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Cover image: Tiale Mele Panapa feeds the fish at her grandfather's fishpond on Vaitupu, Tuvalu. Photograph by Keith Chambers, 2010.

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CONTENTS

*Notes and News* ..... 5

*Articles*

TUFOUA PANAPA, JULIE PARK, JUDITH LITTLETON,  
ANNE CHAMBERS and KEITH CHAMBERS  
*Towards Indigenous Policy and Practice:  
A Tuvaluan Framework for Wellbeing, Ola Lei* ..... 7

THOMAS S. DYE  
*A Case for Handy and Puku'i's Ethnographic Reconstruction  
of the Polynesian Family System in Hawai'i* ..... 45

ALLAN HANSON  
*Making Medicine Cultural in Rapa* ..... 69

*Reviews*

Chitham, Karl, Kolokesa U. Māhina-Tuai and Damian Skinner:  
*Crafting Aotearoa: A Cultural History of Making in New Zealand  
and the Wider Moana Oceania.* BILLIE LYTHBERG ..... 91

*Publications Received* ..... 94

*Notice of Meeting: The AGM of The Polynesian Society (Inc.)* ..... 95



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## NOTES AND NEWS

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# TOWARDS INDIGENOUS POLICY AND PRACTICE: A TUVALUAN FRAMEWORK FOR WELLBEING, OLA LEI

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**ABSTRACT:** Ola Lei ‘wellbeing’ is an ethnographically derived framework that builds upon Tuvaluan cultural concepts and practices. It has value as a conceptual model by which to assess and build health, education and development initiatives. Te feke ‘the octopus’ represents what Tuvaluans think and do about wellbeing, based on ethnographic research by the first author. Like the octopus, this framework is dynamic and adaptable, illustrating how wellbeing intertwines with social, cultural, economic and spiritual life, with education, with land and ocean. After describing the components of Ola Lei and how they were derived from participant observation and interviews, we suggest applications in policy and practice. The Ola Lei Framework articulated here provides an example of scholars taking indigenous concepts seriously as theory.

*Keywords:* health, wellbeing, indigenous frameworks, Ola Lei Framework, Pacific, Tuvalu

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Everyone aspires to a good life. “But what makes for a good life?” (OECD 2017). And how do nations, organisations and institutions develop models of health and wellbeing that align to their people’s ideas, values and practices? These key questions occupied Tufoua during his doctoral ethnographic research with Tuvaluans in Funafuti and Vaitupu, Tuvalu, and in New Zealand, from 2010 to 2014. (See Appendix for a description of our team’s research process.) His first step was to define health, but this was no easy question, as the following discussion shows.<sup>1</sup>



*Tufoua*: You may know that this Tuvaluan word, *ola lei*, is now used by us as a Tuvaluan word for this English word, health, right? What is your understanding about this word, *ola lei*? What is *ola lei* to you?

*Interviewee*: *Ola lei*? You mean *ola lei*? [looks stonily at the ceiling]

*Tufoua*: Yes! *Ola lei*.

*Interviewee*: Oh! Oh [pause]. Oh [silent for eight to ten seconds]. *Ola lei*, huh?

*Tufoua*: Yes.

*Interviewee*: You mean which *ola lei*? *Ola lei* in terms of having good life or *ola lei* in terms of the Department of Health?

*Tufoua*: Any.

*Interviewee*: Uhhmm [pause]. *Ola lei*, huh? Oh [pause]. Oh [pause]. It is hard, aye? I don't know [pause]. I could not express it in words.

*Tufoua*: Why not?

*Interviewee*: I don't know [pause]. Probably because *ola lei* is a very big word, aye? *Ola lei* has so many tentacles [pause]. Like the tentacles of an octopus [*te feke*] [laughs].

In Tuvalu, the term *ola lei* usually encompasses both the Department of Health's concept of 'health' and the local concept of 'good life', 'wellbeing' or (in the verb form) 'living well'. We also use *ola lei* to include both meanings. This interviewee's use of *te feke* 'the octopus' to illustrate the complexity of *ola lei* became the basis for the visual model we later developed as the *Ola Lei Framework* (Fig. 1), which incorporates these indigenous concepts and is the synthesis of our research.<sup>2</sup>

#### PACIFIC CONCEPTS OF WELLBEING

Pacific concepts of wellbeing have continued to attract research attention in the 36 years since *Healing Practices in the South Pacific* (Parsons 1985a) was published and are increasingly seen as essential for effective planning and service delivery. Though specific emphases and ideas regarding health and wellbeing differ among Pacific societies, commonalities are also apparent. Some of these include an emphasis on the importance of harmonious relations with the living, the spirit world and the environment; the centrality of the collectivity; the relevance of Christianity and spirituality more generally; and physical-mental-social dimensions (Anae *et al.* 2002; Capstick *et al.* 2009; Durie 1994; Fountain and Troughton 2019; Kupa 2009; Laing and Mitaera 1994; Macpherson and Macpherson 1990; McGrath 2003; Mila-Schaaf 2009; Taniela *et al.* 2012). In sum, as noted by Sanga and Reynolds (2020: 262) in their recent review of indigenous Pacific research, "Pacific

theoretical frameworks generally assert a holistic view of the world. As a consequence, many areas of life such as leadership, research, health, and education may all be navigated through a common framework.” Only some qualities of these indigenous approaches are congruent with the dominant western medical orientation to health, however.

As a result, research has shown indigenous wellness concepts to be useful in a range of applied contexts. For example, Anae and colleagues (2010: 5), focusing on facilitating the educational success of Pasifika ‘a term used in New Zealand for people of Pacific Islands, especially Polynesian, heritage’ students in New Zealand, captured the importance of caring for relatedness in the phrase “*teu le va*”. Attention to the *teu* ‘nurturing’ of the *va* ‘space between’ sustains optimal relationships among people and all beings, as Mila-Schaaf and Hudson (2009) argued when discussing culturally appropriate approaches to Pasifika mental health. Getting along together, working together and maintaining social and spiritual harmony are also seen as essential in Tuvalu.

Similar values, and the practices supporting them, are widely shared across the Pacific as well. In Sāmoa, for example, scholars have repeatedly referenced the importance of equilibrium between people, and people and *aitu* ‘spirits’, for health and wellbeing (e.g., Macpherson 1985: 13; Macpherson and Macpherson 1990: 151). Drozdow-St Christian (2002) documented some of the ways in which this was achieved in Sāmoa. Among Sāmoan people in New Zealand, the importance of *va fealoa’i* ‘reciprocal and harmonious relationships’ within families to produce good people was also noted in a study carried out in the late 1990s (Anae et al. 2000: 62). In Tonga, as Parsons (1985b: 90) explains, harmony in communities and between people both living and dead is what maintains wellbeing. Many additional comparisons could be adduced. In all these approaches, conceptual and practical dimensions of life, as well as individual and group dimensions, are seen as conjoined.

In addition, as Sanga and Reynolds (2020) noted, metaphor is frequently used to articulate the interconnections. Just as Tufoua found in Tuvalu, the image of the octopus seems to be especially resonant with Pacific understandings of health and wellbeing. For example, Pere (1988) used the image of the octopus, *te wheke*, in her description of Māori health, with the head of the octopus representing the family unit and the tentacles various dimensions of health. Her model expanded on the more familiar *te whare tapa whā* ‘four cornerstones of Māori health’ offered by Mason Durie (1994: 77), who helpfully compared *te whare* and *te wheke* models and one other Māori metaphor, *ngā pou mana* ‘four supports’, in his influential book, *Whaiora*. All three Māori models of health see balance in various dimensions of health and harmonious relationships among people, the spiritual realm

and the environment as key to wellbeing. Like them, the Tuvalu model of *te feke* presents the various aspects of wellbeing as intertwined and recognises the key roles played by spirituality, relatedness, vitality and cultural knowledge and practices. There are two major differences between the *feke* and *wheke* models, however. One is that the *feke* metaphor grew out of specific ethnographic research; the second is that it identifies both values and the practical guidelines which together provide support for those values.

The *Ola Lei* Framework described here contributes an additional research-based Pacific model of wellbeing and specifies the activities that are seen as enabling it. As will become apparent below, the Tuvaluan view of health intertwines relational, economic, physical and spiritual dimensions of life, offering both explanatory utility and practical guidelines for living well. This relational Tuvaluan approach to wellbeing is an example of local theory (Connell 2007: 207), grounded in ethnographic fieldwork and presented through a visual metaphor resonant with local meaning.

Tuvalu's isolation and limited resources make development of effective, culturally responsive health efforts particularly important. This independent Polynesian nation, the fourth smallest in the world, consists of nine small coral atolls and reef islands scattered over a 650 km arc in the Pacific Ocean. The total land area is only 26 km<sup>2</sup> and population density is high.<sup>3</sup> Over half the population now lives in the crowded capital, Funafuti, drawn there by the logistics of transport, medical needs, access to government facilities, ties with relatives already there, economic opportunities and entrepreneurial ambitions. Meanwhile, the seven outer island communities remain vibrant, the heart of social life and identity, though transportation challenges limit medical and other services. Throughout Tuvalu, most food is imported, wage employment is scarce and climate change brings increasing threats from tropical cyclones, drought and rising waters.

Offsetting these limitations are significant cultural advantages. These include egalitarian social institutions, communitarian values and sharing-based economic traditions. Though amalgamated from eight distinctive communities, the nation of Tuvalu has a single language,<sup>4</sup> one dominant religious tradition and a generally shared cultural orientation only partially disrupted by colonial experiences. Traditions underlying contemporary life largely derive from the cultural adaptations that facilitated survival in the inherently marginal, precarious environment of these low coral islands. The Tuvaluan approach to wellness described below is also intimately informed by this long-standing context of precarity. As will become apparent, both its value components and practical guidelines are culturally responsive to local conditions and health challenges.

## WHAT IS OLA LEI AND HOW DOES ONE ACHIEVE IT?

We think of theory as a tool to help us understand the world. Typically, a theory comprises a number of interrelated concepts. For example, biological theories of human health and wellbeing would posit humans as organisms living in relation with their environment and introduce concepts of infectious agents, immune response, hygiene and so on. More holistic theories of health introduce social, cultural and spiritual components and include concepts like social stressors and social support which interact with human biology and environment. The Ola Lei Framework is an example of a holistic theory based in Tuvaluan thought and practice, which nowadays also incorporates some elements of biomedical theory.

Seeking a holistic understanding of Tuvaluan ideas about health and wellbeing, Tufoua repeatedly put the question “What is ola lei?” to community elders and leaders, health professionals and traditional healers, schoolteachers, students and community members. His participant observation in schools, family households, communal activities and hospitals provided additional information about ola lei practices. Of course, since people focus inevitably on characteristics most relevant to their personal experience and understanding, not everyone identified all of the qualities and practices included in the final framework. However, integration between the conceptual and practical aspects of ola lei proved to be a defining feature of Tufoua’s discussions with individuals and of his ethnographic observations. In the visual model developed from his research data, values that people focused on form the head of the octopus, and the practices, the tentacles (see Fig. 1).

## THE HEAD OF THE OCTOPUS: QUALITIES OF OLA LEI

Four central qualities together constitute the head of the octopus: *filemuu* ‘harmoniousness, peacefulness’, *fiafia* ‘happiness, contentment’, *malosi* ‘fitness’ and *ola leva* ‘longevity’. All of these qualities are interrelated and mutually supportive in complex ways. While *malosi* and *ola leva* primarily relate to a physical state of wellbeing, *filemuu* and *fiafia* make a primarily emotional connection and also have spiritual resonances. As will become apparent, an emphasis on relationality underlies them all.

*Filemuu ‘Harmoniousness, Peacefulness’*

*Filemuu* assumes that fights and arguments will be avoided or minimised and that people will interact in peaceful, respectful ways, thereby creating a harmonious society. Peacefulness is a source of pride for Tuvaluans; its maintenance is a conscious goal and its absence a source of shame. In

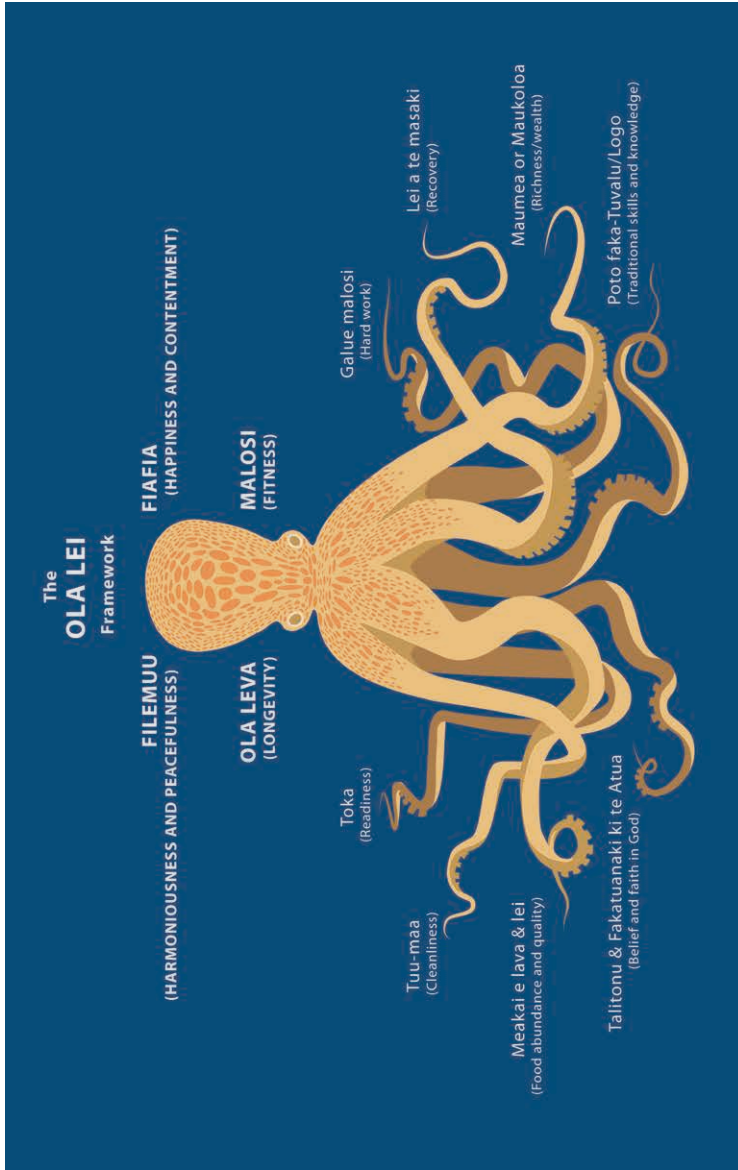


Figure 1. The *Ola Lei* conceptual framework.

village social settings and family life alike, care is taken to maintain the calm decorousness that embodies filemuu, and parents are expected to teach their children to sit quietly in gatherings. As the following incident demonstrates, rowdy behaviour is quickly censored:

In the church services that I attended, children were often seated in the front of the church, with a few Sunday school teachers surrounding them. If some kids were rowdy, a teacher would call out with a stern voice: ‘*Filemuu!*’ The kids would quickly calm down. (Tufoua’s fieldnotes 2011)

Community people see filemuu as the essential context for a lifestyle conducive to wellbeing.

Deeply embedded in traditional customs, activities and value systems, filemuu was sometimes seen by adult interviewees as a point of concern. For example, several elders said that they feared for community wellbeing because of increasing disregard of filemuu. As one explained:

Some other things that I can see these days ... those people who are trying to break our customs and traditions. ... people who carelessly [get] drunk and [go] shouting around in the village ... That’s not ola lei! (Community elder and healer, 60+ years old)

In most Tuvaluan communities, people are prohibited from making noise after ten at night or holding drinking parties within the village since these typically involve rowdy behaviour and often culminate in fighting. Some interviewees simply equated filemuu with community wellbeing. For example, one middle-aged school matron asserted: “Ola lei is when we or students live happily and peacefully.”

As Chambers and Chambers (2001: 191–218) documented for Nanumea, social life in Tuvalu is intensively organised by an array of groupings with overlapping memberships, a structure that militates against polarisation and development of divisive factions. Public displays of structured competition both express and reinforce the community solidarity on which filemuu depends. Demonstrations of *lotofenua* ‘community heartedness’ are expected from leaders and community members alike. The practical aspects of ola lei described below provide numerous examples of filemuu-supporting behaviours.

But despite the value placed on cohesion and filemuu, its achievement is always tenuous, a fact with which leaders at all levels must come to terms. When conflicting relationships or strong differences develop within a community, the space between different factions is expected to be negotiated,

reconciled and nurtured. Relatives, as well as community and religious officials, are expected to take leadership roles to resolve disagreements and restore filemuu. While filemuu is primarily expected to be taught in the home, it is continually reinforced in all social interactions and by behavioural expectations as well. For example, calling attention to one's own achievements is discouraged and people should avoid seeking personal recognition, practices that help maintain harmonious public interactions. Like other institutionalised forms of social control, such expectations reinforce the community cohesion on which Tuvaluan social life is premised. One primary school headteacher suggested that traditional forms of respect and peaceful living should be taught explicitly in school, lest the emphasis on physical health in the school curriculum overshadow the relational values seen as so essential to Tuvaluan wellbeing. Interestingly, none of the students interviewed identified filemuu as contributing to health.

*Fiafia 'Happiness, Contentment'*

Most afternoons during fieldwork on Vaitupu, Tufoua went to chief Seu's house to tell stories and play board games. One afternoon the chief told Tufoua that he had heard about a friend's interview regarding ola lei.

*Tufoua:* Yes ... I did interview him on what he knows or what his explanation is about this word: ola lei.

*Chief:* Ola lei? Ola lei?

*Tufoua:* Yes, ola lei. What do you think? Is this board game we play every day part of ola lei? [laughs]

*Chief:* [laughs] Brother, this game ... makes us happy. Happiness is ola lei. Ola lei is happiness! You see those children who play there ... and you hear the cheery shouting from the young men and women who play volleyball there ... they are happy, right? Even those women who play bingo over there, they are happy, though they are losing their money [laughs]. Hearts and minds are happy ... the souls and bodies are satisfied, the minds are at ease and relaxed; we laugh but are not sad. That's happiness ... it's ola lei. ... Anyway, let's play the game of Sorry!... let me defeat you so that you may get sadness: then you will not get ola lei [laughs].

This conversation made Tufoua attend closely to the familiar village scene: indeed, activities producing *fiafia* were common parts of the daily lives of adults and children alike. Even on Sundays, when reverential quiet prevails, people gain contentment from hymn singing and togetherness in church and enjoyment from the special midday family meal that follows. Clearly, *fiafia* permeates everyday socialising and the cooperative lifestyle typical of Tuvalu.

