



# Healing through culture: Kava-talanoa as a PTSD therapeutic framework

Dr S. 'Apo' Aporosa & Associate Professor Sione Vaka

Te Huataki Waiora Division of Health

The University of Waikato, Aotearoa New Zealand



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## Introduction

Rates of Post-Traumatic Stress Disorder (PTSD) are increasing globally. Current treatments have significant limitations, creating an urgent need for alternative approaches, including those tailored to non-Western ethnicities. This poster summarises eight years of research suggesting that *faikava* (traditional kava-use spaces) combined with *talanoa* (a culturally embedded form of 'talk therapy') provides a unique, organic, culturally informed environment that reduces trauma symptoms by decreasing fear responses, minimising avoidance behaviours, and improving sleep. This work informs clinical trials.

**PTSD** is increasing, particularly among military personnel, first responders (police, fire, ambulance), and prison officers. It imposes a significant health and economic burden through treatment costs, long-term morbidity, increased mortality risk, and impacts on careers, education, family, and social relationships. Many cases go undiagnosed, often due to trauma-related avoidance, which also hinders treatment engagement.

PTSD is "difficult to treat". Cognitive Behavioural Therapy (CBT) shows moderate efficacy in some populations. Pharmacological treatments including benzodiazepines, tricyclic antidepressants and antipsychotics may offer short-term relief but carry significant drawbacks; addiction risk, contraindications and poor outcomes in indigenous communities with an overall efficacy (42%) lower than CBT.

**Kava** is not simply a drug; it encompasses the *Piper methysticum* plant, the beverage made from its roots and basal stump, and the cultural knowledge and practices that nurture *vā* (relational connection).

Kava plant: three years of age



(Source: Aporosa, 2009)

**Traditionally informed kava** is prepared by steeping the crushed roots in water, producing a beverage that is culturally significant to many Pacific peoples.

Kava being prepared for consumption



(Source: Todd M. Henry, 2019)

These gatherings – *faikava* – are grounded in cultural protocols inclusive of seating, the use of specific utensils, and guided by respect-based values. *Faikava* sessions average six hours, with attendees each typically consuming 3.6 litres of kava (over 5,000 mg kavalactones). Even at these high use volumes, kava does not induce marked euphoria or hallucinations, supporting calm reflective dialogue – *talanoa*, a form of 'talk therapy'. Traditional kava is not associated with hepatotoxicity and considered extremely safe, regulated as 'food' in several countries.

Faikava: Yawe, Kadavu, Fiji, and a mixed ethnicity group in Tāmaki Makaurau Auckland, Aotearoa New Zealand



(Source: Todd M. Henry, 2019)

**Kava psychopharmacology** knowledge mostly results from studies utilising a pharmaceutically manufactured extract or tablet-dose (typically <300 mg selected kavalactones/day) which differs significantly from traditionally used kava. Despite this, results from such studies are inappropriately generalised to traditional kava use. Those studies show:

- Kavalactones (20 identified):
  - Block calcium ion channels, reducing neurotransmitter excitation
  - Potentiate GABA<sub>A</sub> activity by enhancing ligand binding
  - Inhibit reuptake of noradrenaline (and possibly dopamine)
  - Reverse MAO-B inhibition
- Kava produces calming, anxiolytic, and soporific (sleep aiding) effects similar to benzodiazepines
- Unlike benzodiazepines, kava is non-addictive and does not impair sexual function.

## PTSD, Kava Psychopharmacology and Faikava

Here, we describe the development of a novel traditionally grounded approach to PTSD symptomatology reduction. This approach has two elements: *kava* as a culturally significant Pacific drink used in *faikava* as a relaxant to promote *talanoa* to aid quality sleep and manage anxiety. We **hypothesise** that combined kava-*talanoa* will outperform current standards of care in PTSD symptom management as a culturally augmented cognitive-behavioural group therapy intervention.

## Methodology/Methods

This pilot study\* was guided by the *faikava talanoa* methodology. Self-report experiences of Pacific-based UK and US military veterans and serving combat returnees (*n*=40) were documented in *faikava* spaces in which attendees engaged in *talanoa*. While exact kava consumption volumes were not measured, most participants each consumed typical use volumes (3.6 litres/6 hours). Focused coding was utilised to analyse participant comments.

## Discussion

In discussions about their deployments, combat experiences, readjustment to their environment on return and PTSD, informants subjectively reported:

- Reduced rates of PTSD symptomology when compared to British/US peers which they attributed to engagement in *faikava* with *talanoa*,
- Combining *talanoa* and kava allowed them to relax while unpacking their combat experiences,
- Kava was also described as improving quality sleep, with an informant commenting on the "important role kava played in allowing him to sleep without being startled awake",
- Kava-*talanoa* as a gateway to *vā* (connecting relationally with others) who had experienced similar stressful situations and "talk about the loss of close friends in a manner that felt peaceful",
- Contrasts between their experience and those of alcohol drinking peers, for whom alcohol heightened emotions and appeared counterproductive when discussing traumatic events.

In an alternative *faikava* setting, Aporosa (a former soldier and policeman medically discharged with PTSD) and Detective Sergeant Sanday piloted the use of kava-*talanoa* as a therapeutic intervention during a Criminal Investigation Branch (CIB) detectives course. For the mostly European, mixed-gender group, it was their first time sitting on woven mats, drinking kava, and engaging in culturally informed *talanoa*. Participant feedback highlighted the value of the experience, describing it as "something I didn't know I needed at a time I was struggling" and a chance for safe, meaningful dialogue.

Literature, case studies and self-reports\* showed kava with *talanoa* appears to help PTSD sufferers engage with, rather than avoid, traumatic memories. Avoidance is a major barrier to effective therapy, although kava's anxiolytic properties appear to reduce the triggering of dysfunctional "fear structures" during processing. Additionally, kava's long-lasting calming effects appear to improve sleep quality, a protective factor associated with reduced PTSD symptoms.

## Conclusion

Kava is a culturally significant Pacific beverage traditionally used to promote relaxation, dialog, sleep, and reduce anxiety, with effects likely linked to kavalactones, which are putative low potency  $\gamma$ -aminobutyric acid (GABA) ligands. *Talanoa*, a common Pacific dialog practice and recognised form of 'talk therapy', complements this by fostering open group discussion. Our core hypothesis is that kava-*talanoa*, as a culturally grounded group therapy may outperform current PTSD treatments. Evidence supporting that hypothesis\* highlighted both pharmacological and behavioural benefits. Kava-*talanoa* also holds promise for broader application, demonstrating how Pacific indigenous knowledge can offer globally relevant solutions. A *Health Research Council of New Zealand Pacific Projects Award* supports clinical trials we believe will validate the self-report experiences.



\* Aporosa, S.A., Itoga, D., Ioane, K., Prosser, J., Vaka, S., Grout, E., Atkins, M.J., Head, M.A., Baker, J.D., Blue, T., Sanday, D.H., Owen, M.W., Murray, C., Sivanathan, K., Cuthers, T.W., Mesui-Henry, A., McCarthy, M.J., Bunn, J., Waqainabete, I., & Turner, H. (2025). *Innovating through tradition: Kava-talanoa as a culturally aligned medico-behavioural therapeutic approach to amelioration of PTSD symptoms*. *Frontiers in Psychology*, 16, 1460731. doi: 10.3389/fpsyg.2025.1460731

