmoan	Though these two terms have existed in the Sāmoan language, within the last fifteen years, they have been more acknowledged by Queer and Trans Sāmoans. It is commonly used to describe Trans masculine Sāmoan experiences.
<i>Aikāne</i>	Kanaka Maoli/ Native Hawaiian	A term used to describe Queer(ed) intimacies beyond cisheteronormativity among Kānaka Maoli. This term cannot be rigidly defined; it encompasses same-sex relationships that are platonic, sexual, or both.
<i>Māhū</i>	Kanaka Maoli/ Native Hawaiian	An umbrella term used to describe Kānaka Maoli who embrace both masculinity and femininity. This term can be inclusive of people who identify as Trans. Māhū wahine (also ha'awahine/ho'owahine) and Māhū kāne (ha'akāne/ho'okāne) are also used to describe experiences of Trans feminine or Trans masculine individuals, respectively.

Note: These terms were defined with support from the community advisory committee; many were uncovered through community stories and cited materials in this manuscript. Readers should mind that these are in no way direct translations and that QTPI that use these terms are not monolithic groups. This table was originally presented in a previous publication from this project and has had updates to its definitions provided (see Camacho et al., 2024).

TABLE 3. QTPI Demographics

VARIABLE	n	%
Ethnicity	11	
Chamoru	5	45.5%
Sāmoan-Tongan	1	9.1%
Sāmoan	5	45.5%
Gender		
Gela'	1	9.1%
Tinalao'an	1	9.1%
Fa'afafine	5	45.5%
Cisgender Female	2	18.2%
Cisgender Male	1	9.1%
Unquantifiable	1	9.1%
Intimacy	11	
Gela'	3	27.3%
Queer	2	18.2%
Unquantifiable	1	9.1%
Gay	1	9.1%
Straight	4	36.4%

TABLE 4. Pacific Islander Cultural Terms and Technical Terms

PACIFIC ISLANDER CULTURAL AND TECHNICAL TERMS	DEFINITION
<i>Inágofli'e'</i>	A Chamoru/Chamorro way of being and practice of intimacy and love that extends care through deep understanding of another's experiences and existence. It can include acts, expressions, and embodiments of care where someone "validates" or "sees" someone for who they truly are.
<i>Alofa</i>	A core value and practice of fa'asamoa, or the Sāmoan way of life. This is a relational way of being that encompasses the diverse ways in which Sāmoans express love. Alofa is at the center of kinship practices, relationality, and love within Sāmoan communities.
<i>Qualitative research</i>	The scientific analysis of text, interviews, stories, documents, public testimonies, and other written, visual, or auditory data that elucidates patterns in events, common or unique themes, phenomena, lived experiences, etc.
<i>Settler colonialism</i>	The interpersonal, sociocultural, structural, and systemic processes that favor the elimination of Indigenous peoples for a newly established nation or society of settlers (Arvin, 2019; Veracini, 2011; Wolfe, 2006; Kauanui, 2016).
<i>Fonofale Model of Health</i>	Created by Karl Pulotu-Endemann (2001), a Sāmoan Fa'afafine nurse, the Fonofale Model presents a holistic view of Pasifika health initially developed in the context of Aotearoa. The model contains four key elements representing components of a Fale: the falealuga, pou, fa'avae, and the cocoon. These elements represent (1) culture, (2) aspects of well-being, (3) family, and (4) the time, environment, and context, respectively. The Fonofale model emphasizes the importance of each element in building and maintaining Pasifika health, as well as the dynamic and interactive relationship with each other.
<i>Cisheteronormativity</i>	The sociocultural normalization of rigid binary gender roles and procreative heterosexual intimacy between cisgender men and cisgender women. This ideology is rooted in western and Christian ideologies of gender and intimacy and only allows the existence of cisgender men, cisgender women, and heterosexual intimacies (Chevrette & Eguchi, 2020; Yep, 2003).
<i>Cisheteropatriarchy</i>	Privilege of white straight cisgender men's power over women, Queer, Trans, and people of color through the establishment of systemic (through policy and law), structural, and sociocultural homophobia, transphobia, and cisheterosexism (Arvin, 2019; Arvin et al., 2013; TallBear, 2021; Valdes, 1996).

<i>Historical trauma</i>	The cumulative emotional and psychological harm across generations due to a traumatic event or structure, such as settler colonialism, forced relocation, genocide, and the loss of land and culture, among others. Historical trauma theory reframes trauma within a historical and collective context, seeking to redirect power to survivors of historical trauma by reducing stigma and understanding their experiences as part of a larger, shared history and struggle (Walters et al., 2011; Brave Heart et al., 2011; Duran et al., 1998; Alvarez et al., 2020; Johnson-Jennings et al., 2020).
<i>Cultural determinants of health</i>	Components of culture and identity that facilitate an individual's health and well-being. These include cultural practices (e.g., traditional medicine, land-based practices, dance, song, chants, cultural traditions, cultural values, connectedness to culture and spirituality (Walters et al., 2020; Walters & Simoni, 2002; Spencer et al., 2023; Ullrich, 2019).
<i>Culturally grounded health interventions</i>	Health interventions that center and often utilize Indigenous knowledge, cultural practice, protocol, and ceremony to address health outcomes and inequities.
<i>Indigenous connectedness</i>	Individual or collective relationships Indigenous peoples have with family, ancestors, community, environment—their oceans, lands, and skies—and cultural ways of being that contribute to Indigenous holistic well-being (Ullrich, 2019).