Seu went on to describe *fiafia* as a continuum ranging from contentment (in spirit and mind) to deep joy. In its normal form, *fiafia* is characterised by the calm, cheerful, agreeable behaviour that fuels positive social interactions and cooperation. Widely specified by interviewees as a key emotional aspect of *ola lei*, *fiafia* provides the basic stance expected in community life and for personal choices. Maintaining a *mata fiafia* ‘happy or contented face’ is an oft-emphasised value and implies agreement with the way things are going. It is also interpreted as indicating a personal character that is reliably cooperative, amenable and non-contentious. By contrast, behaviours and demeanours indicative of opposition, irritation and anger are stigmatising, negatively impacting not only a person’s own reputation but also contributing to a bad reputation (*luma*) for a family. Because of this considerable social pressure to maintain an appearance of *fiafia*, the Tuvaluan saying “The most important thing in this life is just to be happy” carries a range of possible interpretations. Of course, maximising *fiafia* can also justify discounting increasingly prevalent medical advice about diet and exercise, ultimately leading to a lowered experience of *ola lei*.

At the “deep joy” end of the continuum, *fiafia* and the activities creating it are an example of that “modality of social relationship” which Victor Turner (1969: 360) termed “*communitas*”. This is the experience of an intense social bond, a recognition of togetherness outside of (but still in tandem with) the structured social relationships constituting society. Edith Turner (2012) aptly referred to *communitas* as “collective joy”. The sense of flow engendered by participating in encompassing, sustained, collective activities (singing, music, dancing, sports) draws people together in an emotional bond, disregarding hierarchy and other structures that separate people from each other. *Communitas* can also transform work into an emotionally vibrant social experience. In Tuvalu, if singing and dancing at a community celebration begin to feel dull, elders may call out: “The day seems to be quiet. Increase the wind [*momea ake te matagi*].” In response, participants will re-energise their singing, dancing and drumming. Someone may jump up and begin to humorously “conduct”, teasing the other side, and more people will get up to join the dancers. That is, the *fiafia* that already characterises the festivity will intensify toward the “deep joy” of *communitas*, solidifying participants’ feelings of communal commitment and connection.

Given its ability to create a community space conducive to collective wellbeing, *fiafia* proved particularly significant for community leaders in their descriptions of *ola lei*. As one secondary school principal explained:

The *ola lei* is, anything that you do, you should feel contented. Your body and mind are fit and function well. You are happy with the people you live with, in the family and working place. Anything that you do, you do it in good heart and happiness, right?



In Tuvalu, the effectiveness of a leader is assessed by his or her ability to make decisions that create contentment and peacefulness in the community. Less affluent community members also often mentioned *fiafia* in discussing *ola lei*, recognising that lack of access to material items and associated social status can have an impact on contentment. For example, residents of a poorer part of Funafuti described *fiafia* as a state of being that they consciously worked to create. For them, *fiafia* seemed to involve both acceptance and hope. As a mother in her forties reflected:

Every day, we try hard to be happy with what we've got or graciously accept the things we got on the day. And we also pray that we may get life, happiness and blessings on the next day. Happiness is *ola lei*, right? If there is no happiness, the family would break up, right?

Like *filemuu*, *fiafia* was specified as an integral component of *ola lei* mainly by older Tuvaluans. Just one primary school student mentioned *fiafia* and only about a quarter of the secondary school students included it.

#### *Malosi 'Fitness'*

*Malosi* literally means fitness, but it carries connotations of the commitment and strength that enable a person or collectivity to be active and effective in daily life. *Malosi* includes three main dimensions: physical (*malosi faka-te-foitino*), mental (*malosi faka-te-mafaufau/loto*) and spiritual (*malosi faka-te-agaaga*). The general term *malosi* also provides the common reference point of wellbeing in everyday greetings:

*Person 1: Talofa. Eaa mai koe i te aso tenei?* Good day. How are you today?

*Person 2: Fakafetai. Au e malosi fua.* Thank you. I am fine.

When respondents feel unwell in a particular aspect, they may specify it:

*E malosi a toku agaaga mo te mafaufau/loto, kae ko te faitino e vaivai.*

My spirit/soul and mind/heart are fine, but my physical body is weak.

Or:

*E malosi a te faitino, kae vaivai a te agaaga mo te loto.*

The physical body is fit, but the spirit and mind are weak.

Interviewees usually focused on only one or two aspects of *malosi*. Emphasis on positive spiritual and mental states was most common among older people. One ardent Christian claimed that we need only spiritual fitness to make us *ola lei*, but this was unusual. The most frequently specified

aspect of malosi, however, was physical: malosi faka-te-foitino. Besides ‘not being ill’, this includes physical attributes such as strength, endurance, ability to perform hard work and (for children especially) growth and normal development. As one local government officer said:

Ola lei is a thing that we live with ... if we are strong and hardworking, our family will be ola lei, right? These are the words of our ancestors, that is ... if we are strong enough to look after our family, our children will live happily, right?

For men especially, being able to work hard is synonymous with wellness.<sup>5</sup>

Malosi faka-te-foitino was particularly salient for those who had experienced serious illnesses. A male diabetic patient in his fifties explained ruefully:

I also saw the link between ola lei and sicknesses. Ola lei is the taking care of our bodies to prevent us from getting sick. ... Now I see that a good complete body [pointing to his amputated leg] with a strong body ... or not ill is ola lei, right? ... I know now the importance of ola lei ... I wish I had listened to [diabetic] awareness programmes ... It’s just too late.

About half of the students interviewed simply defined ola lei as being malosi, that is, physically fit and not ill. From the viewpoint of most older Tuvaluans, however, this is an incomplete understanding of malosi.

### *Ola Leva ‘Longevity’*

*Ola leva* literally means living a long life. Initially, only two young people (no adults) mentioned ola leva, and when Tufoua encouraged them to elaborate, they just shrugged their shoulders and said, “Ola lei is ola leva.” Fortunately, comments made at a cricket game by an elder in his eighties brought the concept of ola leva into clearer focus:

#### *Tufoua’s Fieldnotes: “Ola Leva i te Kilikiti” (Longevity in Cricket)*

It was my turn to bat. The man before me was sent off—out for a duck—accompanied by loud laughter. I walked over to a breadfruit tree to our team’s bats. As I was choosing a suitable bat, an old man, a well-known former cricketer, called my name and gave me a tip: “Tufoua, try and pray that you hit the first bowled ball. If you hit the first bowled ball, you will know that you will ola leva.”

What interested me was the phrase ola leva. The most respected group of people in a Tuvaluan community is the elders. The level of respect should increase as age increases. Ola leva symbolises respect and authority as well as ola lei. For example, elderly family members are served first with the best food. The relationship between ola leva and “respect” is often taught and

discussed in families and in church. People believe that respecting and being kind to people will help you live long.

A few days later, during a community function, I ran into this same old man. I asked him for an interview. I reminded him of his “hit the first bowled ball” advice and its relation to *ola leva* and *ola lei*. The old man theorised:

Living long [batting for a long time] in cricket is just the same concept as living long in this life. *Ola leva* is often associated with “having the first thing”. To use a new or first product/item/thing is important for *ola lei*. Breathing the fresh air of the early morning makes you *ola lei*; you eat the first fruit/crop of the harvest—it is important, right? The toddy juice<sup>6</sup> of the morning is more fresh and sweet than the afternoon toddy juice, right? The earlier the fisherman goes to the sea ... the more fish he will catch. *Tufoua*, that’s the same concept of why you have to hit the first bowled ball ... because as that first bowled ball hits your [cricket] bat, it will give out an important thudding sound ... you will know that [thudding sound] will make the bowlers panic ... and you will know that you will be *ola leva* [batting for a long time] and your whole team will feel alive as well.<sup>7</sup>

However, longevity is rarely viewed as the primary goal in itself. Instead, people expect long life, happiness and wellness to be connected. As a 60-year-old man explained:

It is true, long living is useful as you can ... see life for a longer time or see your grandchildren and great grandchildren, eh? However, what I value more is living a happy life while I live. When I die, I am satisfied as it is God’s will and power. But I only want to live well but not suffer during the time I live.

Some older people added the idea that *ola leva* is given to good people, a gift from God.

#### THE TENTACLES OF THE OCTOPUS: HOW TO ACHIEVE *OLA LEI*?

But what will ensure *ola lei*? Interview analysis showed that most people were strongly focused on the actual practices that enabled them to achieve wellness. For example, the elder who explained the importance of *ola leva* to *Tufoua* went on to link his longevity to consuming fresh local food from the land and sea and to living in a clean environment. This was his explanation for living to be 80 in a developing country that had a male life expectancy of only 67.4 years at the time of *Tufoua*’s research (Government of Tuvalu 2011: 23). The eight practices and pragmatic qualities described below are those that interviewees most commonly identified as contributing to the achievement of *ola lei* in the context of Tuvalu. These constitute the ever-moving, entwined tentacles of the octopus (see Fig. 1). The support each practice provides to the others is noteworthy.

*Meakai e Lava e Lei 'Food Abundance and Quality'*

In Tuvalu, abundant food represents generosity, hospitality and prosperity. Displaying quantities of food, especially quality food, and eating it together is the standard way to show appreciation, celebrate important events or even apologise. In daily life, sharing food creates solidarity in both families and communities. As Chambers and Chambers (2001: 130–46) documented for Nanumea, continual flows of food gifts among village households express relationships of *alofa* 'compassion, love, empathy'. For example, families with active fishermen or access to local and imported resources should be proactively generous in their distributions, not just acceding to requests for assistance but giving what others may need or enjoy without being asked. Insofar as possible, households prepare enough food each day so that it can be shared with neighbours and relatives and also offered to visitors.

Lack of food can also create shame, however, and shame certainly has negative impacts on *fiafia* and overall wellbeing. One man in his sixties described this shamefulness: "When one cries of hunger and suffering, that is not *ola lei*, right?" He explained that a typical Vaitupu response to the question "Why are the kids crying?" is "They are hungry". He elaborated that very soon "people will arrive with baskets of food to that house for the kids to eat ... kids eating enough, not always crying, that is *ola lei*, right?" Parents warn their children not to fight, argue heatedly or cry loudly: "Don't fight or cry as people may think that we don't have food."

Not surprisingly then, food was usually the first thing mentioned when people talked about *ola lei*, and students mentioned food quality second only to cleanliness. Only some students and a few educated people specified the importance of a balanced diet when defining *ola lei*, however. Instead, food quantity rather than quality tended to be the primary focus for most interviewees. Perhaps this is not surprising since before the advent of substantial food imports, Tuvalu's atoll environment limited the range of foodstuffs available both in daily life and at festive celebrations. The same locally produced items (primarily coconut products, a wide variety of fish, crabs and other seafoods, breadfruit, pulaka,<sup>8</sup> taro and bananas plus chicken, pigs and wild birds on occasion) were generally available to everyone. Sharing expectations among kin and neighbours also supported equal access, reinforcing food abundance as a positive criterion.

Community people usually assess the quality of foods largely by their cultural importance, which is not necessarily the same as the food's nutritional quality. At feasts, local foods like turtle meat, fish, pigs, *fekei*,<sup>9</sup> coconut crabs, lobsters and drinking coconuts are seen as quality foods. So are canned and packaged food and loaves of bread. A prime example of these "culturally important" foods was evident at the farewell feast for Vaitupu's outgoing pastor, honouring his high status and years of service.

The value placed on food abundance, too, was shown by the size of the enormous (2 × 3 m) plywood platter presented to him, covered in a great variety of local and imported foods, which required several men to carry.<sup>10</sup>

Food quality means different things to different people. Some culturally valued foods that are high in saturated fat are now known to aggravate diabetes, heart disease and hypertension. This health information shocked some Tuvaluans, especially elders, who had been eating local foods such as coconuts all their lives and regarded them as a healthy food choice. The clash of perceptions was clear at a health talk given to diabetic and hypertensive patients. The presenter had a tray of different foods, which were grouped into: “eat this food more” and “eat this food less”. After the brief talk, the patients asked questions.

*Patient:* Does this mean that coconut (*niu*) is also included in the foods that we should *not* eat more of?

*Nurse:* Yes! Remember that the coconut has a lot of creamy oil within it, so it is not quite good for us who have diabetes. Just eat it once a week.

*Patient:* Oh! Oh my! I really like to eat coconut. Oh my! [laughs]

Because “local food” is often used as a cover term for healthy food choices, this confusion is understandable. In addition, generalised dietary recommendations can founder on differences in the composition of parts of the same plant.<sup>11</sup> For example, the mature flesh of the coconut, the immature “jelly” flesh, coconut water and sprouting coconut kernel have very different nutritional values. Both mature coconut flesh and the coconut cream made from it are high in calories and saturated fat. However, mature coconut flesh is also an excellent source of fats which bolster “good” cholesterol and contains fibre and important minerals. The sprouting kernel is a source of soluble sugars, starch, fibre and minerals, with high antioxidant activity and little fat (Manivannan *et al.* 2018). In addition, unlike the active lifestyle typical in Tuvalu in the past, most people now lead more sedentary lives, making some traditional food preferences and eating patterns problematic.

In an everyday meal, families mainly try to ensure that there is sufficient food on the table. As often as they can, they also try to include fresh fish and local crops such as taro, pulaka, breadfruit, banana and coconut. For those living in urban Funafuti, all of these are scarce and difficult to obtain. As a result, people must usually rely on imported store foods, including rice, flour, sugar and packaged and canned items. All respondents, however, agreed that abundant, high-quality food enhances the defining features of wellbeing: happiness, physical fitness, longevity and peacefulness.

*Tuu-Maa 'Cleanliness'*

Tuu-maa was the most frequently discussed practice facilitating ola lei, primarily involving a clean environment, houses, clothes, food, water and body. As a local government officer explained:

Ola lei refers to the cleanliness of the place that we live in. That is the first thing about ola lei, the place we live in has to be clean, right? If the place that a human being lives in is clean, the things that we use like food will also be clean. ... then we can have this thing called ola lei.

A student said almost the same thing: "Ola lei includes the food that we eat and the clothes and places that we live in should be good and clean."

As Mary Douglas (1966) has shown, "dirty" and "clean" are culturally constructed categories. In their descriptions of cleanliness, adults as well as secondary school students foregrounded tidy dwellings and litter-free surroundings, though they also recognised a general relationship between dirt and disease. This emphasis is easily seen every day in village life. Women and girls sweep around and inside their houses each morning and evening, carefully disposing of sweepings. It is shameful for a family, especially its females, when their home's interior is messy or its surroundings are littered with leaves or trash. Many local village councils also conduct monthly inspections to maintain the tidiness of houses and their surroundings. The cultural value ascribed to these particular cleaning practices has probably been reinforced by a century of western health initiatives. Interviewees saw cleanliness as enhancing both *malosi faka-te-foitino* and *fiafia*.

Older secondary students also talked about cleanliness as an important dimension of ola lei, even though neither their living quarters nor water reservoirs received much regular cleaning attention. Only two primary school students mentioned cleanliness of surroundings as part of ola lei. However, all students were familiar with personal hygiene (brushing teeth, wearing clean clothes, washing hands) because they practised these activities in school.

Of course, attaining cleanliness also involves two additional qualities: hard work and readiness (both described in more detail below). As one 60-year-old man explained:

Men should trim the grasses and bushes around their houses and women sweep their surroundings and regularly clean the houses to prevent insects and pests from breeding and spreading diseases, right? When people are lazy, the village will be dirty and full of mosquitoes and flies.

Tuu-maa also requires household management skills and access to soap and other cleaning equipment. Gutters need repair and cleaning to keep tank

water clean and tanks must be screened to stop mosquitoes breeding. Besides personal effort, financial and technical support are required to achieve and maintain cleanliness. Some major issues are beyond remedy by individual households or even by local communities. As a mother in her forties residing in a poorer neighbourhood on Funafuti explained,

We live near the swamps<sup>12</sup> ... full of dumped nappies and different types of waste. We want to do something about this waste problem, but we can't because we don't have any money or tools such as gloves, boots, shovels, right? So, we just live like this ... each family tries to prevent its members from catching diseases from this pollution, right?

Extreme health challenges such as this are exacerbated by the urban density of Funafuti. For outer island residents, limited access to tools, building supplies and repair materials can also pose challenges.

### *Toka 'Readiness'*

The word toka, which means readiness or being prepared, is often heard in Tuvalu. It is something that people must work at. In a group discussion on Vaitupu, one woman explained the relationship between toka and ola lei in this way:

[O]la lei is having everything available. A woman has to have woman-like properties in her home ... her sink, her toilet, your oven to be available ... your beddings, eh? ... When a woman's things are available to her, her time will not be wasted, as she has everything—the family will live well ... eh? ... Panapa said to me ... : “La, ola lei is having things all ready at your side.” ... Since when I have all these things available at my side, I felt that my life is good, as I will not be worn out ... . I also can have enough time to rest. Perhaps that is what I know about this word, ola lei.

Two aspects in this description stand out. First, the availability of materials is seen as crucial to achieving wellbeing. Second, toka is basic to effective management of household, family and community resources. Access to a toilet, running water, an oven, eating utensils, bedding, transport, money and food allow women to meet family and community responsibilities and to save time and energy. The challenge of toka is that people must plan ahead and work hard. Toka also requires money in addition to foresight, determination and endurance.

This Vaitupu woman went on to identify the source of her emphasis on preparedness as Tufoua's own father, Panapa, a remarkable village man whose initiatives had demonstrated toka and new productive possibilities to his community over the years. He effectively marshalled his household to

dig a fishpond<sup>13</sup> (Fig. 2), maintain productive plantations of coconut palms and vegetable gardens and raise both poultry and pigs. He also developed a cage for raising mud crabs, carved handicrafts and built a water cistern, toilet and concrete ovens for his household. In sum, he had made sure not only that his family's daily needs were met and that they had a buffer in case of drought or a tropical cyclone but also that he had a surplus available to help others through generous donations. Panapa's toka was esteemed because it contributed to the wellbeing of the whole community, and he had come to epitomise the *ola lei* approach on Vaitupu.

Tuvalu's environmental and economic limitations heighten the importance of preparedness. However, as is described in more detail below, toka requires considerable effort. Obtaining and storing necessities such as food, water, mats and sennit cord, fishing gear, cloth and clothing takes work, and people must plan ahead to ensure necessary reserves. This idea is captured in the proverb: "It's your walk, to and fro." Many Tuvaluans think that walking or jogging "just for exercise" misses the important contribution that the time could make to toka. An older interviewee offered this example:



Figure 2. Feeding time at the old man's fishpond. Photograph by Keith Chambers, 2010.



Like, a woman ... when she comes back from the sea, she brings with her some stones in her hands ... Well, during family functions, the stones would be ready for the *umu* ['earth-oven'] ... *ola lei* is developed from there!

While family needs are usually the central focus of *toka*, preparedness also reaches outwards to consider community needs too. As is described below, village festivities often involve competitions that encourage resource production and thereby contribute to *toka* and food abundance for the community as a whole.

### *Galue Malosi 'Hard Work'*

Hard physical labour—such as digging, paddling, lifting, cleaning, hand-washing clothes—involves endurance, energy and determination, especially given Tuvalu's hot and humid climate. One young man in his twenties admiringly complained about his hardworking father to Tufoua:

I am only astounded at how unfed up and tireless that man [his father] is! Sometimes I pretend not to hear [what he's doing] ... due to my tiredness. That man wakes up around at 5 am on a cold dawn and ... takes off to the bush to gather local leaves for compost ... and also does some kind of fishing. When he returns, we would still be asleep ... he makes a lot of noise as he feeds his pigs and chickens. ... If I am still not awake, he will go himself to cut our toddy ... even though I constantly tell him to leave toddy-cutting to me, ... after that, we can hear his motorbike on his way to his pulaka plantation. ... I would go to him and work beside him. We would go back home when I forced him to go back to eat. When we get home, we eat, then he will continue on his motorbike to his other pulaka plantation ... he will be gone for so long and return at dusk ... he will then be heard working on his pigsty ... ! He will only leave his work when we get angry at him to stop as it is dark! Sometimes, when he finishes eating dinner he would go fishing! As a result, I just have to follow him to help him with his work ... very exhausting!