Note: This table was made in recommendation of the community advisory committee to make this publication more accessible for QTPI communities by breaking down and defining Pacific Islander cultural and technical terms. This table was originally presented in a previous publication (Camacho et al., 2024) from this project and has had been adapted for this publication.

FIGURE 1. Coconut Tree Mapping Activity. Note: QTPI were asked to imagine the coconut tree as community well-being where (1) the roots represent the root causes of health challenges their community experience, (2) the leaves represent the outcomes, and (3) the trunk represents cultural facilitators for health and well-being.

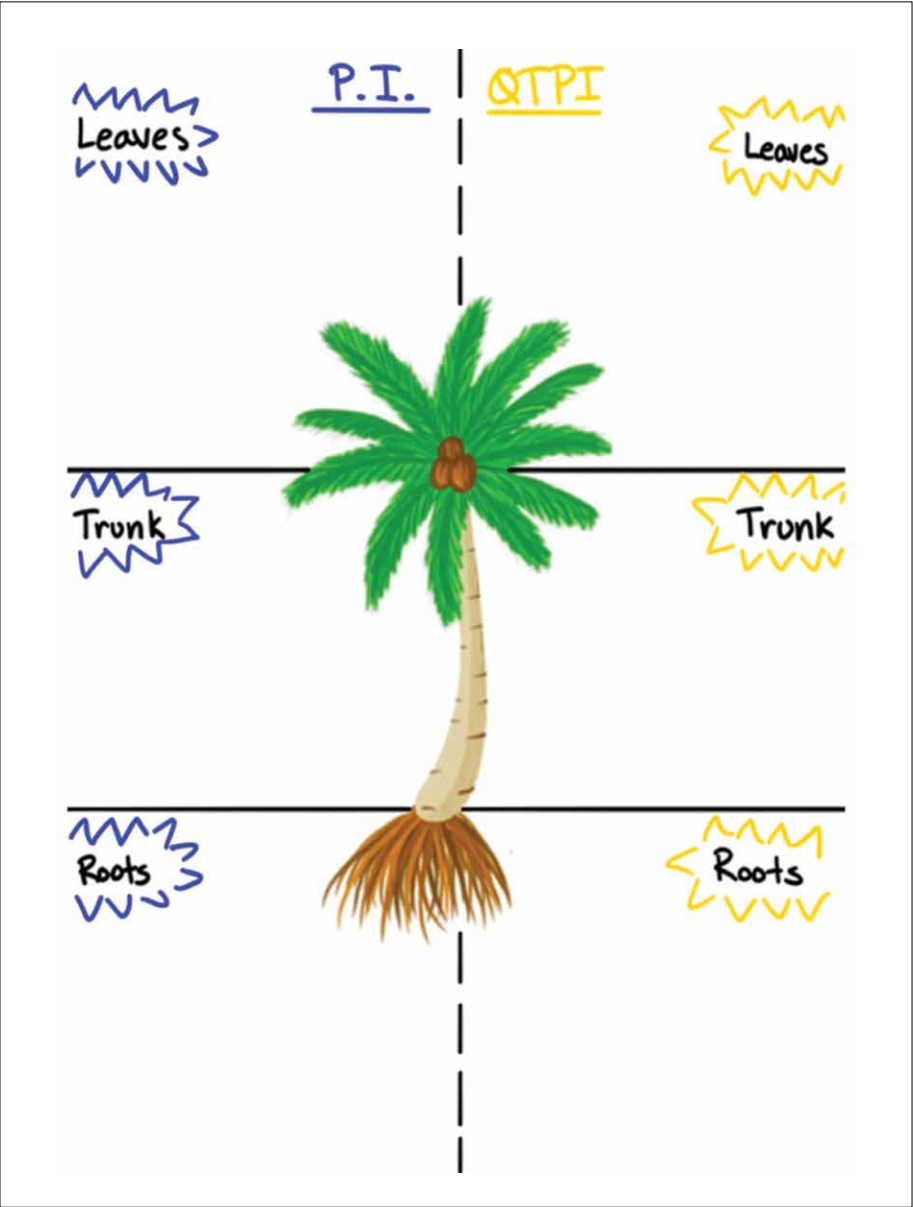
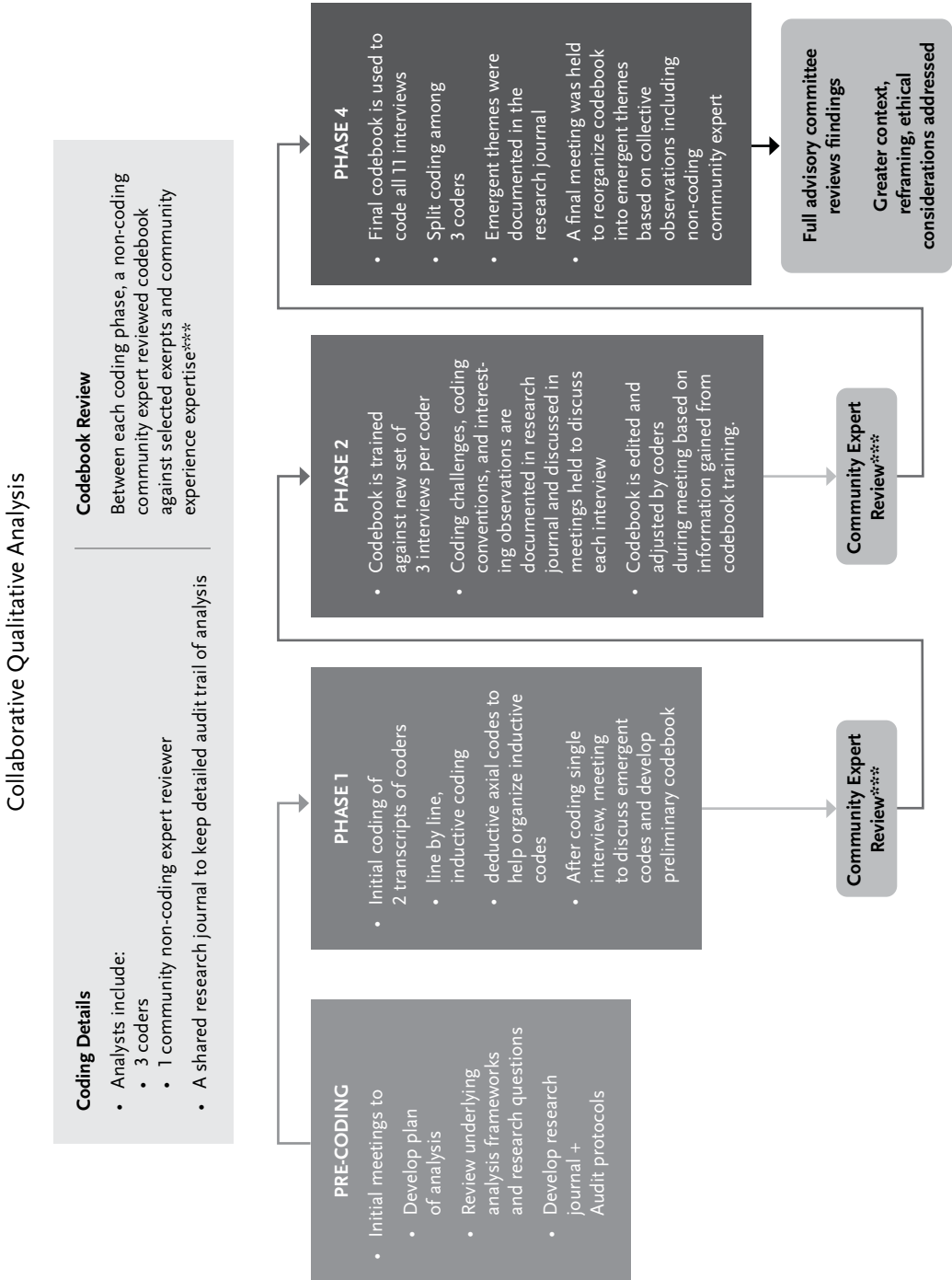


FIGURE 2. Collaborative Qualitative Analysis Guide



REFERENCES

- Alvarez, A. R. G., Kanuha, V. K., Anderson, M. K. L., Kapua, C., & Bifulco, K. (2020). "We were queens." Listening to Kānaka Maoli perspectives on historical and on going losses in Hawai'i. *Genealogy*, 4(4), 116. <https://doi.org/10.3390/genealogy4040116>
- Arvin, M. R. (2019). *Possessing Polynesians: The science of settler colonial whiteness in Hawai'i and Oceania*. Duke University Press.
- Arvin, M. R., Tuck, E., & Morrill, A. (2013). Decolonizing feminism: Challenging connections between settler colonialism and heteropatriarchy. *Feminist Formations*, 25(1), 8–34. <https://www.jstor.org/stable/43860665>
- Bevacqua, M. L. (2019). *Mo'na: Circular concept of history*. Guampedia. <https://www.guampedia.com/mona-circular-concept-of-history/>
- Blaisdell, R. K. (1996). The meaning of health. *Asian American and Pacific Islander Journal of Health*, 4(1–3), 232.
- Brave Heart, M. Y. H., Chase, J., Elkins, J., & Altschul, D. B. (2011). Historical trauma among Indigenous peoples of the Americas: Concepts, research, and clinical considerations. *Journal of Psychoactive Drugs*, 43(4), 282–290. <https://doi.org/10.1080/02791072.2011.628913>
- Camacho, K. L. (2011). Transoceanic flows: Pacific Islander interventions across the American empire. *Amerasia Journal*, 37(3), ix–xxxiv. <https://doi.org/10.17953/amer.37.3.m372lun15r8p420m>
- Camacho, K. L. (2015). Homomilitarism: The same sex erotics of the US empire in Guam and Hawai'i. *Radical History Review*, 2015(123), 144–175. <https://doi.org/10.1215/01636545-3088192>
- Camacho, S. G., Ta, W., Haitsuka, K., Velasco, S., Ablao, R., Fuamatu, B., Kanuha, V. K., & Spencer, M. (2023). *Honoring Inágoſli'e' and Alofa: A zine reporting on an Indigenist collaborative research project to understand the health and cultural experiences of Queer and Transgender Pacific Islanders*. United Territories of Pacific Islanders Alliance of WA and Guma' Gela' Queer Chamoru Art Collective. https://bit.ly/honoring_qtpi_zine
- Camacho, S. G., Ta, W., Haitsuka, K., Velasco, S., Ablao, R., Fuamatu, B., Cruz, E., Kanuha, V. K., & Spencer, M. (2024). Honoring Inágoſli'e' and Alofa: Developing a culturally grounded health promotion model for Queer and Transgender Pacific Islanders. *Genealogy*, 8(2), 74. <https://doi.org/10.3390/genealogy8020074>
- Chevrette, R., & Eguchi, S. (2020). "We don't see LGBTQ differences": Cisheteronormativity and concealing phobias and irrational fears behind rhetorics of acceptance. *QED: A Journal in GLBTQ Worldmaking*, 7(1), 55–59. <https://doi.org/10.14321/qed.7.1.0055>

- Choi, S. K., Wilson, B. D. M., Bouton, L. J. A., & Mallory, C. (2021). *AAPI LGBT adults in the US: LGBT well being at the intersection of race*. Williams Institute, UCLA School of Law. <https://williamsinstitute.law.ucla.edu/publications/lgbt-aapi-adults-in-the-us/>
- Cunningham, L. J. (1992). *Ancient Chamorro society*. Bess Press.
- DeLisle, C. T. (2022). *Placental politics: Chamoru women, white womanhood, and Indigeneity under US colonialism in Guam*. University of North Carolina Press.
- Diaz, T. P., Ka'ōpua, L. S. I., & Nakaoka, S. (2020). Island nation, US territory and contested space: Territorial status as a social determinant of Indigenous health in Guam. *The British Journal of Social Work*, 50(4), 1069–1088. <https://doi.org/10.1093/bjsw/bcz097>
- Diaz, V. M. (2010). *Repositioning the missionary: Rewriting the histories of colonialism, Native Catholicism, and Indigeneity in Guam*. University of Hawai'i Press. <https://doi.org/10.21313/hawaii/9780824834340.001.0001>
- Diaz, V. M. (2011). Tackling Pacific hegemonic formations on the American gridiron. *Amerasia Journal*, 37(3), 90–113. <https://doi.org/10.17953/amer.37.3.81632n5u7p7527tj>
- Duarte, M. E., & Belarde-Lewis, M. (2015). Imagining: Creating spaces for Indigenous ontologies. *Cataloging & Classification Quarterly*, 53(5–6), 677–702. <https://doi.org/10.1080/01639374.2015.1018396>
- Duran, E., Duran, B., Brave Heart, M. Y. H., & Yellow Horse Davis, S. (1998). Healing the American Indian soul wound. In Y. Danieli (Ed.), *International handbook of multigenerational legacies of trauma* (pp. 341–354). Springer.
- Evans-Campbell, T. (2008). Historical trauma in American Indian/ Native Alaska communities: A multilevel framework for exploring impacts on individuals, families, and communities. *Journal of Interpersonal Violence*, 23(3), 316–338. <https://doi.org/10.1177/0886260507312290>
- Fieland, K. C., Walters, K. L., & Simoni, J. M. (2007). Determinants of health among Two Spirit American Indians and Alaska Natives. In I. H. Meyer & M. E. Northridge (Eds.), *The health of sexual minorities* (pp. 268–300). Springer.
- Fraser, G., Brady, A., & Wilson, M. S. (2021). “What if I’m not trans enough? What if I’m not man enough?”: Transgender young adults’ experiences of gender affirming healthcare readiness assessments in Aotearoa New Zealand. *International Journal of Transgender Health*, 22(4), 454–467. <https://doi.org/10.1080/26895269.2021.1933669>
- Goodyear Ka'ōpua, N. (2014). Domesticating Hawaiians: Kamehameha Schools and the “tender violence” of marriage. In B. J. Child & B. Klopotek (Eds.), *Indian subjects: Hemispheric perspectives on the history of Indigenous education* (pp. 16–47). SAR Press.
- Guam Legislature Media. (2017, December 5). *34th Guam Legislature regular morning session – December 5, 2017* [Video]. YouTube, https://www.youtube.com/watch?v=MpfE3_7cf50