Scorching sun and mosquitoes add additional challenges, and hard work in these conditions easily drains good spirits as well. Thus, it is common for relatives to work together in everyday tasks, both to accomplish them more quickly and to make the work less onerous. Community events and festivities involve intensive preparations, too, requiring *galue malosi* 'hard work' from many people.

Not surprisingly, old and young alike identified *galue malosi* as essential for *ola lei*. As one elder in his sixties explained:

*Ola lei* to me, one is working hard! ... You are to do the work in your family that will bring wellbeing to the family ... . If we sleep but do not work, we do not get *ola lei*, right? We will only catch sicknesses .... There used to be

an old saying that goes like this: “How nice is it to be sleeping, but will the angel bring you food?”

A 17-year-old male student agreed:

Ola lei is endurance and hard work ... That is ola lei.

Beyond being essential for family wellbeing, interviewees also viewed galue malosi as unlocking doors to many of the other practical dimensions of ola lei, including readiness, wealth and food abundance.

Galue malosi was also seen as a strategy that people who had not inherited a particular traditional skill (*logo*) could use to be more productive, even to the extent of matching outputs of those with inherited knowledge. For example, a 50-year-old man known for his big taro crops told Tufoua:

Tufoua, I am telling the truth to your face: I don't have any traditional skills or knowledge in taro planting. This taro planting activity depends entirely on your endurance and how hardworking you are. Collecting and making compost, feeding your taro and regularly visiting your taro plantation ... this does not apply only to taro planting, but it is also applicable to the concept of looking after your family in order to live well, as you may know from your research ... you need to work hard. ... People are saying that I have possessed some taro planting skills—none! I have only one traditional skill or knowledge [*logo*] that I know of: it is the galue malosi and regularly visiting my plantation ... this is my way of rising up to the level of skilful and knowledgeable people [laughs].

Galue malosi can raise a family's standard of living and make them more respected in the community. It is also valued for enhancing community wellbeing. As the well-known saying states, “Your hard work is your wealth.” As is described below, the “wealth” accessible to a village, community group or sports team is seen as dependent on the collective energy expended by its members.

Of course, galue malosi not only refers to working hard physically to produce necessities. It also refers to working hard mentally, as when students strive to learn and get good grades. While students themselves did not identify studying hard as important for ola lei, one man described how parents' hard work supports their children's educational success, which in turn provides the foundation for future family wellbeing. He stated:

It [ola lei] is just the working hard together of the husband and wife with their children to develop knowledge so that the children may have better lives in the future.

Education is typically seen as offering a path towards future wellbeing, and children are encouraged to take school seriously and do well. For unwaged community people in particular, earning money for their children's school fees and uniforms requires hard work and sacrifice.

*Maumea or Maukoloa 'Wealth'*

The terms maumea and maukoloa are used interchangeably, though maumea is more commonly heard these days than maukoloa. They refer to having lots of money or local resources such as land, pulaka and taro plantations, chickens and pigs and water reservoirs. In short, maumea means abundance and wealth, the material cornerstone of ola lei. For example, access to resources facilitates both contentment and physical aspects of wellbeing. One man in his fifties explained:

In those days, people were rich in terms of pigs, lands, pulaka plantations and woven items such as mats, fine mats ... right? So, if someone is married to a member of such a rich family, there was only one phrase that people could say: "You are blessed—you will have a good life [ola lei]!" He or she will have ola lei because that family is rich—he or she will not have a poor life or have to ask others for help, right? Now, richness seems to refer mostly to people who have lots of money, aye? [laughs]

Like this interviewee, Tuvaluans today see traditional resources (animals, crops and mats) as similar to money in that both are now essential for meeting needs and desires.

Maumea is also important because it allows people to play valued roles in society. Access to abundant possessions makes it possible to share them in generous, compassionate and caring ways, behaviour associated with social influence and leadership. For example, when Tufoua visited Isalaelu, a man who lived outside the village and raised an abundance of livestock, he gave Tufoua a piglet to take home in a sack on his motorbike. As Isalaelu explained:

Even though it is tiring, I feel the usefulness of this type of richness to our family, right? We are ready when the island community asks for contributions from families [pigs] ... we also eat these animals. I am not worried because with these animals I can feed my family, though we don't have much money, right? ... Tufoua, this type of richness in terms of animals and pulaka and taro crops doesn't just come to you by itself! You will get it [maumea] when you focus and work hard for it, right? Richness in terms of money is good, but it is better when you become rich in terms of these local animals and you will be happier and not worried in this life on this island.

Scarcity of employment and low wages limit most people's access to money. Even civil servants with regular incomes are enmeshed in the contributions and sharing obligations central to Tuvalu's communal culture and find it nearly impossible to save money. Generally, people neither aspire to be outstandingly wealthy nor see marked monetary wealth as essential for achieving *ola lei*. However, institutionalised levelling mechanisms make it desirable to amass what resources people can: relatives and neighbours can ask each other for help, more generous contributions are expected from people with more to give and gifts are the expected way to demonstrate *alofa*. When people with abundant food and other resources offer them to others, as Isalaelu did to Tufoua, they build a reputation for generosity that enhances their influence in community affairs. In addition, being able to make the contributions that are frequently needed for community and church festivities or fundraisers requires preparedness and hard work.

*Poto Faka-Tuvalu or Logo 'Traditional Skills and Knowledge'*

Traditional skills that people acquire from their ancestors and learn through life experience are termed *poto faka-Tuvalu* or *logo*. There are two types:

- i. Subsistence skills widely used in daily life, such as weaving, fishing, planting crops and collecting palm sap, and
- ii. Traditional ritualised practices known only to certain families or individuals, often connected to healing, fishing or gardening. These skills usually have a sacred, spiritual component derived from traditional religious beliefs, also giving them an uneasy relationship with Christian teachings.<sup>14</sup>

All community members are expected to learn how to perform basic daily activities appropriate to their gender, such as fishing, planting crops, collecting coconut sap, preparing and cooking food, making and maintaining clothing, climbing coconut trees and husking coconuts, house construction and repairs. Subsistence skills such as these are recognised as essential for wellbeing. As a man in his sixties explained:

Another thing I know about *ola lei* is the know-how or traditional knowledge. It is about yourself and your traditional family skills. Such skills are very important to *ola lei*. The *pulaka* has its own special way of being cultivated in terms of both planting and fertilising.

While none of the students interviewed mentioned "accessing traditional knowledge" as an aspect of *ola lei*, children learn common subsistence skills by helping older relatives with daily tasks. For example, most can collect mud crabs, produce coconut sap, husk coconuts, do some weaving and cook local food.

However, secret traditional skills belong only to certain families and are the realm of adults, passed down from generation to generation. One elder said that the family logo passed down to him involved not just specific “skills” but also constituted the basis for his family’s entire wellbeing:

Our family’s traditional knowledge is with me, such as in the traditional knowledge of how to make coconut palm trees bear plentiful and large coconuts or grow well and in healing through massage. These are skills that must be kept, as they are the *ola lei* of the family.

He strongly believed that his family’s repertoire of traditional skills enabled his relatives to live well. These skills may focus on cultivating large root crops, producing plentiful coconut sap, catching abundant fish or a specific kind of fish, or healing complex illnesses.

Passing of logo to the next generation of family members is flexible. The masters of certain traditional skills, who are mainly the family’s elders, decide who should receive it. As a traditional healer in his fifties explained:

I am currently observing and deciding which child should receive this *poto* [traditional healing skill] ... I shall not choose a child who is lazy or who drinks alcohol to excess, right? I identify a child who is strong and happy to do this job [healing massage] ... as this job is unpaid, huh?

Though a family’s traditional knowledge primarily benefits that group of relatives, it can also be used to enhance the wellbeing of the community as a whole, for example through healing, by sharing abundant food with relatives and neighbours or by contributing generously to community projects. Maintaining the secrecy of traditional skills and knowledge attests to their high cultural value. However, a family’s logo are occasionally shared publicly at funerals, wedding celebrations or other important functions, as a gift to those contributing labour and resources to the event. One secondary teacher argued that wider sharing of traditional family skills and knowledge could enhance Tuvalu’s economic wellbeing, as shown in his reply to this student’s question:

*Student:* Why is Tuvalu not as developed or as rich as Australia or the USA?

*Teacher:* Tuvalu can never become like Australia or the USA because Tuvaluans don’t share their traditional skills or knowledge to other fellow Tuvaluans. People with certain traditional skills are selfish and only keep their knowledge to themselves.

However, most people view the highly valued and sacred resonances of much traditional logo as inherently requiring secrecy. In this respect,

the western idea (articulated by this teacher) that skills and information should be transmitted impersonally is at odds with traditional patterns of knowledge sharing.

*Talitonu e Fakatuanaki ki Te Atua 'Belief and Faith in God'*

Many community members and church leaders linked belief in God (and the spiritual health this creates) with maintaining a healthy body, viewing them as reciprocal aspects of *ola lei*. As the leader of the largest church in Tuvalu explained:

The gospel considers the holistic development of the person: the physical and spiritual aspects. We cannot separate these two. ... the gospel would not become a gospel without the combination of humanity and spirituality. ... So we need to be fed with normal food so that we live well physically ... and on the other hand, we should be filled with spiritual food so that we can also live well, because believing in God is just as important as eating normal food.

This is the stance of Tuvalu's main church and other significant Christian denominations: faith in God and physical fitness are inseparable. All church elders as well as several older people (but no students) stressed this connection emphatically, and some described the health and wellbeing programmes organised by their churches as demonstrating the importance of this connection.

Interviewees who talked about the benefits of "believing in God" also shared some miraculous experiences they had during hardships. One devoted believer explained:

I had a problem with this eye. I could not see clearly. So, I prayed and prayed. ... Then, last week, an eye team from Australia came, and I was very lucky to be on the list because that list had been full. ... I believe that it is God's assistance that enabled me to be operated on. ... and now my eye is recovered, and it is very clear ... . Those are the ways, Tufoua, which God gives us when we rely on and believe in Him. He gives us life and health.

Teo, an elderly church leader, maintained that belief in God was sufficient in itself to ensure health.

*Ola lei* refers to knowing and believing in God. Health cannot be achieved by someone ... no one can achieve a peaceful life unless he or she knows God. ... Good living is only found in Christ. Therefore, *ola lei* is only a matter of having faith in Christ. ... In this life ... just have God and believe in Him. That's health!

While many others viewed holding firmly to belief in God as essential for *ola lei*, most viewed faith and efforts to maintain physical wellbeing as linked in a complementary way.

*Lei a te Masaki 'Recovery from Illness or Disease'*

For traditional healers especially, recovery from illness or disease was the defining quality of *ola lei*. One Funafuti healer stated:

In the language of local healers, *ola lei* refers to recovery, or [when] the sick person survives as a result of the treatment given by the traditional healer.

A traditional healer in Vaitupu agreed:

*Ola lei*, to me as a traditional healer, refers to the recovery of the patient as a result of my healing. Someone came for help and he was saved by my healing hands ... that person is saved and lived. That's *ola lei* to me.

Ordinary community people and students did not mention recovery, probably because they were not so focused on healing practices. However, they recognised that recovery demonstrates health and acknowledged the importance of healing practices for the community.

As Chambers and Chambers (1985: 37) found in Nanumea, trying to heal someone's sickness is a moral imperative for a traditional healer. Though they may receive a small gift for their efforts, their real reward is their patient's recovery. All the traditional healers interviewed by Tufoua believed in working together with medical personnel to heal patients' sicknesses, and healers also collaborated amongst themselves. For example, if a traditional healer was not able to resolve someone's sickness, he or she would refer that patient to another traditional healer or to government health services.

Recovery is also thought to have a more general applicability for wellbeing. Recovery from a life challenge or period of hardship (such as debt, an argument with relatives or other types of setback) are seen as crucial steps towards restoring *ola lei*. In stressful times, the goal of recovery sustains people as they strategise and work to overcome the problem, and thereby to return to a condition of *fiafia* and *filemuu*.

OLA LEI AS TE FEKE

While interviewees each emphasised the aspects of *ola lei* most resonant with their own experience, the *Ola Lei* conceptual framework is a synthesis of the values and practices they described. As was originally suggested by an older man, the octopus provides an effective representation of the holistic interconnections among the various components of *ola lei*. As illustrated in Figure 1, the head of the octopus represents the four main qualities of *ola lei*: peacefulness/harmoniousness, happiness/contentment, physical fitness/

lack of illness and longevity. The tentacles represent the practices through which *ola lei* can be achieved: food abundance and quality, cleanliness, readiness/preparedness, hard work, wealth/abundance, traditional skills and knowledge, belief and faith in God and recovery from disease and illness. The tentacles physically move the octopus to safety and to food, thereby continuously sustaining *ola lei* qualities. The intertwining tentacles form the octopus into different shapes, moving and interlacing in different directions. Taken together, these qualities and practices symbolise the complexity and interrelatedness that Tuvaluans ascribe to the concept of *ola lei*.

#### PUTTING THE OLA LEI CONCEPTUAL FRAMEWORK INTO POLICY AND PRACTICE

Local models of health and wellbeing can serve as a guide for identifying, developing and evaluating practices and policies to ensure that they are meaningful and consistent with local values (Durie 1994; Kupa 2009). We suggest four ways in which the *Ola Lei* Framework could be so used. Other possibilities certainly exist as well.

One of these involves how health and wellbeing are defined and measured. While the *Ola Lei* Framework shares a holistic perspective with the World Health Organization's 1946 definition of health (WHO 1948), foundational in Tuvalu's current health policy, it also differs significantly in orientation. *Ola Lei* certainly embraces the physical, mental, spiritual and social wellbeing of individuals, as does the WHO definition, and it views family, community, environmental and national wellbeing as integral as well. The collective orientation of Tuvaluan society encourages group responsibility, which is recognised and supported by the *Ola Lei* Framework. This sense of collective responsibility and interrelatedness could be integrated into Tuvalu's health policy in accord with more recent WHO charters, namely those of Ottawa (1986) and Bangkok (2005).

Second, features of *Ola Lei* could be used explicitly to assess Tuvaluan wellbeing, similar to Bhutan's Gross National Happiness Index (Zuzanek 2013: 796) or New Zealand's Living Standards Framework (New Zealand Treasury 2019). The qualities and practices described above provide a useful checklist for goal-setting when strategic plans are being developed by an organisation, government department or community group. In addition, many traditional activities deserve recognition for the contribution they make to wellbeing. For example, access to reserves of food, mats and cloth, which can be drawn on during ceremonies or in adversity, is enhanced by institutionalised production and resource displays, as when leaders of a women's group go house to house viewing members' newly woven mats. As development agencies recognise, preparedness at all levels is crucial in fostering the resilience needed to cope with increasing environmental challenges due to climate change (Gaillard 2010). Sharing expectations,



which are still strong despite inroads of capitalism, and development programmes that encourage entrepreneurial ambition, provide another example. These practices help to maintain social cohesion and equalise access to necessities, mitigating wealth disparities and thus making an important contribution to community health and wellbeing.

Third, the Ola Lei Framework can also be linked with traditional social institutions to empower health promotion and development initiatives. For example, the structured competition between two rival sides, fundamental to the organisation of Tuvaluan communities, could provide an appealing template for efforts to promote ola lei. Throughout Tuvalu, competition between two sides (*feitu*) underlies virtually all community festivities, work projects and sports. This mechanism of structured competition also involves many of the specific practices described above as supports for ola lei.

In Vaitupu, for example, the community competition called Nafa occurs every year. For this event, the two village sides are each subdivided into two units, and in each grouping, pairs of households compete to display their biggest or heaviest pigs, chickens, taro and pulaka roots. At stake is honour as well as fun. Each man taking part in Nafa raises prescribed numbers of each item, for example, at least five taro plants and three chickens. For months, family members also help by feeding livestock and gathering leaves



Figure 3. Rivals' taro crops, weighed on a wooden balance. Photograph by Filipepe Taumafai, 2020.



Figure 4. Chicken weighing time! Photograph by Filipepe Taumafai, 2020.



Figure 5. Celebrating victory. Photograph by Filipepe Taumafai, 2020.

for compost. At the end of the competition, the winners celebrate. Emotions run high as women from the winning household dance and tease the losers, who have been painted with black charcoal and are made to parade around the village before being sent to swim in the sea. Finally, the rival partners each exchange the produce they have displayed and take it home.

As Figures 3, 4 and 5 show, Nafa involves humour, fun and competition. Competitive festivities similar to Nafa take place in every Tuvalu community, strengthening existing social organisation, nurturing relationships and promoting production of local foods. While the competition requires hard work for months, the foods that are displayed ultimately spill over into family consumption. Competitive festivities like these celebrate preparedness, hard work and know-how. In the same way, community health and wellbeing programmes could incorporate both Tuvalu's traditional competitive organising structure and highlight the specific *ola lei* components that already make sense to participants. For example, vaccination programmes could be a focus.

Lastly, *Ola Lei* is valuable for planning because it helps to identify areas where gaps exist between values, policy and practice. For example, as several people pointed out, the quality of *filemuu* is jeopardised by alcohol-induced rowdy behaviour and fighting, despite laws that restrict access to alcoholic beverages. Community discussions regarding the importance of *filemuu* for wellbeing could increase awareness of the support provided by local rules. Similarly, *malosi* and *fiafia*, both key qualities for *ola lei*, are diminished by importing food of limited nutritional value or doubtful safety (i.e., expired or poorly stored stock). The Health Department might help to develop new import guidelines to increase food quality and programmes that encourage consumers to maximise nutritional quality and portion control.

In the educational system, disparities between situational realities and qualities recognised as contributing to *ola lei* abound. For example, teachers and students at the national boarding high school noted that the food served often does not accord with what they are taught is "good food". Students could apply their knowledge by designing improved menus. And while the health science curriculum seems effective in teaching the importance of cleanliness and hygiene, having a good diet and being physically fit, it omits components of *ola lei* involving social, spiritual, emotional and collective dimensions. More holistic curricula could be developed.

More broadly, the *Ola Lei* Framework can serve as guidance in developing policies, activities and strategic plans of organisations and the nation. For example, the recent Regional Rights Resource Team (RRRT) project, which was focused on remedying bullying, social exclusion, gender inequity and violence against women and girls, perfectly incorporates the central qualities of the *Ola Lei* Framework.<sup>15</sup> Other examples of how the *Ola Lei*

Framework could be implemented in strategic planning are evident in two recent Government of Tuvalu documents, namely the *Health Reform Strategy 2016–2019* and the *Tuvalu Education Sector Plan III (2016–2020)*.<sup>16</sup> Many of the values, principles and goals identified in these planning documents connect directly with the Ola Lei Framework.

Figure 6 offers some examples of these parallels. Attributes identified in the education plan, such as “respect for one another”, “sharing and caring”, “participating in community and decisions”, “humility” and “tolerance” map directly to Ola Lei’s value of filemuu, as does the attribute of “hard work” to galue malosi and tuu-maa. “Spiritual values” equates with talitonu e faka tuanaki i te Atua, while “sharing and caring” connect with maumea and with *communitas*-creating expressions of fiafia. Similarly, the three general goals specified in the Health Reform Strategy connect directly with the values of ola leva, fiafia and malosi of the Ola Lei Framework and with the supporting practices of lei a te masaki, toka, ola leva, meakai e lava e lei and malosi.

Links that are missing or not fully articulated can be especially instructive for effective policy development. For example, the value of “environmental preservation” identified as a mission objective in the education plan is supported by many specific Ola Lei practices (toka, tuu-maa and poto faka-Tuvalu) even though this was not a connection made by our interviewees themselves. This discrepancy could indicate an area needing further public education and outreach. Similarly, the Health Reform Strategy does not reference poto faka-Tuvalu/logo, even though traditional healers have long worked supportively with their western medical colleagues in Tuvalu. Fiafia as a goal (or as a helpful incentive to achieving goals) is mentioned in neither strategic document, though its saliency for interviewees suggests that it could be foregrounded in health promotion efforts and in education planning alike. As these examples show, the Ola Lei Framework can be used as an effective way to link government strategic planning endeavours to the assumptions, concepts and practices that resonate with local people.

Finally, critical reflection on the extent to which each component of ola lei is adequately realised in daily life can also provide guidelines for extending local regulations and motivating public engagement with them. For example, although homes and yards are kept very tidy, the concept of tuu-maa might also be extended to encourage more active care for the wider land and marine environments. The recent restriction of plastic bags is a good example of a successful policy change with positive environmental impact. The Department of Environment and local village councils, which both play crucial roles in minimising and managing waste in Tuvalu, struggle to access the funds, infrastructure and expertise needed to effectively engage with environmental issues. Many of these issues have public health implications that government departments, development organisations and community

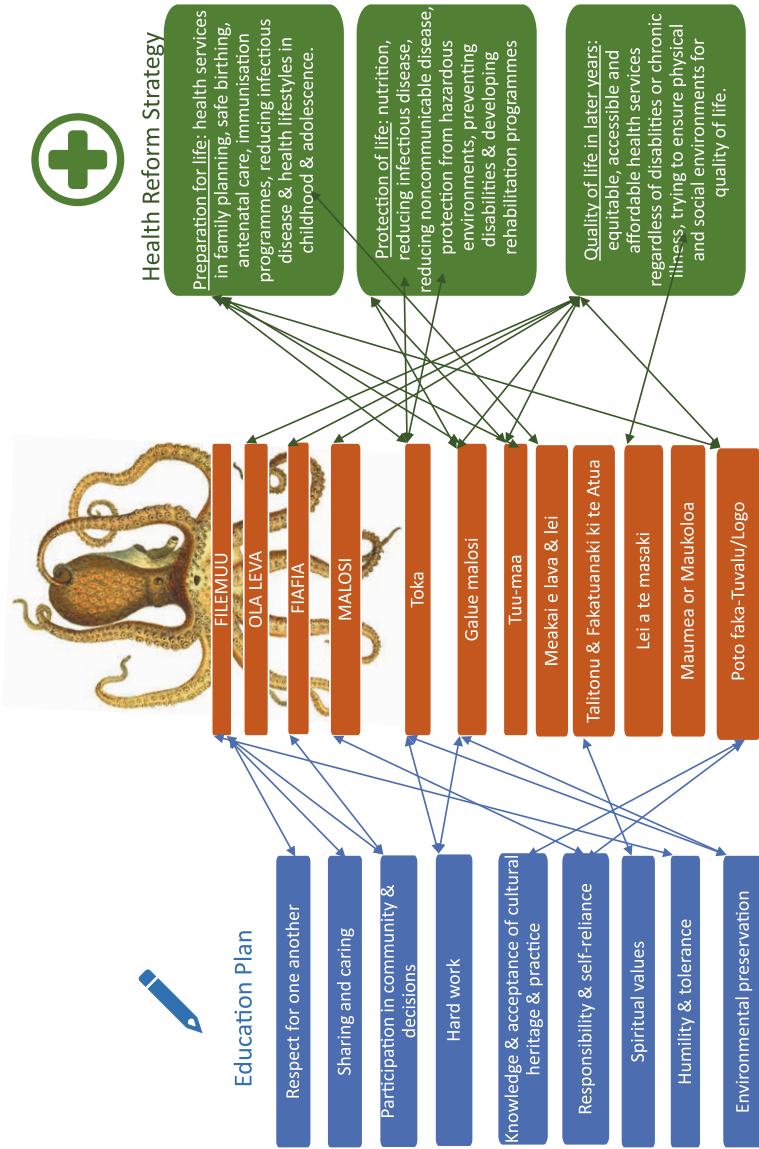


Figure 6. Mapping of attributes from the *Tivulu Education Sector Plan III (2016–2020)* and the *Health Reform Strategy 2016–2019* against the principles and practices of Ola Lei.

groups might creatively address using aspects of the feke metaphor. Similarly, the concept of logo could be used as a model and extended beyond traditional knowledge to include skills such as budgeting, wise water use and child-rearing practices focused on living well in the contemporary world.

The Ola Lei Framework can also facilitate collaboration between formal and informal health sectors in ways that use and reinforce local values. For example, while traditional healers often refer people to doctors and clinics, these referrals are seldom reciprocated. Instead, biomedical health endeavours operate quite separately. Interviews with community people, traditional healers and Department of Health staff indicated considerable support for nurturing more cooperation between traditional healers and biomedical practitioners at both policy and practical levels. Developing a complementary relationship between these sectors could certainly enlarge the resources available for ola lei. Especially given the holistic orientation that already characterises Tuvalu's health policy, integrating traditional healing skills and knowledge into the formal health infrastructure might also result in beneficial creative synergies. For example, tuu-maa ideology could be put into practice by engaging communities or community groups in competitions to clear villages of breeding places for mosquitoes or in other mosquito abatement efforts.

\* \* \*

In February 2014 our research group presented the Ola Lei Framework to elders, government and political figures, health workers and interested community members at a well-attended meeting in Funafuti. The representation of ola lei as te feke was especially well received, and many people told us that the Framework helped them organise their thoughts about wellbeing. They also offered additional ideas. One person pointed out that the octopus lives in deep water but puts its head above water occasionally to breathe, an apt metaphor for Tuvaluans surviving in Tuvalu and elsewhere in the face of climate emergencies. Someone else suggested that the suckers on the tentacles could indicate that Tuvaluans can get “stuck”, meaning that it is hard to escape some practices not conducive to ola lei. The flexibility of te feke, its capacity to change and move, was also noted, making it, like ola lei, hard to “capture”.

Later, in Auckland, we saw Tuvaluans wearing the feke image on T-shirts on festive occasions. It seems that the Ola Lei Framework, in its embodiment of the octopus, provides a powerful visual metaphor resonant with Tuvaluans anywhere. Similarly, the qualities and practices comprising this local theory of health and wellbeing have the potential to provide culturally meaningful support for numerous Tuvaluan endeavours.

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## NOTES

1. Discussions were mainly in Tuvaluan and have been translated into English by Tufoua. Tuvaluan originals can be found in Panapa (2014). Regrettably, they are not included here for space reasons.
2. We thank the late Briar Sefton for her drawing of te feke (Fig. 1) and honour her life. As we discuss below, Rose Pere (1988) and, following her, Mason Durie (1994) have also used the octopus metaphor in relation to Māori health. However, Tufoua did not find these writings until after he had independently developed te feke based on his own ethnographic interviews. The octopus metaphor may well hold relevance in many other Pacific societies too.
3. At the most recent census in 2017 (Government of Tuvalu 2017), Tuvalu's resident population was just under 11,000, of whom nearly 7,000 lived on Funafuti, with the remainder residing on outer islands. Significant Tuvaluan populations are also located in New Zealand, Fiji and Australia.
4. Nui is a partial exception: in this community, people spoke a distinctive Kiribati-based Micronesian language; in modern times most also speak Tuvaluan as well. Dialect differences distinguish the Tuvaluan spoken throughout the archipelago.
5. As Chambers and Chambers (1985: 44) found for Nanumea, "[this] implicit connection between strength and health also finds reflection in the Nanumean attitude that being a 'man' is incongruous with being a 'sick person'... . Men take conspicuous pride in their ability to perform strenuous male activities."
6. Coconut sap ("toddy"), locally known as *kaleve*, is collected from the bound flower shoot of a coconut palm. "Cutting toddy" entails removing a thin sliver from the tip of the shoot, allowing sap to continue to flow into the collection receptacle. This is normally a young man's job, done at dawn and dusk, high in the crown of a palm tree.
7. The joy of feeling "alive" as a team resonates emotionally with *fiafia* and the experience of *communitas*.
8. *Pulaka* is similar to taro, though it is larger and more salt-tolerant (it has been called "atoll taro"). An iconic and high-status food, *pulaka* is grown in carefully composted pits dug down to the water table.
9. A rich baked pudding made from grated *pulaka* roots, coconut cream and coconut sap molasses.
10. After the feast, this platform of food was taken to the pastor's house. His guardians would decide what to do with the food, usually redistributing some to other households and keeping some to feed his own family and visitors.

11. Murai, Pen and Miller (1958) provide detailed descriptions of atoll foods, including the wide variety of coconut palm products, plus their preparation techniques and nutritive values.
12. These swamps formed in excavations made during World War II by United States forces to provide fill materials for the military runway. They were finally filled back in with New Zealand assistance in 2016, expanding the usable land area of Funafuti by 8 percent (Allen + Clarke 2017). Thus, this family's situation today differs from that described in 2011. However, although the pits were filled, densely populated Funafuti still has a significant solid waste disposal and sanitary issue.
13. This was the first private fishpond on the island. In the 1980s, he was one of the few people on the island who had vegetable gardens. Relatives, friends and sick people often came to him for produce, which he generously shared. He constructed the first concrete crab cages in the community. People continued to use these until recently, when they started to use wire cages to keep live crabs.
14. See Kennedy (1931) and Chambers and Chambers (1985) for descriptions of traditional medicine and healing on Vaitupu and Nanumea respectively.
15. This project was funded by the Social Citizenship Education Programme of the South Pacific Community (see [rrrt.spc.int](http://rrrt.spc.int)). It began in Tuvalu in 2019 and is ongoing at the time of writing, implemented by the Ministry of Education, Youth and Sport.
16. Specific lists of the values, principles and goals specified in these documents can be found on p. 20 of the Health Reform document and p. 12 of the education plan. Intersections with the Ola Lei Framework could be especially useful in making local understandings available for more effective government planning and policy development efforts, especially insofar as the Government of Tuvalu spends more on health and education than on other sectors.

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## APPENDIX

### *Team Research Process*

Tufoua's PhD research, on which much of this article is based, was part of a larger project on transnational Pacific health involving the Cook Islands, Tuvalu and people of those heritages in New Zealand. It was funded by the Health Research Council of New Zealand and the University of Auckland. Judith Littleton and Julie Park were the principal investigators, and drew together a supporting multidisciplinary team that included Linda Bryder, Anne Chambers, Keith Chambers, Ward Friesen, Jennifer Hand, Phyllis Herda, Robin Kearns, Pat Neuwelt and Yvonne Underhill-Sem. In addition to the substantive health knowledge we were seeking, one of the project's goals was to fund, foster and support six Tuvalu and Cook Islands scholars earning a higher degree. Ethics approval was granted by the University of Auckland Human Participants Ethics Committee, with further approvals from the Governments of Tuvalu and the Cook Islands. Here we focus on the Tuvalu process.

Except for the student colleagues and one member of the academic team of Cook Islands heritage, we were a group of academics of diverse, but non-Pacific, ancestry engaged in a project concerned with Pacific health and society. We were, of course, highly aware of the myriad issues that such a structure raises. Many of us have had long involvement in working in partnership with Pacific scholars and communities and had learned lessons of what might be called "cultural humility". We knew about our disciplines and subject areas, about how to write successful grant proposals and how to manage research processes, but in relation to Tuvalu and the Cook Islands we were the perpetual students and the students were the teachers—although they were learning too, to understand their societies through alternate lenses. Our process was one of learning together and exchanging expertise.

Early in 2008 Keith Chambers and Julie Park visited Tuvalu to discuss the research idea with relevant people in Funafuti and to learn what local people and government would be most interested in, should the study be funded. They

sought and received official approval and discussed the three postgraduate scholarships for Tuvaluans which were part of the funding application. For Keith, this was one of several earlier return visits. He and Anne Chambers had first been to Tuvalu, then the Ellice Islands, in 1973, before independence, to conduct their doctoral research. They were both fluent in the language, with a Nanumea accent, and well known in Tuvalu through their previous research. It was Julie's first visit and she did not know the language.

Once the project was successfully funded, the search for graduate scholars began. Setapu Resture, whom Keith and Julie had met in Funafuti, gained a master's scholarship and conducted a historical study of health in Tuvalu (2010). Sagaa Malua (2014), based in Auckland, conducted and published community research in New Zealand as a research associate, and subsequently, as an honours student in anthropology. They were eventually joined by Tufoua Panapa, who had been teaching high school in Tuvalu, who enrolled in Development Studies for his PhD, under the supervision of Yvonne Underhill-Sem and the co-authors of this article. Like the other students, Tufoua was able to define the focus of his project. He chose to link health, education and development via an ethnographic study in Funafuti, Vaitupu and locations in New Zealand where there were Tuvalu people living.

Key to this transnational project of learning together was a weekly reading and writing group for academic staff and the students. Theory, methodology, Pacific scholarship and comparative studies were discussed, with participation by all comers. These exchanges were the heart of the project. Less frequent team meetings reviewed progress, participated in planning and shared expertise. Each graduate student also had his or her own supervisory arrangement with members of the research group with the relevant expertise. Staff members conducted discrete pieces of research to feed into the larger project (e.g., Dunsford *et al.* 2011; and see the project website: <http://www.arts.auckland.ac.nz/en/about/schools-in-the-faculty-of-arts/school-of-social-sciences/anthropology/staff-research/social-research-on-tb-and-health/transnational-health-in-the-pacific-through-the-lens-of-tb.html>).

Tufoua returned to Tuvalu from his Auckland doctoral preparation for a preliminary field consultation period from November 2010 until February 2011, accompanied for several weeks by Anne and Keith Chambers, and he returned from Auckland for his main ethnographic fieldwork in Tuvalu from June 2011 to January 2012. This Tuvalu-based work he complemented with fieldwork in Auckland, Wellington, Whāngārei, Porirua and Rotorua. Shortly before his thesis was ready for submission in 2014, Tufoua and the co-authors travelled to Funafuti to present his findings, receive feedback, collect the final set of health statistics and thank the many people who had supported and facilitated our work.

We authors were in three different locations when we wrote this article: Tuvalu (Vaitupu or Funafuti), United States (Oregon) and New Zealand (Auckland). We discussed it several times in person and via email before beginning writing. By this time Tufoua was fully engaged with his new role in the Ministry of Education, Youth and Sport in Tuvalu. The first step Julie and Judith carried out in Auckland, namely cutting and pasting the relevant sections of Tufoua's thesis into a single document and editing it to fit into an academic article, being very mindful of retaining Tufoua's narrative voice. That accomplished, we authors worked through the key arguments of the Ola Lei Framework itself, its basis in research and its status as a Tuvaluan theory, and more generally, the issue of treating indigenous theory as theory—an issue we had canvassed in an earlier paper using Māori theory to consider New Zealand immigration policy as it related to Tuvalu (Park *et al.* 2011). Because the thesis was submitted in 2014 and we began work on the paper in 2019, some updating was also required. This reading and writing was done iteratively via email, Dropbox and several internet voice calls over many months.

Once the article had been submitted in 2020 and accepted, subject to taking into account several excellent suggestions (thank you to our reviewers), much the same writing process took place. One reviewer had suggested that it would be useful to read about Pacific scholarship in the context of a multicultural team, and this appendix is the result.

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# A CASE FOR HANDY AND PUKU‘I’S ETHNOGRAPHIC RECONSTRUCTION OF THE POLYNESIAN FAMILY SYSTEM IN HAWAI‘I

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**ABSTRACT:** A case for Handy and Puku‘i’s early-twentieth-century ethnographic reconstruction of the Polynesian family system in the Hawaiian Islands is made in the light of a theory of cognatic descent groups associated with land. They describe land tenure practices as organised by commoners who worked in named land parcels known as ‘ili ‘āina. This description is rejected by many scholars today, who argue that Handy and Puku‘i interpreted Hawaiian land tenure as organised by egocentric kindreds, rather than corporate groups. These scholars argue that commoners lost the ability to organise land tenure prior to European contact in 1778. Here I propose that this argument rests on an ahistorical reading of Handy and Puku‘i, which was exposed by Goodenough’s 1955 landmark paper, “A Problem in Malayo-Polynesian Social Organization”. I identify two types of corporate groups associated with land in traditional Hawaiian society, including the social category of *maka‘āinana* and its constituent ‘ili ‘āina. Together, *maka‘āinana* and ‘ili ‘āina constituted an efficient land tenure system capable of allocating labour to produce a reliable surplus. The event that ended commoner organisation of land tenure in Hawai‘i was the mid-nineteenth-century Great Māhele—the process of land redistribution proposed by the King Kamehameha III.

*Keywords:* cognatic descent, land tenure, commons, property right, right of person, kindred, ‘ohana Hawai‘i

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A seminal ethnographic reconstruction of how Hawaiian commoners organised themselves (Handy and Pukui 1958) is understood in various ways today. This is primarily because it follows a long-standing Hawaiian tradition of describing land matters in apparently egocentric terms of ‘*ohana*’ kindred, extended family’, rather than in terms of a corporate descent group. Describing land matters in terms of kindreds might appear today as a lapse in anthropological analysis, a failure to generalise from the egocentric testimony offered by informants. In fact, what appears to be a problem is a historical accident; the ethnographic reconstruction of the Polynesian family system in the Ka‘ū District of the island of Hawai‘i was made in the decades before anthropologists developed the concepts and terms required to analyse and describe cognatic descent groups Pacific peoples often formed to organise land tenure and use.

The theory of cognatic descent developed by Pacific anthropologists in the last half of the twentieth century, in the decades after Handy and Puku'i described the Polynesian family system in Ka'ū, comprises several advances in anthropological practice. First, it identifies how cognatic descent groups incorporate by combining a cognatic descent principle with common residence and other factors to steward individual pieces of land (Goodenough 1955). Second, the theory describes how cognatic descent group organisation serves to allocate labour efficiently among small groups whose demographic fortunes regularly wax and wane, a function it carries out by removing barriers to mobility, leaving people free to change residence if their current group outgrows its resource base or to respond to opportunities in groups with labour needs. Third, the theory clarifies that cognatic descent was an idiom that could be used to organise various behaviours rather than a general characteristic of the society in which it was practised (Scheffler 1964). Finally, the theory of cognatic descent aids comparative ethnology by recognising that cognatic descent groups associated with land were widespread in the Pacific and especially common in Polynesia (Goldman 1970; Goodenough 1955; Howard and Borofsky 1989).