- Harner, V., Moore, M., Casillas, B., Chrivoli, J., Lopez Olivares, A., & Harrop, E. (2024). Transgender patient preferences when discussing gender in health care settings. *JAMA Network Open*, 7(2), e2356604. <https://doi.org/10.1001/jamanetworkopen.2023.56604>
- Hattori, A. P. (2004). *Colonial dis-ease: US Navy health policies and the Chamorros of Guam, 1898–1941*. University of Hawai‘i Press.
- Jespersion, J. (2022). Settler transnationalism: The colonial politics of white trans passing on stolen land. *Spectator: The University of Southern California Journal of Film & Television*, 42(1), 32–43.
- Johnson-Jennings, M., Billiot, S., & Walters, K. L. (2020). Returning to our roots: Tribal health and wellness through land based healing. *Genealogy*, 4(3), 91. <https://doi.org/10.3390/genealogy4030091>
- Kahikina, K. (2024). No ka mähūi aloha: Unsettling homo/hetero nationalist logics of belonging. *American Quarterly*, 76(3), 515–540. <https://doi.org/10.1353/aq.2024.a937116>
- Kauanui, J. K. (2016). “A structure, not an event”: Settler colonialism and enduring Indigeneity. *Lateral*, 5(1). <https://doi.org/10.25158/L5.1.7>
- Kihara, Y. (2022). *Paradise Camp* (N. King, Ed.). Creative New Zealand/Toi Aotearoa.
- McConnell, E. A., Birkett, M., & Mustanski, B. (2016). Families matter: Social support and mental health trajectories among lesbian, gay, bisexual, and transgender youth. *Journal of Adolescent Health*, 59(6), 674–680. <https://doi.org/10.1016/j.jadohealth.2016.07.026>
- McDonald, K. (2018). Social support and mental health in LGBTQ adolescents: A review of the literature. *Issues in Mental Health Nursing*, 39(1), 16–29. <https://doi.org/10.1080/01612840.2017.1398283>
- McGrath, B. B., & Ka‘ili, T. O. (2010). Creating Project Talanoa: A culturally based community health program for US Pacific Islander adolescents. *Public Health Nursing*, 27(1), 17–24. <https://doi.org/10.1111/j.1525-1446.2009.00822.x>
- McMullin, D. T., & Kihara, Y. (2018). *Samoan queer lives*. Little Island Press.
- Million, D. (2011). Intense dreaming: Theories, narratives, and our search for home. *American Indian Quarterly*, 35(3), 313–333. <https://doi.org/10.1353/aiq.2011.a447049>
- Million, D. (2020). Resurgent kinships: Indigenous relations of well being vs. humanitarian health economies. In B. Hokowhitu, A. Moreton Robinson, L. T. Smith, C. Andersen, & S. Larkin (Eds.), *Routledge handbook of critical Indigenous studies* (pp. 392–404). Routledge.