Scholars' responses to Handy and Puku'i's ethnographic reconstruction of the Polynesian family system in Ka'ū generally reflect confusion sown by the ambiguous treatment of the 'ohana, which the ethnographic reconstruction identifies as the group that stewards an *'ili 'āina* 'land division'. The apparent problem is that stewardship requires a corporate group that outlives its members, but a kindred is defined in relation to an individual and dissolves when the individual dies. Among subsequent scholars, Goldman (1970) is perhaps most sympathetic to Handy and Puku'i's reconstruction of the commoners' family system and its relationship to the land. He argued that the cognatic descent organisation of commoners was distinct from the bilineal descent of the status lineage that organised the nobility. Nevertheless, Goldman's primary interest in the status lineage of the nobility and the honours and rivalries it promoted limited his interest in commoner organisation, and he did not reanalyse commoner social organisation in the light of cognatic descent theory. Most scholars today discount Handy and Puku'i's reconstruction, ignore cognatic descent theory to promote the status lineage as a general model for Hawaiian social organisation, and claim that the rising power of the nobility usurped the practices used by commoners to organise land tenure sometime prior to western contact (e.g., Dye 2010; Earle 1978; Hommon 2013; Kirch 2010; Linnekin 1990; Sahlins 1985, 1992).

This paper makes a case for Handy and Puku'i's reconstruction of the Polynesian family system in Hawai'i in the light of cognatic descent theory. It identifies two commoner corporate groups active in Hawaiian land tenure, both of which are predicted by cognatic descent theory. The first is a large

dispersed group organised by cognatic descent known as *maka ʻāinana* ‘people of the land’. The second is a smaller local group organised by cognatic descent and co-residence known as ‘ili ʻāina, which is glossed today as ‘land division’ but arguably referred to a land division and its stewards. Records of the mid-nineteenth-century Māhele land division indicate that the *ali ʻi* ‘noble, nobility’ status lineage had carved out a role in the flow of people between ‘ili ʻāina by dispossessing underperforming ‘ili ʻāina and granting the newly vacant lands to followers. Nevertheless, land tenure continued to be organised by *maka ʻāinana* until the ‘ili ʻāina corporate groups were dissolved during the Māhele, which introduced a land tenure system based on individual property rights.

The case for the ethnographic reconstruction is made as follows. First, the Polynesian family system in Kaʻū is summarised as Handy and Pukuʻi described it before anthropologists had developed a theory of cognatic descent. Second, the theory of cognatic descent is outlined and its features are related to the ethnographic reconstruction augmented by information from Māhele-era land records, illustrating the close correspondence between them. Third, scholars’ rejection of Handy and Pukuʻi’s reconstruction is reviewed and recognised as a failure to appreciate the social organisational insight provided by cognatic descent theory. Fourth, the question of land “ownership” is addressed by canvassing a range of proposals and contrasting them with the ethnographic reconstruction interpreted in the light of cognatic descent theory. The argument concludes with a description of some land tenure practices of Hawaiian commoners made obsolete by the Māhele.

#### HANDY AND PUKUʻI’S ETHNOGRAPHIC RECONSTRUCTION

The ethnographic reconstruction of the family system in Kaʻū was the product of a collaboration between the native Hawaiian scholar Mary Kawena Pukuʻi and the Harvard-trained anthropologist E.S. Craighill Handy and his wife, Elizabeth Green Handy, that began on a Bishop Museum expedition to Hawaiʻi Island in 1931. In the summer of 1935, the three travelled to Kaʻū “for the purpose of salvaging what was known of the past from elderly Hawaiians and reviewing Hawaiians in terms of their own traditions” (Barrow 1972: xii). Here they interviewed Pukuʻi’s mother, Paahana, and an elderly aunt, Keliʻihue, who supplied “most of the unique material” (pp. xii, xiii) that was first reported in a series of articles in the *Journal of the Polynesian Society* in the early 1950s. The journal articles were compiled and reissued in book form by the Polynesian Society (Handy and Pukuʻi 1958), and the book was later published commercially (Handy and Pukuʻi 1972). The ethnographic reconstruction was subsequently described more fully in the context of Hawaiian agricultural practices (Handy and Handy 1972). The various presentations of the ethnographic reconstruction are consistent with one another.



According to Puku'i's informants, the Polynesian family system in Ka'ū played a central role in land tenure, with extended families responsible for 'ili 'land sections'.

Probably the most permanent units of land were the sections of the *ahupua'a* land ... allotted to the families which lived on them and cultivated them, in distinction to *ali'i* who were overseers or higher chiefs. It seems likely that the right to continue to use and to cultivate 'ili stayed with the 'ohana (extended families) dwelling thereon, regardless of any transfer of title to the *ahupua'a* in which they were located. The 'ili was essentially a land division, whereas the *ahupua'a* was a tax unit. (Handy and Handy 1972: 49)

The general relationship of 'ili family land divisions to *ahupua'a* 'tax units' is well illustrated on a portion of an island map that shows the distribution of 'ili in the *ahupua'a* of Kāne'ōhe and Kailua on the windward side of O'ahu Island (Fig. 1).

After noting that the *ahupua'a* tax unit "was subject to a lower chief who was known as the *ali'i 'ai ahupua'a* or 'chief who eats the *ahupua'a*" (Handy and Handy 1972: 48), it is reported that "[t]here was no term *ali'i-'ai-'ili*. The 'ili, largest subdivision within the smallest division of *ali'i* feudalism (the *ahupua'a*), was essentially a family ('ohana) holding" (Handy and Handy 1972: 53).

The organisation of the 'ohana and its relationship to its *ali'i* and the *ahupua'a* tax unit are described as follows.

Within a given *ahupua'a* the heads of the respective 'ohana were responsible for seeing that their people met the tax levy prescribed by the *konohiki*, the *ali'i*'s land supervisor. The heads of the 'ohana groups were called *haku* or *haku 'aina*. So far as is known there was no formal procedure involved in the choice of a *haku* for an 'ohana ... There was a high degree of stability or permanence of tenure despite the general turnover of authority and titles to the land whenever a new *ali'i* came into power, owing to the fact that particular 'ohana enjoyed the rights of occupancy and use and faithfully fulfilled their obligations ... Actually it was to the advantage of an *ali'i* to maintain the occupancy of diligent cultivators of the land. Thus the *kauhale*, the homesites of established 'ohana, were permanent features of the landscape, and the vested interest of any given family was equivalent to a title of ownership, so long as the landsman labored diligently to sustain his claim and was loyal to his *ali'i*. (Handy and Handy 1972: 288)

Each 'ili comprised one or more *kauhale* 'households', which served as the basic unit of social organisation.

Within the *'ohana* the functional unit is the household. One term used for household was the word *hale*, house. In inquiring about the number of families or domiciles in a given locality, one would ask "*Ehia hale la?*" (How many houses?) *'Ohua* was a term that signified retainers or dependents in the household. In contradistinction to "family" (*'ohana*), inmates who were not kin by blood or adoption were *'ohua*. (Handy and Pukui 1958: 5)



Figure 1. Portion of a map of O'ahu Island showing the numerous 'ili in the ahupua'a of Kāne'ōhe and Kailua. Source: Donn (1902).

The various 'ohana of an ahupua'a were known all together as maka'āinana (Handy and Pukui 1958: 5), one of the "four distinct castes in the old Hawaiian civil system" (Handy and Handy 1972: 320) along with ali'i, *kahuna* 'priests' and *kauwā* 'outcasts'.

According to native genealogical history ... [maka'āinana] were of the same stock as the *ali'i* but without claim to noble status or rank. This was because no strict rules governed their unions, as in the case of the nobility, with respect to genealogical equality or precedence ... As long as they were loyal to the *ali'i* on whose land they dwelt, their land holding, homesites, and fishing rights were secure. However, they were not serfs. Theirs was the right, if they pleased, to leave their home district or island and settle elsewhere under another chief. (Handy and Handy 1972: 323)

The 'ili land unit managed by the 'ohana was specifically the 'ili 'āina, as opposed to the *'ili kūpono* 'independent land division.' Both kinds of 'ili were individually named with fixed boundaries. The two kinds of 'ili were distinguished primarily by their relation to ali'i; an 'ili 'āina might be dispossessed by an ali'i and its *haku 'āina* 'head of extended family' paid tribute to the ali'i 'ai ahupua'a, while the 'ili kūpono could legitimately resist dispossession and paid tribute directly to the island or district ali'i rather than to the ali'i 'ai ahupua'a.

Some *'ili* permanently belonged to families; these were termed *'ili ku pono*, strips (*'ili*) standing (*ku*) in their own right (*pono*). The *'ili ku pono* were never subject to transfer at the time of reallocation of landed chiefdoms ... The *'ili ku pono*, of all divisions and varieties of land rights, seems to have carried the only form of title that was permanent. It is noteworthy, however, that every *'ili*, of whatever type, had its own individual title, transitory or otherwise, and was carefully marked as to boundary. (Handy and Handy 1972: 49)

#### COGNATIC DESCENT THEORY

Prior to the development of cognatic descent theory in the second half of the twentieth century, anthropologists were most comfortable analysing societies with unilineal descent systems; societies without unilineal descent systems, such as Hawai'i, were "relegated to a kind of negative leftovers bag of 'bilateral' or 'cognatic' societies" (Keesing 1975: 91). As a result, anthropological theory at the time of Handy and Puku'i's fieldwork lacked definitions for many of the concepts required to describe Hawaiian corporate groups associated with land.

A landmark paper that set out the basic tenets of cognatic descent theory starts by distinguishing two conflicting definitions of "kindred" in the anthropological literature of the day, one an egocentric group and the

other “a group of persons who acknowledge their descent, genealogically or by adoption, from one family, whether through their fathers or mothers” (Goodenough 1955: 72). Goodenough recommended that “kindred” refer solely to the egocentric group and that another term be used for the descent group meaning of the term; anthropologists today typically call this a cognatic descent group (Keesing 1975: 91–100).

Goodenough further distinguished between social groups in which membership was restricted and those in which membership was unrestricted (Fig. 2). Historically, restricted social groups were important for anthropologists because they divide society into mutually exclusive groups by restricting membership to either the father’s group or the mother’s group. Restricted social groups formed by unilineal descent provide the closure, uniqueness and determinate membership required by corporations (Smith 1998: 128). Cognatic descent, in which a child can claim membership in the father’s and mother’s groups, is unrestricted and does not divide society into mutually exclusive groups. On its own, cognatic descent does not provide a basis for incorporation. A key insight of the theory is that cognatic descent group membership can be restricted by adding additional criteria to distinguish who belongs to the group. In this view, restricted groups might be formed by the practice of unilineal descent or by the practice of cognatic descent combined with other criteria such as inheritance of land rights, residence or personal choice between father’s and mother’s group.

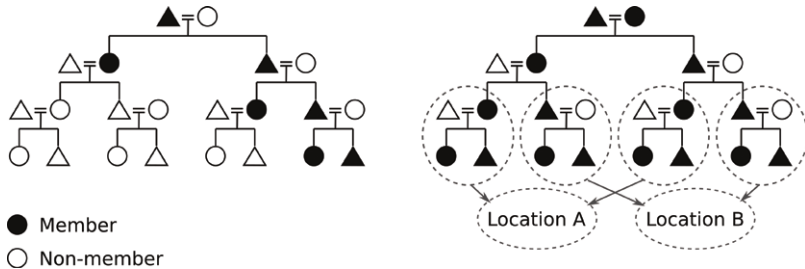


Figure 2. Restricted and unrestricted group membership: (left) membership is restricted to two individuals in the youngest generation when group membership is determined by patrilineal descent; (right) membership belongs to all individuals in the youngest generation when group membership is determined by cognatic descent. Note that restricted groups can be formed through application of another criterion, such as residence location at either Location A or Location B.

Prior to the development of cognatic descent theory, anthropologists typically described societies as characterised by a single kinship system. Cognatic descent theory clarified that “a ‘kinship system’ is not a separate sub-system of any given social structure but rather the organisational idiom for many kinds of social relationships” (Scheffler 1964: 131–32), an insight that created the conceptual space to identify *maka‘āinana* corporate groups involved in land tenure independent of the status lineage that organised Hawaiian *ali‘i*. This insight was developed by Goldman (1970), who distinguished the kinship principles that *maka‘āinana* used to organise land matters from those used by *ali‘i* to organise the status lineage. He identified several other instances of this distinction elsewhere in Polynesia and proposed

the hypothesis that the organization of Polynesian kin groups evolved from two different sources, from the small and utility-minded land-holding group of bilaterally related persons ... and from the comprehensive genealogical networks organized around chiefly lines. (Goldman 1970: 438)

Development of cognatic descent theory led to the recognition that cognatic descent groups associated with land were widespread in the Pacific. Goodenough found evidence for cognatic descent groups in the Philippines, Kiribati and the Solomon Islands, and abundant evidence for cognatic descent groups in Polynesia, including Tokelau, ‘Uvea and Futuna (Goodenough 1955: 75–77). Subsequent fieldwork in Polynesia found that cognatic descent groups were “prevalent” throughout the region (Howard and Borofsky 1989: 4). Based on the distribution of cognatic descent groups in Island Southeast Asia, Micronesia, Melanesia and Polynesia two types of kin groups associated with land were posited for the societies ancestral to most Pacific peoples, including Hawaiians (Goodenough 1955).

One was an unrestricted descent group, while membership in the other was determined by parental residence. Because they stressed kin ties through both parents equally, these groups favored the simultaneous presence of bilateral kindreds and Generation-Hawaiian kinship terms. (Goodenough 1955: 82)

Goodenough (1955) illustrated the relationship between the unrestricted descent group and groups associated with land parcels with an example taken from the practice of land tenure in Kiribati, where there are two named groups associated with land parcels.

An ancestor having established ownership of a tract was the founder of all three [types of descent groups]. All of his descendants form an *oo*. Those in actual possession of a share in the land are eligible to membership in a *bwoti*. Those whose parents resided on it form a *kainga*. (Goodenough 1955: 75)

Here, ownership is vested in the unrestricted descent group descended from a founding ancestor. The smaller groups formed by the intersection of cognatic descent and residence differ from one another by length of association. Members of a bwoti include those in their first generation of residence, while members of the more restricted kainga are part of a corporation associated with the land parcel for two or more generations. According to the theory, groups organised in this way and associated with land provide the structure needed to balance demographic change and land use. In particular, they provide a flexible way to place people on land that enables them to avoid the twin problems faced by unilineal descent groups—how to support members of a growing lineage with the finite resources of a given land base and how to attract new members to a declining lineage so it can continue to work the land efficiently. Members of the larger corporate group are, in theory, free to move among the various land parcels managed by the group. In Kiribati, the fact of this mobility was institutionalised in the distinction of relatively mobile members of a bwoti from the more sedentary members of a kainga.

The ancestral kin groups associated with land posited by Goodenough correspond closely to the ethnographic reconstruction of the Polynesian family system. The term *maka'āinana*, defined by Pukui and Elbert (1986) as 'people that attend the land', is an obvious candidate for the unrestricted descent group associated with land. Handy and Puku'i recognise the *maka'āinana* as a descent group when they describe its members as "bred from a single parental stock" (Handy and Pukui 1958: xvii) and when they characterise the *maka'āinana* of Ka'ū as the union of the district's 'ohana (Handy and Pukui 1958: 5). Technically, *maka'āinana* can be classified as a corporate category, rather than a corporate group, because the members "lack the organization and ability to act together" (Smith 1998: 85). As discussed in the section on land ownership, below, *maka'āinana* are incorporated as a social category to manage transmission of land rights.

The 'ili 'āina, which is described as a family group with an informal leader and a long-term interest in a parcel of land with a "high degree of stability or permanence of tenure" (Handy and Handy 1972: 288), likely corresponds to the group determined by parental residence. Nevertheless, there appears to be no direct statement in the ethnographic reconstruction of the Polynesian family system to the effect that parental residence was a sufficient condition of group membership. Fortunately, a detailed analysis of Māhele testimony from Kawaioloa, O'ahu, augments this normative description of the 'ili 'āina with insight into how tenures were transmitted.

There is some irony to the search for information about the operation of 'ili 'āina in records of the Māhele, one purpose of which was to institute private property in land, a project whose successful implementation made 'ili 'āina practices obsolete. Nevertheless, Māhele records for Kawaioloa identify 43

or 44 named 'ili 'āina (Sahlins 1992: 176 n3; cf. Anderson 2001: 144). The practical tension between the traditional tenure system and private property in land can be seen in the way that claims were framed in testimony to the Land Commission charged with managing the transition from traditional *kuleana* 'rights and duties' in the land to a system in which *kuleana* referred to a plot of land and its associated property rights.

The identification of the source of the *kuleana*, for example, whether it descended from the parents of the holder or was given to him by the local headman, was a determination of legitimacy that often depended on who was testifying to the Māhele claim. Typically, the ancestral right is put by the common farmer himself—or more rarely, herself—in the letter of claim that by law had to be filed with the Land Commission before the end of February 1848. He or she writes to the effect that the lands come from 'parents' (*mau makua*) or 'grandparents' (*nā kupuna*, also 'ancestors'), usually without specifying any by name ... When the commission meets at Waialua two or three years later, however, the witnesses may or may not so confirm the claim as a family heritage. Alternatively, the land is said to have been granted to the holder by La'anui [the paramount *ali'i* of Waialua from about 1828 until his death in 1849 (Sahlins 1992: 8)] or his *konohiki* ['land supervisor'] Ku'oko'a. But it is usually Ku'oko'a who says so. (Sahlins 1992: 178)

The full formulae for an ancestral claim, glossed as *mau makua* and *nā kupuna* in the quotation, are *mai nā kūpuna mai* and *mai nā mākuā mai*. The formula *mai nā kūpuna mai* means "what comes from the ancestors into this time" (Beamer 2014: 15). The formula *mai nā mākuā mai* refers to the most recent link in the chain of transmission and indicates the group resident on the 'ili 'āina was determined, in part, by parental residence. Here, parental residence constitutes a sufficient condition of membership, an arrangement common in Polynesia, where "[r]esidence by itself does not give title to descent-group membership, but land rights established by descent-group membership tend to remain operational only through residence" (Firth 1957: 7).