- Morey, B. N., Chang, R. C., Thomas, K. B., Tulua, 'A., Penaia, C., Tran, V. D., Pierson, N., Greer, J. C., Bydalek, M., & Ponce, N. (2022). No equity without data equity: Data reporting gaps for Native Hawaiians and Pacific Islanders as structural racism. *Journal of Health Politics, Policy and Law*, 47(2), 159–200. <https://doi.org/10.1215/03616878-9517177>
- Morgensen, S. L. (2010). Settler homonationalism: Theorizing settler colonialism within queer modernities. *GLQ: A Journal of Lesbian and Gay Studies*, 16(1–2), 105–131. <https://doi.org/10.1215/10642684-2009-015>
- Naputi, F. M. S. N. (2019). *Decolonizing sexuality: Chamoru epistemology as liberatory praxis* [Doctoral dissertation, University of Hawai'i at Mānoa]. ScholarSpace. <http://hdl.handle.net/10125/66223>
- Na'puti, T. R., & Bevacqua, M. L. (2015). Militarization and resistance from Guåhan: Protecting and defending Pāgat. *American Quarterly*, 67(3), 837–858. <https://doi.org/10.1353/aq.2015.0040>
- Natividad, L. (2012). Indigeneity on Guåhan: Skin color as a measure of decolonization. In R. E. Hall (Ed.), *The melanin millennium: Skin color as 21st century international discourse* (pp. 97–104). Springer.
- Oliphant, J., Veale, J., Macdonald, J., Carroll, R., Johnson, R., Harte, M., Stephenson, C., & Bullock, J. (2018). *Guidelines for gender affirming healthcare for gender diverse and transgender children, young people and adults in Aotearoa New Zealand*. Transgender Health Research Lab, University of Waikato.
- Osorio, J. H. (2020). Gathering stories of belonging: Honouring the mo'olelo and ancestors that refuse to forget us. *Australian Feminist Studies*, 35(106), 336–350. <https://doi.org/10.1080/08164649.2020.1907531>
- Osorio, J. H. (2021). *Remembering our intimacies: Mo'olelo, aloha 'āina, and ea*. University of Minnesota Press.
- Paglinawan, L. K., Paglinawan, R. L., Kauahi, D., & Kanuha, V. K. (2020). *Nānā i ke kumu: Helu 'ekolu*. Lili'uokalani Trust.
- Perez-Iyechad, L. (2018, June 27). *Inafa'maolek: Striving for harmony*. Guampedia. <https://www.guampedia.com/inafamaolek/>
- Pihama, L., Green, A., Mika, C., Roskrudge, M., Simmonds, S., Nopera, T., Skipper, H., & Laurence, R. (2020). *Honour Project Aotearoa*. Te Kotahi Research Institute & Te Whāriki Takapou. <https://kaupapamaori.com/rangahau/honour-project-aotearoa/>
- Pihama, L., Smith, L. T., Evans Campbell, T., Kohu Morgan, H., Cameron, N., Mataki, T., Te Nana, R., Skipper, H., & Southey, K. (2017). Investigating Māori approaches to trauma informed care. *Journal of Indigenous Wellbeing*, 2(3), 18–31. https://journalindigenousewellbeing.co.nz/journal_articles/investigating-maori-approaches-to-trauma-informed-care/

- Pihama, L., Te Nana, R., Cameron, N., Smith, C., Reid, J., & Southey, K. (2016). Māori cultural definitions of sexual violence. *Sexual Abuse in Australia and New Zealand*, 7(1), 43–51. Research Commons. <https://hdl.handle.net/10289/12338>
- Price, M., Green, A., DeChants, J., & David, C. (2021). *The mental health and well being of Asian American and Pacific Islander (AAPI) LGBTQ youth*. The Trevor Project. <https://www.thetrevorproject.org/wp-content/uploads/2022/04/AAPI-LGBTQ-Youth-Mental-Health-Report.pdf>
- Puar, J. K. (2015). Homonationalism as assemblage: Viral travels, affective sexualities. *Revista Lusófona de Estudos Culturais*, 3(1), 319–337.
- Pulotu-Endemann, F. K. (2001). *Fonofale model of health*. <https://d3n8a8pro7vhmx.cloudfront.net/actionpoint/pages/437/attachments/original/1534408956/Fonofalemodelerplanation.pdf>
- Richards, K. A. R., & Hemphill, M. A. (2018). A practical guide to collaborative qualitative data analysis. *Journal of Teaching in Physical Education*, 37(2), 225–231. <https://doi.org/10.1123/jtpe.2017-0084>
- Schultz, K., Walters, K. L., Beltran, R., Stroud, S., & Johnson Jennings, M. (2016). “I’m stronger than I thought”: Native women reconnecting to body, health, and place. *Health & Place*, 40, 21–28. <https://doi.org/10.1016/j.healthplace.2016.05.001>
- Souder-Jaffery, L. M. T. (1992). *Daughters of the Island: Contemporary Chamorro women organizers on Guam* (2nd ed.). University Press of America.
- Spencer, M. S., Camacho, S. G., Woo, B., Orellana, R. E. R., & Ramirez, J. I. (2023). Closing the health gap: Addressing racism, settler colonialism, and white supremacy. In M. L. Teasley, M. S. Spencer, & M. Bartholomew (Eds.), *Social work and grand challenge to eliminate racism: Concepts, theory, and evidence based approaches* (pp. 200–234). Oxford University Press.
- Stroumsa, D., Maksutova, M., Minadeo, L. A., Indig, G., Neis, R., Ballard, J. Y., Popoff, E. E., Trammell, R., & Wu, J. P. (2024). Required mental health evaluation before initiating gender affirming hormones: Trans and nonbinary perspectives. *Transgender Health*, 9(1), 34–45. <https://doi.org/10.1089/trgh.2022.0024>
- TallBear, K. (2021, March 1). Love in the promiscuous style. *Unsettle* [Substack newsletter]. <https://kimtallbear.substack.com/p/love-in-the-promiscuous-style>.
- Tapu, I. F. (2020). Is it really paradise? LGBTQ rights in the US territories. *Dukeminier Awards Journal of Sexual Orientation & Gender Identity Law*, 19, 273.
- Tecun, A., Hafoka, ‘I., ‘Ulu’ave, L., & ‘Ulu’ave Hafoka, M. (2018). Talanoa: Tongan epistemology and Indigenous research method. *AlterNative: An International Journal of Indigenous Peoples*, 14(2), 156–163. <https://doi.org/10.1177/1177180118767436>
- Teves, S. N. (2018). *Defiant Indigeneity: The politics of Hawaiian performance*. University of North Carolina Press.