Goodenough hypothesised that cognatic descent groups associated with land functioned to balance demographic change and land use by promoting mobility among groups. The mobility of *maka'āinana* among 'ili 'āina in the first half of the nineteenth century can be reconstructed from ancestral land tenure claims at Kawailoa expressed in a political register that refers to the *konohiki* 'land manager' who legitimated the claim. More than half of Māhele land claims at Kawailoa, 42 of 78, refer to the first *konohiki* on the list, who was placed on the land by Kamehameha sometime after he conquered the O'ahu Island *ali'i* Kalanikupule in AD 1795 (Sahlins 1992: 180). In historical terms, claims that refer to the first *konohiki* likely include people placed on the land by Kamehameha and people whose ancestors resided at Kawailoa

before Kamehameha conquered the island. In contrast, there are 21 recent arrivals who legitimate Kawaioloa residence with reference to the reign of La'anui, which began about two decades earlier. These recent arrivals are almost equally divided between those who exercised a traditional claim within the 'ohana of maka'āinana and those who were placed on the land by ali'i (Sahlins 1992: 182). In between these extremes are a dozen claims made by people whose lands were transmitted to them by an ancestor who came to Kawaioloa in the quarter century between Kamehameha's conquest and the investiture of La'anui as ali'i of Waialua. The ancestors of these people might have come to Kawaioloa by exercising a traditional maka'āinana claim or they might have been placed on the land by an ali'i and subsequently transferred tenure in the traditional way, *mai nā mākuā mai*. In either case, the claimants legitimated their claims with reference to a corporate maka'āinana descent group. Thus, 64 of 78 Kawaioloa tenures around AD 1850, more than 82 percent, were based on a variety of ancestral claims, about half of which were for lands in named 'ili 'āina. These ancestral claims document the persistence of maka'āinana corporate groups associated with land posited by Handy and Puku'i's ethnographic reconstruction interpreted in the light of cognatic descent theory.

Finally, Goodenough noted that societies in which cognatic descent groups were associated with land typically exhibited bilateral kindreds and "Generation-Hawaiian" kinship terms. Both of these social institutions were present in Hawai'i. Hawaiian kinship terms classify male relatives in the father's generation, including mother's brother, as *makuakāne* 'father' and female relatives in the mother's generation, including father's sister, as *makuahine* 'mother', thereby offering no terminological warrant for a division of society into restricted groups. Bilateral kindreds are known in Hawai'i as 'ohana, a term that Handy and Puku'i recognise as polysemic. In addition to its reference to a bilateral kindred, the term also refers to an individual born into a household associated with an 'ili 'āina, as opposed to *'ohua* 'visitors or sojourners in a household'. The distinction between 'ohana and 'ohua appears to parallel the distinction in Kiribati between the long-term members of the kainga and the mobile members of the bwoti.

#### SCHOLARLY RECEPTION

The scholarly reception of the ethnographic reconstruction has been cool, in part because the polysemy of 'ohana introduces ambiguity. Goldman, who valued the ethnographic reconstruction of the Polynesian family system in Ka'ū, was keenly aware of this ambiguity, noting that 'ohana sometimes seemed to refer to a corporate group and at other times a kindred, a characteristic that resulted in a description that he found "unfortunately vague" (Goldman 1970: 235). In the corporate aspect of the 'ohana, Goldman



concluded that its informal structure, limited tenure rights to land and lack of a name and territory made it a weak corporate group. Further, the fact that tribute was organised by the haku 'āina on behalf of the 'ohana suggested to him that “it was the political territorial division that demarcated the 'ohana as a corporate body” (p. 236) and that the “basic organization in Hawaii . . . was political and not kinship” (p. 238). Thus, while he recognised that the distinct organisations of commoners and of the status lineage were not incompatible and that change in one did not necessarily entail change in the other, he believed that the status lineage achieved its high level of development at the expense of a drastic modification of commoner organisation.

The idea that the rise of the status lineage drastically modified commoner organisation led to the hypothesis that maka'āinana completely lost the ability to incorporate and that members of the status lineage managed land tenures instead. First formulated in a grant proposal (Sahlins 1973), the hypothesis was elaborated historically as a distinction between “archaic” and contact-era maka'āinana (Hommon 1976) and presented in embryo form (Sahlins 1985) before a fully elaborated version appeared (Sahlins 1992). A succinct statement of the hypothesis claims that land tenure matters were decided solely by the elite and that maka'āinana traditions were relevant only insofar as they structured relations of subordination.

For the people on the land, there was no protection of lineage. There was no lineage. The local chiefs periodically “placed” (*ho'ono*) and replaced by the powers that be upon the districts of the countryside had no necessary or essential kinship to the people there. But at the same time, this system of land redistribution among the elite left no space to alternate local structures of lineage solidarity and collective property—and, least of all, to an alternative authority emanating from the people as the senior line of their own ancestry. By traditional definition, commoners are people who cannot trace their genealogies beyond their grandparents. Nor did they inherit land so much as replace their parents or grandparents in a relation of subordination to the chief who had been put in charge. (Sahlins 1985: 24–25)

This commoner disenfranchisement hypothesis—that maka'āinana groups had lost the ability to incorporate, yielding control of land to ali'i—has been widely accepted by archaeologists and anthropologists working in Hawai'i (e.g., Dye 2010: 730; Earle 1978: 146; Hommon 2013: 15–17; Kirch 2010: 26, 72; Linnekin 1990: 114–17, 120, 153).

Proponents of the commoner disenfranchisement hypothesis generally ignore the insight from cognatic descent theory that kin groups of Polynesian elites and commoners were organised differently, along with Goldman's hypothesis that the two kin groups had evolved from different sources. Instead, proponents of the hypothesis start from the premise that the

ideal Polynesian society is organised by a single rank order structure that encompasses elites and commoners alike (e.g., Earle 2002: 79; Linnekin 1990: 114; Sahlins 1992: 178, 192) and explain the ethnographic facts as due to changes from this posited single source. Unlike Goldman, who tried to reconcile the ‘ohana kindred with the corporate qualities described by the Polynesian family system, proponents of the hypothesis reject the idea that the ‘ohana was active in land matters and assign corporate status to a domestic group constituted by a core of “*kupuna kin*” (Sahlins 1992: 196–203) augmented by non-relatives attracted to the group by its leader, characterised as a “big man” (Sahlins 1992: 208–11). According to the account,

Hawaiians would make a scandal of the technical categories of social anthropology by transforming this kindred into an enduring corporate group—by means of such biological scandals as the transformation of collateral into lineal relatives and grandchildren into children. They would defy normal processes of social reproduction leading to the dispersal and distancing of familial kin ... by valiant efforts of adoption, kinship classification, endogamous marriage, and exchange of land—all aimed at nullifying time and the concomitant increase of kinship distance. (Sahlins 1992: 197)

The theory indicates these efforts were carried out by individual *maka‘āinana*, who “had their own life-style and relationships by which for generations they had coped with their afflictions” (Sahlins 1992: 203), rather than by individuals working within the overarching structure of a *maka‘āinana* corporate category and the local structure provided by the corporate group responsible for stewarding an ‘*ili āina*. By this account, Hawaiian *maka‘āinana* comprised a class of individuals, rather than a congeries of ‘ohana as in the ethnographic reconstruction of the Polynesian family system or a cognatic descent group associated with land of the kind identified by Goodenough (1955).

Proponents of the commoner disenfranchisement hypothesis note that the term *‘ohana* is rarely found in Māhele records of the 1840s, in which reference to a corporate group responsible for land tenure might be expected (e.g., Linnekin 1983: 246; Sahlins 1985: 25 n21; 1992: 194). Linnekin suggests that the term was oversystematised by academics and that “Hawaiians themselves have been influenced by this scholarship” (Linnekin 1990: 115), leaving the impression that the ethnographic reconstruction might have put a modern spin on traditional practices. Although anthropologists prefer a direct report by someone, preferably a participant, who observed social interactions firsthand, ethnographic reconstructions based on family knowledge can yield reliable results (Burch 2010). Nevertheless, any ethnographic reconstruction project, even one based on secure family traditions, is fraught with difficulties. Were the traditions related by Puku‘i’s

relatives “invented traditions” (Hobsbawm and Ranger 1983) that projected modern understandings into the past, as Linnekin appears to suggest? Or were the traditions faithful representations of past practices that were mistranslated and misrepresented in the various publications?

Fortunately, the literary culture of nineteenth-century Hawai‘i provides evidence that discounts the possibility that the ‘ohana traditions recorded and interpreted by Handy and Puku‘i were simply reflections of an academically influenced twentieth-century Hawaiian culture. Writing in the Hawaiian language newspaper *Ke Au ‘Oko ‘a* in 1869, the historian S.M. Kamakau described the land tenure practices of the maka‘āinana in terms of the ‘ohana:

Eia kekahi mea e akaaka ai, he kuleana paa ko na makaainana ma ka aina.  
O ka lewa ole o ka ohana, a me hanauna o ka ohana mai na kupuna mai, ua  
akaka i kela kana i keia kanaka ka aina kumupaa, a me ka aina hoolina o  
kela ohana o keia ohana mai na kupuna mai oia ka aina ewe o na kupuna.

The figurative language of the canonical English language translation, cited next, tends to obscure Kamakau’s use of ‘ohana to describe traditional land tenure practices. It casts the description in terms of commoners’ right to bury kin on ancestral lands rather than tenure per se, and is ambiguous about whether the object of the verb “inherited” is “love of the land” or “the land of one’s birth”.

With this right of the common people to the land is connected an inherent love of the land of one’s birth inherited from one’s ancestors, so that men do not [willingly] wander from place to place but remain on the land of their ancestors. (Kamakau 1992: 376)

A literal translation of this passage, kindly supplied by Kepā Maly, identifies the subject as tenure on the land. In addition, it translates Kamakau’s “mai nā kūpuna mai” as ‘from the ancestors down’, which neatly captures the sense of this common formula.

Here is something that should be made known, the native people/tenants had a tenure on the land. Families, and generations of families, from the ancestors down, did not wander about. That person and this person (each person) knew the foundation of their connection to the land, the legacy of their family on the land, being borne in each family from the ancestors down, that it was the native land of the ancestors.

The tradition of describing maka‘āinana land tenure in terms of the ‘ohana likely refers to its sense as a status associated with households of an ‘ili ‘āina. In any case, Kamakau’s words should dispel the notion that describing maka‘āinana land tenure in terms of the ‘ohana reflects a twentieth-century invention of tradition.

In contrast, there is ample reason to believe that the ambiguity in the description of the *'ohana* was due to the translation of informant testimony for publication. The discipline of anthropology in the first half of the twentieth century—the period during which Handy received his education and carried out fieldwork in Ka'ū—had yet to formulate key concepts required to describe land tenure practices in the Pacific or to settle on precise definitions for others. It wasn't until the second half of the twentieth century that anthropologists restricted the definition of kindred to an egocentric construct; when Handy and Puku'i were working, the term could be applied equally to a descent group defined by reference to a common ancestor and to the kin group reckoned in relation to a living individual (see Davenport 1959). Beyond this potential source of confusion, if Handy and Puku'i had looked to anthropology for a model of the descent group operative in *maka'āinana* land matters, they would have learned that corporate groups were formed along the principle of unilineal descent, reckoned through a line of mothers or a line of fathers, but not through mothers and fathers alike. At the time Handy and Puku'i carried out their work, anthropological theory lacked the concepts required for an unambiguous translation of their informants' testimony on land tenure and the *'ohana*.

Another ambiguity in the ethnographic reconstruction might stem from the same source. The description of the *haku 'āina* as one belonging to “a senior branch of the *'ohana*” (Handy and Puku'i 1958: 6) implies a “model of a ranked lineage associated with—if not the corporate proprietor of—an *'ili 'āina* land segment” (Sahlins 1992: 193). Nevertheless, when the insight from cognatic descent theory that corporate groups can be based on cognatic descent in combination with an additional criterion, such as co-residence, is acknowledged, it opens the possibility that a *haku 'āina* might be considered senior to his peers because his ancestors established membership in the *'ili 'āina* before the ancestors of his peers did so. A priority relationship of this type might be passed from one generation to the next as a simple fact, absent a deep genealogical warrant that, by some accounts, would have been unavailable to *maka'āinana* whose genealogical reckoning stopped at the grandparental generation. Thus, the description of *haku 'āina* as someone from a senior branch can be understood as a plausible reconstruction of social relations that does not refer to a ranked lineage.

Handy and Puku'i's ethnographic reconstruction, augmented by land court records from the Great Māhele, indicates that members of the *maka'āinana* category formed corporate groups through co-residence to steward named and bounded land parcels known as *'ili 'āina*. The term *'ili 'āina* occurs frequently in Māhele records as the locus of ancestral tenure claims that testify to the corporate nature of the groups that stewarded these lands. Nevertheless, proponents of the hypothesis that *maka'āinana* groups had yielded control of land to *ali'i* restrict the definition of *'ili 'āina*

to a subdivision of an ahupua'a and downplay or ignore the functional distinction drawn in the ethnographic reconstruction between the 'ili 'āina as the land worked by a corporate group and the ahupua'a as a tax district (e.g., Hommon 1976; 2013: 14, 225; Kirch 1992: 187; 2010: 49; Linnekin 1990: 88, 117). There is no doubt that the 'ili is defined in post-Māhele legal scholarship as a subdivision of the tax district (Lucas 1995: 40), and this is also how it is portrayed in accounts of the Māhele (Chinen 1958: 3–4). Nevertheless, nothing in this post-Māhele use contradicts the sense of 'ili 'āina as a corporate group associated with a named land parcel with demarcated boundaries. Rather, the post-Māhele use of 'ili 'āina simply focuses on its external relation with the status lineage.

One likely objection to this characterisation of 'ili 'āina as a term that refers to a land parcel and to the corporate group charged with its stewardship originates in the field of historical linguistics. Terms with this composite meaning are present in several West Polynesian languages but appear to be absent from the languages of East Polynesia (Marck 2000: 186). This difference between West and East might be more apparent than real. It is based on the definitions available to linguists, culled primarily from dictionaries that were compiled before anthropologists defined the concepts required to identify corporate cognatic descent groups. Indeed, historical linguists sometimes resort to “ethnographically extended glosses” in an attempt to remedy data quality issues such as these (e.g., Kirch and Green 2001). Nevertheless, the matter need not be left in limbo until it is resolved by historical linguistic analysis. On the contrary, it is the sociological association that distinguishes the specific term 'ili 'āina from the generic term 'āina 'land'. 'Ili 'āina refers indissolubly to the lands and resources of a corporate group charged with their stewardship.

#### LAND OWNERSHIP

According to the *Hawaiian Dictionary* (Pukui and Elbert 1986), the English word “owner” can be translated into Hawaiian as the English loan word 'ona 'owner', or by two other less specific terms, *mea* 'thing, person, etc.' and *haku* 'lord, master, overseer, etc.'. Ownership in the full western sense is a concept that first required its own word after westerners arrived. Economists define ownership as a bundle of five categories of rights, including access, withdrawal, management, exclusion and alienation (Ostrom 2000). Land matters in old Hawai'i have yet to be analysed according to these distinctions. Instead, scholars have argued that land ownership was vested in one or another of various entities, including the local domestic group, the status lineage and the gods, without explicitly considering which categories of ownership rights were active. The result in each case is a characterisation of traditional land tenure that accords partially with Handy

and Puku‘i’s ethnographic reconstruction. This section focuses on exclusion; it distinguishes property right claims to the exclusive use and enjoyment of a piece of land from right of person claims that one cannot be excluded from use and enjoyment of the land (see Bell 2004: 131–48). It reviews three proposals before advancing a fourth—that the social category of *maka‘āinana* incorporated to advance a property right claim to the productive lands of Hawai‘i to the exclusion of the outcast group known as *kauwā*.

A proposal that locates property right land claims with the local group and its head specifies the *haku ‘āina* as a “corporate proprietor” (Sahlins 1992: 193). If this proposal is correct and claims to an ‘*ili ‘āina* were indeed structured by claims that other *maka‘āinana* might be excluded from its use and enjoyment, then it is reasonable to conclude that Māhele testimony indicates “ancestral property rights were not shared equally. The domestic estate devolved on certain children only, often only one; others were obliged to affiliate elsewhere—or else ‘to seek a lord’ (*imi haku*)” (p. 178).

In this view, a member who left the ‘*ili ‘āina* to affiliate elsewhere might be characterised as “disenfranchised”, faced with the prospect of developing “an alternative strategy that allowed him to escape from destitution” (p. 204). The hypothesis of a property right claim to an ‘*ili ‘āina*, with its entailment of destitution failing inheritance, is illustrated with examples of *maka‘āinana* who moved out of the “ancestral estate”. These include a man, *Kauihou*, who moved away to live with affines, and another man, *Helela*, who moved in and out of the ancestral estate at various times to stay with affines and others for extended periods. *Kauihou* went on to become *haku ‘āina* after his father-in-law passed away, a status that *Helela* appears not to have achieved. Nevertheless, there is no evidence that either *Kauihou* or *Helela* lacked needed or desired possessions or resources that might indicate that moving from one ‘*ili ‘āina* to another, which according to the hypothesis left them disenfranchised, also left them destitute. A third example of two brothers who initially filed independent claims to approximately equal portions of the ancestral estate, but subsequently consolidated their claims in the name of the older brother, similarly lacks indication that the younger brother was thereby made destitute. When the Land Commission awarded the older brother’s consolidated claim, the younger brother was indeed disenfranchised, but it was the award itself and the imposition of property rights to individual land parcels by way of the Māhele that caused this and not some antecedent property right claim to an ‘*ili ‘āina*. In the absence of evidence for destitution, the examples cited in support of the hypothesis appear to illustrate, instead, lack of concern for property rights claims by *maka‘āinana*, who were exercising rights in a land tenure system in which mobility was both demonstrably common, as indicated by Māhele testimony, and arguably a feature of the system’s institutional design (Goodenough

1955). The claim that the land tenure system of the *maka'āinana* often resulted in disenfranchisement and destitution appears to be a projection of modern possessive individualism, where “[s]ociety is a series of relations between proprietors” (Macpherson 1962: 269), to a place and time that yields little evidence for it.

Another proposal holds that *maka'āinana* property rights had been replaced with a system of “overarching elite ownership ... [when] all land became the property of the conquering ruler” (Jennings and Earle 2016: 482–83). In this proposal, the “Hawaiian state created what were serfdoms, with farmers bound to land by law and not by lineage ... the bottom-up process of self-organizing was coopted by a top-down system aimed at surplus mobilization” (p. 483). The model for this interpretation of Hawaiian land tenure appears to be medieval Europe, where serfs were typically poor peasants who had subordinated themselves to a lord and upon whose manor they were dependent for access to land. In this context, the reference to farmers bound to land by law evokes a situation often found in Europe where the movement of serfs to the manor of another lord was discouraged and, in England at least, was effectively prevented for a time, and where a serf who desired to marry someone outside the manor required permission from the lord along with payment of a considerable fee (Bloch 1961: 255–74). The personal nature of the bond between serf and lord, the limitations to movement and association and the apparent concern of lords with the reproductive potential of servile women all contrast strongly with the ethnographic reconstruction, which indicates that *maka'āinana* were not serfs (Handy and Handy 1972: 373) but could associate with an *'ili 'āina* of their choice, were related to *ali'i* as members of an *'ili 'āina* and not as individuals, and were free to marry any other *maka'āinana*.