- The QTPI Village. (2025, January). *Brown Paper: Equity, inclusion, justice, and belonging for Queer and Trans Pacific Islanders (QTPI)* [White paper]. <https://www.flipsnack.com/utopiawa/brown-paper-195gji9xu3/full-view.html>
- Tisnado, D. M., Sablan Santos, L., Guevara, L., Quitugua, L., Castro, K., Aromin, J., Quenga, J., & Tran, J. (2010). A case study in Chamorro community and academic engagement for a community partnered research approach. *Californian Journal of Health Promotion*, 8(SE), 39–51.
- Tuck, E., & Yang, K. W. (2012). Decolonization is not a metaphor. *Decolonization: Indigeneity, Education & Society*, 1(1), 1–40.
- Ullrich, J. S. (2019). For the love of our children: An Indigenous connectedness framework. *AlterNative: An International Journal of Indigenous Peoples*, 15(2), 121–130. <https://doi.org/10.1177/1177180119828114>
- Valdes, F. (1996). Unpacking hetero patriarchy: Tracing the conflation of sex, gender, & sexual orientation to its origins. *Yale Journal of Law & the Humanities*, 8(1), 161–211. <https://openyls.law.yale.edu/handle/20.500.13051/7687>
- Velasco, S. (2020). *Guaiya yan puspup, love and sex: A zine on love & sex for Chamoru Queer, Lesbian, Gay, Bisexual, Pansexual, Asexual, Intersex, Trans, Non Binary, Gender Non Conforming, Genderqueer, Butch, Femme, Gela', Palaoana, Maamflorita, and Questioning people*. Guma' Gela' Queer and Trans Chamoru Art Collective. https://issuu.com/gumagela/docs/ggzinecombined_final__8e481cc2b0ecc1
- Veracini, L. (2011). Introducing: Settler Colonial Studies. *Settler Colonial Studies*, 1(1), 1–12. <https://doi.org/10.1080/2201473X.2011.10648799>
- Vipond, E. (2015). Resisting transnormativity: Challenging the medicalization and regulation of trans bodies. *Theory in Action*, 8(2), 21–44.
- Walters, K. L., Johnson Jennings, M., Stroud, S., Rasmus, S., Charles, B., John, S., Allen, J., et al. (2020). Growing from our roots: Strategies for developing culturally grounded health promotion interventions in American Indian, Alaska Native, and Native Hawaiian communities. *Prevention Science*, 21(1), 54–64. <https://doi.org/10.1007/s11121-018-0952-z>
- Walters, K. L., Mohammed, S. A., Evans Campbell, T., Beltrán, R. E., Chae, D. H., & Duran, B. (2011). Bodies don't just tell stories, they tell histories: Embodiment of historical trauma among American Indians and Alaska Natives. *Du Bois Review: Social Science Research on Race*, 8(1), 179–189. <https://doi.org/10.1017/S1742058X1100018X>
- Walters, K. L., & Simoni, J. M. (2002). Reconceptualizing Native women's health: An "Indigenist" stress coping model. *American Journal of Public Health*, 92(4), 520–524. <https://doi.org/10.2105/ajph.92.4.520>

- Walters, K. L., Stately, A., Evans Campbell, T., Simoni, J. M., Duran, B., Schultz, K., Stanley, E., Charles, C., & Guerrero, D. (2009). "Indigenist" collaborative research efforts in Native American communities. In A. R. Stiffman (Ed.), *The field research survival guide* (pp. 146–173). Oxford University Press.
- Wolfe, P. (2006). Settler colonialism and the elimination of the native. *Journal of Genocide Research*, 8(4), 387–409. <https://doi.org/10.1080/14623520601056240>
- Wong-Kalu, H., Hamer, D., & Wilson, J. (Producers). (2014). *Kumu Hina* [Film]. Passion River Films.
- Yep, G. A. (2003). The violence of heteronormativity in communication studies. *Journal of Homosexuality*, 45(2–4), 11–59. https://doi.org/10.1300/J082v45n02_02
- Young, K. (2015). From a Native Trans daughter: Carceral refusal, settler colonialism, re routing the roots of an Indigenous abolitionist imaginary. In E. A. Stanley & N. Smith (Eds.), *Captive genders: Trans embodiment and the prison industrial complex* (Expanded 2nd ed., pp. 83–96). AK Press.
- Young, K. (2019). Home free and nothing (...) -less: A queer cosmology of aloha 'āina. *Hūlili: Multidisciplinary Research on Hawaiian Well Being*, 11(1), 9–21. https://kamehamehapublishing.org/wp-content/uploads/sites/38/2020/09/Hulili_Vol11_1.pdf

ABOUT THE AUTHORS

Santino G. Camacho, PhC, MPH, (Tino; he/they) is a Gela' Chamoru social work scholar and multimedia artist from the island of Guåhan. Tino is a community-embedded scholar who collaborates closely with his communities in Duwamish lands in Washington—Guma' Gela' Queer and Trans Chamoru Art Collective, the United Territories of Pacific Islanders Alliance of Washington, and the QTPI Village—to conduct research that promotes Queer and Transgender Pacific Islander health and well-being. Tino also serves as a co-investigator at the Ola Pasifika



Research Lab at the University of Washington School of Social Work. This Pasifika research group seeks to advance health justice for Pasifika communities through participatory research. His research aims to empower QPTI's culturally resurgent

practices that resist settler colonial constructions of Indigeneity and illuminate their use within community-based and culturally-grounded healing and health promotion practices.