The “top-down system aimed at surplus mobilization” (Jennings and Earle 2016: 483) refers to the collection of surplus by *ali'i 'ai ahupua'a* and *konohiki* from *haku 'āina* as *corvées* and tribute in kind, part of which they sent to the king and another part of which they held back for their own support. This is an arrangement found around the world where the use of money is uncommon or unknown (Haldon 1993: 199–200). In Hawai'i, it appears to coexist with the “bottom-up process of self-organising”, rather than preempting it as the hypothesis predicts. *Māhele* records indicate that *ali'i* did make land tenure decisions that might formerly have been handled by *maka'āinana*—about half of the new tenures at Kawaihoa were awarded by *ali'i*, rather than *maka'āinana*, as described earlier—but this was during a period of population decline in the second quarter of the nineteenth century, when *'ili 'āina* would have faced labour recruitment difficulties that could have led to eviction for default of tribute obligations. Thus, *Māhele* records might indicate an elevated level of *ali'i* involvement in land tenure

(Linnekin 1990: 127). In addition, when ali‘i exchanged exclusive rights to the surplus product of an ahupua‘a, it was not unusual for lower-level agents to remain behind and settle down as maka‘āinana in order to work the land whose surplus product had supported them. Their lands were subsequently transmitted according to tradition and were not reassigned by an ali‘i (Sahlins 1992: 190). By this evidence, the “top-down system” appears to have had a limited effect on the “bottom-up process”. The serfdom model provides a partial fit to the Hawaiian situation and should be applied cautiously, with full awareness of the many differences between serfs and maka‘āinana.

A third proposal holds that

[I]and ‘ownership’ was a concept directly antithetical to all that the *Mō‘i* [king] represented and all that tradition empowered him to do. In traditional Hawai‘i, ‘Āina [land] was not owned but was held in trust. It was the *Akua*, or Gods, who had made the ‘Āina; if anyone, it was the *Akua* who owned the ‘Āina. (Kame‘eleihiwa 1992: 9–10)

If this proposal is correct that land was held in trust, then the land rights exercised by maka‘āinana were not property rights but were rights of person exercised in the capacity of trust beneficiary. In this view, the ‘ili ‘āina organisation described by the ethnographic reconstruction should exhibit the seven design principles of common-pool resource institutions: (i) clearly defined boundaries; (ii) congruence between appropriation and provision rules and local conditions; (iii) collective-choice arrangements; (iv) monitoring; (v) graduated sanctions; (vi) conflict-resolution mechanisms; and (vii) minimal recognition of rights to organise (Ostrom 1990: 90). The ‘ili ‘āina appears to meet these design criteria: (i) its boundaries were “carefully marked” (Handy and Handy 1972: 49); (ii) due to the mobility inherent in maka‘āinana tenures, the local work group might fluctuate in size and composition to respond to local conditions, and its work under a master with a long history of stewarding the ‘ili āina contributed to efficient allocation of labour and materials; (iii) the haku ‘āina “was no dictator but was subject to the advice and opinion of householders and of all other members ... concerned in or affected by decisions and enterprises” (Handy and Pukui 1958: 7); (iv, v, vi) monitoring, sanctioning and conflict resolution were all carried out within a small group organised as an extended family, which could shed or take on new members as needed; and (vii) ali‘i interacted with ‘ili ‘āina as integral units and appear not to have challenged the right of ‘ili āina to organise as they saw fit, provided tribute obligations were met. The proposal that land was held in trust and managed as a common-pool resource appears to fit well with the ethnographic reconstruction. In this view, a member of the maka‘āinana is a commoner in two senses: as one who has a joint right in common lands, and as one below the social rank of ali‘i.



Nevertheless, the proposal that ownership was vested in the gods for the exclusive use of all the people runs into the problem that kauwā were excluded from use and enjoyment of the land and were actively shunned by maka'āinana, who did use and enjoy it. This observation motivates a fourth proposal, that property right claims to land were exercised at the level of the unrestricted descent group (Goodenough 1955: 75), which in Hawai'i is represented by the social category of maka'āinana. The ethnographic reconstruction characterises kauwā as "outcasts compelled to live in a barren locality apart from the tribesmen or people 'belonging to the land' (*ma-ka-aina-na*)" (Handy and Puku'i 1958: 202) and indicates that maka'āinana members made extraordinary efforts to keep kauwā from exercising land rights associated with shares in the corporation, prescribing distinctive marks and dress for kauwā and prohibiting mating or marriage between maka'āinana and kauwā. The ethnographic reconstruction thus corroborates the proposal that the maka'āinana corporate group exercised a property right claim to land on behalf of its members that excluded kauwā.

\* \* \*

The case for Handy and Puku'i's ethnographic reconstruction in the light of cognatic descent theory identifies two corporate groups associated with land in Hawai'i. The larger of the two is a cognatic descent category known as maka'āinana that exercised a property right claim to land on behalf of its members. This claim was exclusive of kauwā, an outcast group that traditional accounts do not describe in detail. The maka'āinana managed land as a common property resource, the use and enjoyment of which was not denied its members. Members accessed land by associating with a smaller group that was incorporated to steward a named and bounded plot of land known as the 'ili 'āina. The criteria for associating with an 'ili 'āina were flexible and this led to a system capable of allocating labour and resources efficiently with respect to local conditions. Members of the 'ili 'āina typically worked under the direction of a master who was born and raised on the 'ili 'āina and had learned from its previous master how to manage the land. The maka'āinana with its constituent 'ili 'āina was an efficient organisation capable of producing a surplus beyond the subsistence needs of its members to sustain the ali'i status lineage.

Māhele records indicate the ali'i status lineage had made an inroad into maka'āinana management of land tenures, primarily to maintain or augment tribute production. The history of this inroad is obscure, although Hawaiian tradition suggests it expanded during the historic-era reigns of Kahekili and Kamehameha (Kamakau 1992: 376). An ali'i might disenfranchise an underproductive 'ili 'āina, forcing its members to associate with other

‘ili ‘āina and establish a new ‘ili ‘āina in its place. Nevertheless, the new ‘ili ‘āina was then managed and transmitted in the traditional way, *mai nā mākua mai*, provided it was able to produce sufficient tribute. Thus, *ali‘i* desire for tribute served to increase ‘ili ‘āina mobility, particularly during the historic era (Linnekin 1990: 127), but this was a temporary effect that did not fundamentally alter the corporate structure of the ‘ili ‘āina.

The ‘ili ‘āina met its end with the Māhele (Osorio 2002: 44–50). Statistics for a sample of 666 land claims illustrate the transition from the traditional commoner practice of transmitting tenure to ‘ili ‘āina *mai nā mākua mai*, to a newly proposed practice based on individual inheritance of property rights (Linnekin 1990: 193). Before the Māhele, 55 percent of claimants cited the traditional formulas to legitimate their claims. Afterwards, only three percent did so. Handy and Puku‘i recognised, at least in broad outline, that it was this corporation of commoners that the Māhele set out to dissolve and replace with land tenures based on possessive individualism. They speculated on what might have been the outcome of the Māhele had the grants been

as ‘*ili* or sections allocated to ‘*ohana*, represented legally by their respective *haku*, instead of as parcels (*kuleana*) in fee simple to individuals. Probably in most instances the *haku* would have been guided in decisions, planning and action by interest in the welfare of the whole ‘*ohana*: he would at least have been subject to the advice of the family council and of shrewd and hard-headed elders in particular. (Handy and Puku‘i 1958: 17)

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# MAKING MEDICINE CULTURAL IN RAPA

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**ABSTRACT:** The effectiveness of herbal medicines that are used to treat ordinary or naturalistic diseases in Rapa, French Polynesia, is not subject to supernatural explanation or to any known biochemical agent in the medicines themselves. Nor are the Rapans themselves able to explain the efficacy of their medicines. This raises the theoretical issue of how anthropologists may identify meanings of which the members of the culture are unaware. After addressing that issue, the three major types of diseases Rapans recognise are described. It is proposed that in Rapan culture the efficacy of herbal medicines to cure ordinary diseases is found in the many rules regulating medicine preparation and treatment.

*Keywords:* Rapa, indigenous medicine, culture-nature dichotomy, supernatural, religion, cultural rules

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Doing fieldwork in Rapa in 1964, one of my questions was how an indigenous medicine cures disease. Rapans could not answer the question, saying: “We do not know what goes on inside our bodies. Only God knows that.” The aims of this paper are two. The first is to give some ethnographic understanding of disease as it was conceived in Rapa at the time of my fieldwork and the medicines that are used to treat it.<sup>1</sup> The second is to investigate how, from the perspective of Rapan culture, herbal medicines cure disease—especially naturalistic or ordinary diseases. Note well that this is not to raise the question of whether Rapan medicines really cure disease. That question—the one of efficacy—is seriously vexed. It raises the questions of what counts culturally as a cure, whether it is appropriate to use tests derived from the western biomedical system to assess the effectiveness of Rapan medicine and many others (Waldram 2000). We will simply accept the Rapan conviction that their medicines do indeed cure disease, leaving aside issues such as what they mean by “cure” and how they prove it. The question remains: how do they think their herbal remedies contribute to a cure? Since they profess ignorance of that, this in turn raises the question of how the anthropologist can attribute an explanation to Rapan culture when Rapans themselves cannot articulate it.

To begin with that question, the alternatives seem to be to posit culture as a level of reality unto itself or to reduce culture to psychological and even biological characteristics of its native members as individuals. The first alternative, proposed by founding figures such as Comte ([1830]

2000) and Kroeber (1917: 210–12; 1919), enjoys relatively little currency in contemporary social science. It does, however, offer an answer to our problem by holding that even native members of a culture may be unaware of some of the “superorganic” characteristics of that culture.

The second alternative is gaining ground in contemporary social science, partly because it has the advantage of seeming “scientific” and is therefore more attractive to funding agencies (Duster 2006). It is consistent with the general shift in contemporary thought from collective theories such as socialism to the more individualistic neoliberalism (Kapferer 2004: 155) and is reflected in the current assumption that society is a ground for agents to contest, negotiate, dispute and even create social rules with the aim of advancing their own strategic pursuits (Just 2004: 186, see also 190). If we stop at psychological reductionism it initially seems that there is nothing in culture of which members are not aware, but Freud and other psychologists have stressed that we are not conscious of all, or even most, of our drives and inhibitions. And, of course, if we go beyond psychological reductionism to attribute customs and beliefs to genetic and other biological roots, there is much of which the individual is unaware.

In any event, my own way of dealing with the issue is that both of these views are mistaken (Hanson 1975: 1–13). Culture is not something that is reducible to psychology nor is it a level of reality transcending psychology. Instead, the difference reflects two perspectives on the *same* reality of ideas and meanings. The psychological perspective is concerned with how ideas and meanings relate to the individual’s motives, desires and inhibitions, while the cultural asks how those same ideas and meanings relate to each other. The latter is of concern here. The individual may not grasp how his or her actions or ideas relate to each other to form a system or coherent whole. This is obvious in linguistics, where a native speaker is able to form proper words and sentences but may not be capable of articulating the phonology or grammar of his or her language. This point is important to the present argument in several ways. First, ideas and meanings may form coherent wholes of which the individual is unaware. In the present case, this enables us to seek a theory of healing of which individual Rapans are ignorant. Second, ideas and meanings are not necessarily expressed in the form of verbal propositions. They can also be regularities of speech or behaviour. The relevance to the present case is that in the absence of Rapan explanations of how and why their medicines heal, we must turn to their behaviour with reference to the medicines. Third, we cannot simply make up the coherent whole we are seeking, nor the ideas and meanings pertinent to it. We must reason from public regularities in *their* behaviour. In the present case, we must develop the Rapan cultural theory of why healing is efficacious on the basis of overt Rapan behaviour. Then it is up to other scholars to judge if the public evidence is sufficient to sustain that theory.

## THE ISLAND AND ITS MEDICINES

Rapa sits about 1,100 km south-southeast of Tahiti and 480 km south of Ra'ivavae, its nearest inhabited neighbour. Below the Tropic of Capricorn, it is the most southern of all Polynesian islands except New Zealand. Rapa is some 37.5 km<sup>2</sup> in area, consisting of mountains circling the large bay that was the ancient volcanic crater. The population of something over 500 today lives almost entirely in two villages on either side of the bay.

The typical Rapan medicine consists of one or more plants crushed and mixed with water. This may be drunk and/or a bag containing the medicine stroked over the body, as is common with skin diseases. Nearly all medicines are classified as being hot or cold in temperature, and they are administered with a distinctive massage. The recipes of several medicines and the method of administering them will be described later in this paper.

With a few exceptions where a medicine is named for its main ingredient, each medicine is named for the illness it is used to treat. In 1964 Rapans spoke mainly Tahitian. The term for medicine in that language is *ra'au*, and the word for illness is *ma'i*. *Ra'au 'otu'i*, for example, is the medicine used to treat the *ma'i 'otu'i*. The set of symptoms they recognise as marking a disease is usually not congruent with those identifying a western disease. Rapans and Tahitians both distinguish between *ma'i Tahiti* 'Tahitian diseases' and *ma'i pōpa'a* 'white man's diseases',<sup>2</sup> and they may think that some of the illnesses they recognise afflict only Polynesians. Some of Mathilde Grand's sources in Tahiti were of that opinion (Grand 2004: 302–3).

Bernice P. Bishop Museum ethnographer John Stokes spent nine months in Rapa in 1921, some 40 years before my wife's and my research. He recorded that Rapan understandings of disease and medicine were poorly developed and that illness was primarily caused by ghosts. He wrote: "[A]t the present time the natives are generally a *varua* ['spirit']-ridden people. Nearly all their ailments and misfortunes are attributed to possession by these demons" (Stokes 1930: 872).<sup>3</sup> And further: "The present generation has no real knowledge of medicine or surgery. Everyone is his own doctor and the doctor for his friends ... In medicine, the method as explained is to try one thing after another until the cure is accomplished" (p. 809).

Whistler is in agreement with the idea both that in Polynesia most diseases are caused by spirits and that Polynesians try several medicines and reach their diagnosis on the basis of the medicine that cured the illness (1992: 20–27, 84). My findings, however, differed on both of these points. In 1964 I found that naturally caused diseases were more prevalent in Rapa than supernaturally caused ones. Moreover, Rapans did not try one medicine after another until they hit on a cure. They would do that only if they were unsure of the diagnosis. For the most part Rapans clearly diagnosed a plurality of illnesses from their symptoms and had herbal remedies that they were quite confident would cure them.



French ethnographer Christian Ghasarian carried out extensive fieldwork in Rapa 40 years after our work, making numerous trips to the island between 2001 and 2012. By that time western medicine had largely overcome the traditional system. Persons who were ill with a life-threatening disease were evacuated to Tahiti by helicopter, and from 1995 all pregnant women were expected to travel to Tahiti before the seventh month to give birth there (Ghasarian 2014: 175–78). Rapans in 1964 did recognise the merits of western medicine and would make use of the infirmary on the island (or anthropologists, who had aspirin, etc.). But, in common with Leeward Society Islanders (Hooper 1985: 161), their general opinion of western medicine was not high. They eschewed the infirmary and western-trained nurse stationed on the island to give birth at home attended by a local midwife, and they treated most illnesses with their native medicines. Even at the time of Ghasarian's more recent research, Rapans often used their traditional remedies before going to the western-oriented infirmary available on the island (Ghasarian 2014: 174, 181). His fieldwork is now 10 or 20 years old, and it is possible that increasing westernisation may have eroded the traditional medical system even further since the time he observed it.

While medicine was not a focus of his study, Ghasarian noted that the remnants of the indigenous medical system at the time of his research were similar, if greatly diminished, to what we observed. Both in 1964 and in the early twenty-first century medicines were owned by individuals, inherited usually from mother to daughter, and new ones were revealed in dreams (pp. 180–81). Most importantly, he describes a protective sentiment that Rapans feel toward their island which is fuelled, among other things, by a deep-seated fear of epidemic diseases introduced from the outside (pp. 434–44). Doubtless this is one of the reasons—together with a desire to keep the French from interfering with their communal land tenure system and opposition to the necessity of modifying the mountainscape of their island—why in the early twenty-first century most Rapans opposed the idea of building an airport on the island (pp. 436–39). If the arrival of a ship every two months brings the possibility of an epidemic, one can imagine the far greater concern evoked by an airplane arriving from the outside world much more frequently than that.

Of course, the fact that Rapans in 1964 did not know how their medicines heal does not mean they never knew. Rapa has a small population which was seriously devastated by epidemics, was converted to Christianity and has been subjected to colonial rule and European trade beginning in the nineteenth century and continuing to this day. It is possible that in the face of these forces against it an aboriginal theory that explained disease and curing has been lost. However, those forces themselves mitigate against

any attempt to excavate past meanings, and the lack of a theory in other Polynesian islands or in Rapa itself in the 1920s leaves us with no choice but to work with the data we do have.

#### TYPES OF DISEASE

Before turning specific attention to naturally caused diseases and the herbal medicines used to treat them, a brief account of disease in general as it is understood in Rapa will be helpful.<sup>4</sup> Rapans identify diseases of three major types.

##### *Epidemics*

First is the deadly diseases brought by outsiders against which they have poor immunity: smallpox, dysentery, dengue fever and the like (McArthur 1967: 307–9). Again and again in the nineteenth century diseases brought by visiting ships ravaged this remote Polynesian island. Again and again visitors remarked about the number of deaths and how the population was shrinking (Barff 1846; Darling 1836; Davies 1827: 331; Lucett 1851; Moerenhout 1837: 139). From European discovery in 1791 the population fell an estimated 90 percent to 120 in 1867. From there it began a slow growth to 362 at the time of our fieldwork in 1964, and 512 in 2012 (Ghasarian 2014: 246; Hanson 1970b: 30).

Visiting ships bring disease to this day (Ghasarian 2014: 334). There were several epidemics in the early 1960s; the last one that caused major deaths was measles that occurred in 1965, killing 14, of which half were children (p. 182). At the beginning of July 1964 we were witnesses to an epidemic that struck the island. It appeared to be a respiratory disorder and it occurred, as all epidemics do, in the wake of a visiting ship. Two children died, and many others were seriously ill. The Rapans were literally paralysed with fear. They isolated themselves in their houses, they did not prepare food, they did no work. My wife and I had never seen the daily routine grind to a halt as it did during those rainy first days of July.

Twentieth-century epidemics do not kill large numbers, but they remain an overload for the medical system. Rapans often do not even try to treat them, and there is little they can do for protection beyond secluding themselves and trying to minimise contact with the outside world.<sup>5</sup> Other diseases tend to strike people individually rather than as an epidemic, and people think they can successfully combat most of them.

##### *Supernatural Diseases*

The second type of Rapan disease is those caused by supernatural forces and beings. These include unspecified powers, probably the ghosts of the ancestors, that mete out punishment for a serious offence against the social

order. These powers are implacable, and their vengeance is swift. If one should attempt to move a boundary stone demarcating property lines—an act that virtually never occurs and is utterly unacceptable—the person will fall down, unable to move his or her limbs but still able to talk, and death occurs within half an hour of touching the stone. Illness of this sort is very rare; I encountered only one example in 11 months of fieldwork. The man confessed his crime, and died.

Disease might also be the result of the Christian God's punishment for sinful behaviour, often of a sexual nature. One example is a man who became utterly rigid after having seduced a young woman on the porch of the church. Another is how, a number of years before our fieldwork, a woman fell ill because she had been going to a place that visiting sailors frequented, ostensibly to do their laundry but actually to practise prostitution. Her illness was such that her stomach swelled alarmingly. She had recently taken communion, in conflict with the Rapan practice of refusing communion if one was carrying a grudge against another islander or had not confessed a sin. The cause of her illness, the pastor thundered, was God making the communion bread she had eaten swell inside her stomach. Illnesses caused by sin, while severe, are, however, amenable to cure, for God forgives. Normally sincere repentance and a treatment with a local medicine, often bolstered by a gift to the church, will suffice.