Wilson Ta (they/he) is the child of Nung/Ngai, Chinese, and Vietnamese refugees, currently residing in South Seattle on Duwamish and Coast Salish land. He seeks to engage with strengths-based and liberatory research methodology to redirect power to QTBIPOC communities, collectively build coalitions, dismantle oppressive systems, and radically address health and wellness.

Myra Parker JD, MPH, PhD, is an enrolled member of the Mandan and Hidatsa tribes and serves as an associate professor in the Center for the Study of Health and Risk Behavior in the University of Washington School of Medicine's Department of Psychiatry. She is also the director for Seven Directions, a tribal public health institute she leads that provides training and technical assistance to tribal and urban Indian public health programs and practitioners. She has worked for fifteen years on tribal public health program implementation, coordination, and research with tribal communities across the US. Prior to her work in research, she worked for five years in the policy arena within Arizona state government, in tribal governments, and with tribal working groups at the state and national level. Her research experience in public health involves Community-Based Participatory Research (CBPR), the development and testing of cultural adaptations of evidence-based interventions in American Indian communities, and Indigenous research ethics principles.





Sāhi Velsaco (they/them) is a queer, non-binary, Indigenous Chamoru parent, mixed-media artist, organizer, and facilitator. Their artist practice weaves Indigenous Chamoru storytelling through illustration, poetry, collage, dance, song, and film. They are a co-founding member of Trans Women of Color Solidarity Network, flower flower, and Guma' Gela.'

Falefia Jr. Brandon Fuamatu or Brandon/Brandy (pronoun friendly) is an Indigenous masc-presenting Samoan Fa'afafine and community organizer with a classical arts and vocal training background. Brandon uses their arts background to inform and influence their community and cultural organizing while also challenging the ways in which the arts and community-based organizing are "allowed" to intersect and relate. They currently serve as the development director for the United Territories of Pacific Islanders Alliance of Washington.



Marie Antoinette Perez, MPH, is a Chamoru-Palauan public health practitioner. Marie's love for her Pacific Islander heritage and her passion for health advocacy motivated her to pursue her master's in public health at the University of Washington with a focus on health policy. She hopes to further contribute her skills and knowledge to existing and future policy work that address the systemic issues that lead to health inequity.



Roldy Agüero Ablao (he/they) is a mixed queer artist/cultural practitioner from the island of Guåhan, and a co-founder of the Guma' Gela' Queer and Trans Chamoru Art Collective. They are inspired by heritage and legacy, working in photography, sculpture, and adornment to explore embodiment as an avenue for expression and body sovereignty.

Tressa P. Diaz (she/her), PhD, MSW, is an associate professor at the Division of Social Work at the University of Guam (UOG) and a co-lead for the Community Outreach Core at the UOG Cancer Research Center. She is committed to health as a human right, exploring intergenerational narratives, Indigenous health, and cancer survivorship in Micronesia.



Michael S. Spencer (Kanakanā Maoli) is a professor and the Ballmer Endowed Dean at the University of Washington (UW) School of Social Work. He is also the director of Native Hawaiian, Pacific Islander, and Oceania Affairs at the UW Indigenous Wellness Research Institute (IWRI). He received his PhD from the University of Washington in social welfare ('96), his MSSW from the University of Texas at Austin, and his BA in psychology from the University of Hawai'i at Mānoa and is a graduate of the Kamehameha Schools ('83).

His research examines health equity and wellness for populations of color through culturally grounded, community-based, participatory research methods. He is currently focused on interventions that promote health among Native Hawaiians and Pacific Islanders through Indigenous practices and values. He has authored or co-authored over 100 peer-reviewed articles and edited books contributing to the literature in social work, public health, medicine, and the social sciences. Dr. Spencer has taught courses in research methods, diversity and social justice, and community practice. He is a Fellow of the Academy of Social Work and Social Welfare, and the Society for Social Work and Research.

NOTES

- 1 We used the term *intimacies* in place of “sexuality” because it was more culturally aligned with Pasifika understandings of how we practice relationships with one another. Our intake form nested these QTPI practices under sexuality in our original study.
- 2 In this section, QTPI refers to the QTPI community members who were interviewed for this study and not the QTPI population at large.