The final type of supernatural illness is caused by *tūpāpa'u* 'ghosts' who may possess and sicken individuals, either from a desire for revenge or because the ghost loves someone living to the point of wanting him or her to join them in death. *Tūpāpa'u* diseases are treated by a special category of healer called *tahu'a* 'expert'. In 1964 there was one *tahu'a* on Rapa, a woman.<sup>6</sup> She had a spirit familiar, itself a *tūpāpa'u* who died in Tahiti when she and her brother disappeared and their bodies never found. The Rapan *tahu'a* was related to the siblings by descent, and she inherited the *tūpāpa'u* from her father. The spirit familiar was essential to the *tahu'a*'s treatments. Her technique was to visit the patient, discuss the symptoms, and then go to sleep. Her spirit familiar would appear to her in a dream and tell her the medicine to use. It was prepared and administered, and according to the *tahu'a* the patient invariably recovered. The *tahu'a* was not entirely benign; she also said that her spirit familiar would kill someone if she ordered her to. She assured me that she had never done so and doubted whether *tahu'a* in Tahiti do so either.

The *tahu'a*'s medicines tended to feature western ingredients, or those not grown in Rapa. One was pancakes cooked in pork grease, which was used to expel a disease-causing *tūpāpa'u*. This may be effective during the preparation, before the patient even eats the pancake. Another medicine she owns uses scented coconut oil (which must be imported because coconuts do

not mature in Rapa's cooler climate). Other medicines were based on flour or sugar, or treating a headache by simply putting one's head under a flowing faucet. My closest informants had little confidence in the tahu'a in Rapa, and they tended to dismiss her cures. This is not to say that there was no respect for tahu'a in general. A famous one in Tahiti from the turn of the twentieth century was named Tiurai (July), and stories circulated among Tahitians, Rapans and others elsewhere about his miraculous exploits (Walker 1925). But there is no one like Tiurai in Tahiti now, and certainly no one in Rapa.

In Tahiti a dead body may be exhumed and burnt to stop a *tūpāpa'u* from attacking its relatives (Hanson 1961). In 1921 Rapans told Stokes that this was common in their own island but secret because it is against French law and hidden from the local gendarme. Stokes knew of four cases "within recent years" (1930: 962–63). In 1964 I was told it rarely if ever happens because they fear the consequences under French law.

Supernatural illnesses are readily intelligible. Like people, supernatural beings such as God and ghosts get angry, they seek vengeance, they can be driven away, they love and they might forgive. The illness is the manifestation of their anger, desire for vengeance or other human motive. The treatment—to drive out the offending ghost or to seek forgiveness—is also intelligible in human terms. Thus from an analytic point of view the causation and cure of these diseases is not very challenging. It is different with ordinary diseases, to which we now turn.

### *Ordinary Diseases*

Ordinary diseases are caused by the events of daily life, such as getting chilled just before menstruation is due, or they just happen, such as rashes on the skin of young children. These are what Society Islanders call *ma'i mau*, or "true sickness" (Hooper 1985: 163). Rapans include most injuries in this category of disorders. These illnesses and injuries are treated with a variety of herbal medicines described briefly above and examined now in more detail. After that I will attempt to discern how, from the point of view of Rapan culture, the herbal medicines bring about a cure.<sup>7</sup>

Informants could tell me something of the pathology of one (but only one) ordinary illness, although they did not fully know how the appropriate medicine cures it. That illness is 'otu'i.<sup>8</sup> Women regularly wade in cold water in everyday tasks such as working in an irrigated taro terrace or gathering shellfish in the water near shore. But if tasks such as these are undertaken immediately before menstruation is expected, a woman may be chilled and come down with 'otu'i. Her menstrual period does not come as expected, and she develops a serious pain in her abdomen. It slowly rises to her chest. Bedridden and in terrible pain, in the advanced stage she may retch or cough and blood may be produced. The Rapan explanation is that the blood

normally expelled in menstruation has clotted. The clot is the source of the pain, and by some anatomical route not explained to me it rises into her lungs, oesophagus or heart. The blood produced by her retching or coughing is really the menstrual blood, and when she gets to that state, she may die. Or, if it reaches the heart it may stop it, with equally dire results.

A word about Rapan beliefs regarding menstruation is in order. They believe blood is harboured in the uterus in liquid state. The uterus is an organ that opens and closes. Closed for most of the time, it opens for a brief period each month to allow blood to be expelled as menstrual flow.<sup>9</sup> In 'otu'i the chill before her menstrual period causes the blood to clot, and it cannot be expelled in the ordinary fashion.

The medicine used to treat 'otu'i is based on the *maire tutae moa*. This is a fern (*maire*) with a greyish excrescence that resembles chicken (*moa*) excrement (*tutae*).<sup>10</sup> Ra'au 'otu'i is a hot medicine. The fern is boiled in water and the patient drinks the hot concoction. Rapans could not explain the curative properties of the fern, but they did say that the sheer heat of the medicine is effective. They used the analogy of the beef or goat grease they use for cooking, which is stored in wine bottles. The grease solidifies in the bottle and they twirl it over a fire, causing some of the grease to melt and enabling them to pour it through the narrow neck. So it is, they said, with 'otu'i. Like solidified grease in a bottle, clotted menstrual blood cannot escape through the narrow vaginal passage. And again like grease in a bottle over the fire, the heat of the ra'au 'otu'i melts the menstrual blood and enables it to be expelled in the normal way.

While I could not discover a native explanation for how the *maire tutae moa* cures the disease, it may not be amiss to state that the same medicine is used to induce abortion. Indeed, some Rapan women who do not want to continue their pregnancies may ask the owner of the ra'au 'otu'i to administer it, claiming they have 'otu'i.

It is possible to give a historical dimension to a medicine for *hī* 'dysentery', for it is described by Stokes from his research in 1921, when he knew it as "Faaora's cure". Around 1895, during an epidemic of dysentery, a man named Faaora had a dream in which a deceased man, Akuore,<sup>11</sup> led him to an irrigated taro garden not far from the village of Ha'urei and showed him how to stir up the water from a spring feeding the garden. The water, mixed with red dirt, should then be drunk to cure dysentery. Faaora did not act upon the dream until later, when he himself fell ill and was cured by drinking the red dirt solution. Others with the same complaint would apply to Faaora to prepare the medicine for them, with good results. When Stokes himself fell ill with dysentery the Rapans urged him to take it (whether he did so is not recorded). It was a cold medicine, and hot food was forbidden while taking it (Stokes 1930: 883–85).

In 1964 ra'au hī was also a solution of the red dirt taken from an irrigated taro garden, drunk cold. My informant says it belongs to her sister, who was given it by their brother. She did not know if the brother dreamed it or was given it by someone else. Probably the brother was a descendant of the Faaora described by Stokes. Stressing that the dream featured a deceased person, Stokes assumed this medicine was a cure for ghost disease. But there is no evidence that the dysentery in question is caused by a tūpāpa'u intent on harming someone, and therefore I consider it to be an ordinary disease for which, as for others, the medicine was dreamed.

The presence of the same medicine in Stokes's work and my own allows some comparison between them. Then as in 1964, a new medicine is dreamed. But interestingly the deceased man in Faaora's dream was not related to Faaora, nor was theirs a particularly close relationship. And despite the fact that there was a dysentery epidemic at the time of the dream, it was only later (Stokes does not specify how much later), when Faaora himself fell ill, that he tried the medicine. Finally, at various times when he made it for others he did not follow his dream's directions exactly, taking the water from other taro gardens in the vicinity, and the results were still successful. Stokes attributes this to the fact that Faaora was less superstitious than most Rapans but does say that according to "strict Polynesian procedure Faaora should have followed instructions most rigidly" (1930: 884).

These facts contrast with the situation in 1964. To be sure, at both times the expectation was that a dream's instructions should be followed strictly, but in 1964 I found no cases where that was not the actual practice. Nor did I find cases where the dreamer was unrelated to the deceased individual of the dream, nor of the dreamer taking no immediate action. Indeed, it was stressed to me that someone was not only ill but literally at death's door when the dream took place. The medicine demonstrated in the dream by a beloved, deceased relative was prepared the next day and the cure was achieved.

An informant said hī was brought by visiting ships and could be lethal. In addition to drinking muddy water from a taro garden, one recipe is to pound three *ti* leaf stems (*Cordyline fruticosa*, known in Rapa as *karokaro*) in a cloth bag and squeeze into a glass. Mix that with two knuckles of water (they measure the depth of water by finger knuckles),<sup>12</sup> add a little sugar, strain and drink cold. The massage is done with the hands only. My informant guessed that in hī waste materials do not enter properly into the large intestine. She described this as *tāviri* 'ōpū 'the stomach twists and turns'.

Some medicines are given preventively as well as for a present illness. *He'a* and *īra* are widely recognised in Polynesia (Whistler 1992: 76). They are both illnesses that tend to affect nursing children; in Rapa the former is a rash and the latter produces fever and frequent, watery bowel movements. *He'a* may also affect breast milk, and lactating women may drink ra'au he'a

to clean their milk. Medicines for each of these illnesses take the form of herbs soaked in water. The water is then drunk and the child is stroked with a poultice of the medicine from head to toe until he or she is drenched. Both are classed as hot medicines, but ra'au he'a may be given lukewarm while ra'au ĩra is heated to boiling. Both are given preventively at the full or new moon or both, as is the case in the Cook Islands (Whistler 1992: 102). They both taste very bad, and children resist them, especially ra'au ĩra, perhaps because it is so hot. In one case I observed two adult women were required to hold a small child while ra'au ĩra was being administered.

Both he'a and ĩra are especially puzzling diseases because they have a variety of presentations that do not seem to be single diseases from our perspective. Hooper's expert informant listed four kinds of he'a in the Society Islands (Hooper 1985: 194–96), and there are two in Rapa. The rash may be similar to one of the four in the Societies, but the other is quite different. It affects adults rather than children, especially young women among whom it is a menstrual disorder caused by the uterus not opening properly to expel menstrual blood. It differs from 'otu'i in that there is no pain in the chest and apparently it is not fatal. The medicine for this variety of he'a is apparently owned by a woman who is not resident in Rapa, so no one there is allowed to make it.

As for ĩra, Whistler identifies seven kinds of ĩra in the Cook Islands (1992: 102), while Hooper's expert informant listed eight varieties of ĩra for the Society Islands, each with its specific name and symptoms ranging from a pain in one side of the face to swelling of the penis (Hooper 1985: 187–89). Both ĩra and hea (without the glottal stop) are mentioned for Tubuai, although Aitken makes no reference to soaking the child with the medicine (Aitken 1930: 86). Ra'au ĩra is also designated as a medicine in Rarotonga (Baddeley 1985: 137–38), although the recipe includes plants that do not grow in Rapa. In 1964 he'a and ĩra were probably the most common diseases treated with local medicines in Rapa.

*Fati* (*fasi* in Tonga) is the term when something is broken, either a bone or ligament or something inside the body (Whistler 1992: 41–44, 76). In Rapa two versions are identified. One is difficulty urinating, and the other is brought on by falling or otherwise injuring the body. Often the latter causes backache, and at least two medicines exist to ease this, one for the upper back and the other for the lower back. One is a topical analgesic made from the *kōpōro* (*Solanum anthropophagorum*), which warms the back. It can be made very hot by adding more *kōpōro* berries. It has certain anomalies that were not explained to me: unlike other medicines, this one is not owned, anyone can make it, and despite its heat-producing effect it is neither a hot nor a cold medicine. As with the application of the term ĩra to a variety of what appear to us to be disparate illnesses, I was unable to identify why the

term *fati* is applied to both difficulty urinating and a sore back. In both cases Rapans, who did not share my western compulsion to classify diseases by their symptoms and biochemical nature, did not consider the question as pressing as I did.<sup>13</sup>

Rapans, perhaps more than inhabitants of other islands, have a particular massage for each illness.<sup>14</sup> If the medicine is a poultice, that poultice is used in the massage. Both *he'a* and *īra*, as we have seen, feature a bag of the medicine stroked down from the head to the feet, very wet and, in the case of *ra'au īra*, very hot. *Ra'au tua mure* 'treatment for a bad back' involves a massage with the poultice applied in circular movements to the back. The medicine for earache has a poultice of chewed candlenut and another ingredient rubbed around the painful ear in a clockwise direction. *Ra'au 'otu'i* (treatment for when menstrual blood rises in the body) includes a massage of strong downward strokes using the hands only (no poultice of the medication) on the abdomen. This assists the menstrual clot to return to the uterus to be expelled in the normal way. One massage for *hī* is done with the hands only on the chest, arms and legs but never the abdomen. Stokes reports that Rapans would manipulate a baby for about a week to smooth out discrepancies in the head and limbs (1930: 755, 757), and Whistler reports the same thing for Polynesia in general (1992: 35). We did not witness that when we were in Rapa.

#### HOW DO HERBAL MEDICINES CURE?

Like Society Islanders (Hooper 1985: 163), Rapans were not inclined to speculate on causes, and they openly acknowledged that when it comes to an ordinary disease they do not know how the appropriate medicine cures it. Unlike supernatural diseases, they are not explicable by human emotions such as vengeance or forgiveness. The idea that the plants used have some biochemical effect did not come up: it seems not to be of interest to them, and my opinion is that the answer to our question does not lie there. They expected a medicine, if it is the correct one for the disease, to work immediately. Indeed, the cure might take place before the medicine is even taken, being achieved while the ingredients are being collected. (The patient will take the medicine anyway.) This could be possible, of course, only if it is assumed that the curing power of a medicine is something other than its biochemical effect. Moreover, Whistler reports that in different archipelagos the plants used in medicines change over time, and there is no consistency between medicinal plants and the diseases they are used to treat (1992: 40). Of the 59 plants he recorded as used as medicines in Sāmoa, two-thirds were also used in Tonga, but only a little over half were used in the same way (p. 64). Although one informant told me that a team of French scientists was analysing plants used in medicines in an effort of ascertain



their active ingredients, I think any such effort is likely to prove fruitless. It is a misguided effort to assess the curative powers of plants in the Rapan system of medicine by the standards of bioscientific medicine (Waldram 2000: 616). The power of herbal medicines in Rapan culture lies in something quite different than their pharmaceutical properties. Nonetheless, they have particular medicines for particular illnesses, and they are confident that the medicine will be efficacious. The question is why, and how.

Whistler states that in the Societies, the Cooks and elsewhere in Polynesia emphasis is placed on the treatment—the remedy or the medicine—rather than on the disease (1992: 45, 84, 92). On the basis of my material from Rapa, I think he is entirely right. But I think he is wrong in what I take his reason to be: that Polynesians are reduced to treating symptoms (rather than disease itself) as best they can with remedies revealed in dreams or used successfully by someone else because they are poor diagnosticians and experimentalists. This sounds ethnocentric. Our job is not to decide whether their approach is the most effective one according to our scientific criteria but to try to make sense of Rapan behaviour in its own terms.

If pressed, virtually every Rapan would give a religious explanation for how their medicines work. They are devout Protestant Christians, and they believe that they are in the hands of a loving God. They pray constantly: in the many church services that take place each week, before going deep-sea fishing every Saturday, before any communal activity such as meetings of the District Council, with cohabiting couples that church deacons wish would get married, with sick persons the deacons visit, and so on indefinitely. They discuss the implications of one or another biblical passage for their daily lives in *tuāro* 'i: sessions held several times a week in the church meeting house devoted to singing hymns and encouraging anyone in the audience to give his or her interpretation of the selected verse.<sup>15</sup> They know much more about the history of the ancient Israelites than they do about their own Polynesian ancestors. One man told me, “In Rapa we spend more time discussing the Bible than cultivating taro” (Hanson 1970b: 162–74). Omniscient and omnipotent, God backs the efficacy of their medicines.

For Rapans everything having to do with God is permeated with propriety: rules, a right way and a wrong way of doing things. God in that sense is precisely opposite from animals, the weather, disease and other workings of nature. God not only follows rules; Rapans would say that God is the source of rules. As with most humans they follow the rules because they believe God has ordained them. But, to take a Durkheimian turn, everything happens as if the rules come first and God is defined by them. God is brought into it to personify cultural rules and give them ultimate authority.

I stated above that people are not always able to articulate the structure of their language or of their culture. This does not mean that there is no structure;

it means that the linguist or the anthropologist must seek elsewhere to find that structure. In the present case, we must scrutinise regularities in their behaviour pertaining to illness and medicine. Rapans were unanimous that to work, a medicine must be prepared properly. It must use the same ingredients in the same proportions as the dream that revealed it or, for existing remedies, the recipe for it. It must be administered with the permission of its owner, and often by its owner. It must follow all the rules to be described below. In the light of this, I think the efficacy of medicines from the point of view of Rapan culture is due not to any curative agent in their herbal cures or to any supernatural reason but to the many cultural rules that surround treatment that must be followed.

Why are cultural rules so important to the efficacy of Rapan medicines? Rapan culture, as any human culture, gives a sense of order and intelligibility to life and the world, whether people fully understand it or not. Especially for those things they do not fully understand, human beings appreciate the eminently cultural quality of ritual sameness. This gives some predictability to the future: if things are done exactly as they have been done in the past, the likelihood is that the outcome will be similar to the past. If a medicine has been effective in curing in the past, it is likely that to prepare and apply it exactly like it has always been done will result again in a cure, even if people do not understand how the cure is effected. The rules, rather than any curative properties of a particular plant, are what gives Rapan medicines their power.

Medicines, as I have said, are entirely cultural. Ordinary diseases, on the other hand, are natural.<sup>16</sup> They strike randomly and for no reason; they conform to no rules. Lenore Manderson (1986: 140–43) applied the nature/culture opposition to hold that Malays understand disease, childhood and old age, menstruation, childbirth and puberty to be in the realm of nature, but that by classifying them according to their hot/cold theory Malays extend the realm of culture to include them. In this way Malays believe they exercise some control over these elements of nature. As with the Malays, but perhaps even more pronounced in Rapa, by clothing the medicines that treat them with rules, Rapans bring ordinary diseases into the realm governed by culture where they can be controlled and cured.

To enumerate the many ways in which cultural rules govern the preparation and use of medicines:

(i) New medicines are brought under the aegis of culture, as has been noted above, by being literally dreamed.<sup>17</sup> I was told numerous times about how an individual was seriously sick, near death, and no existing medicine was effective. Then someone close to the patient would dream that a deceased relative such as a grandmother showed him or (usually) her how to make a hitherto unknown medicine by gathering plants of certain sorts and preparing them in a certain manner. Upon waking the individual would make that

medicine and administer it to the patient. Immediately he or she would recover, and henceforth that medicine was known as effective for others who might contract that disease. Kinship and the ancestors figure prominently in these dreams in that they always come to a close relative of the patient, and the person in the dream is another close relative who is deceased. In making the medicine the dreamer must use the plants and procedures exactly as demonstrated in the dream, both the first time it is used and subsequently.<sup>18</sup> The idea that the ingredients are therapeutic in themselves does not come up at all. Instead the medicine's efficacy stems from the fact that it is imbued with culture by its near-ritual preparation and the critical place of kinship in the dream that revealed it.

(ii) Of course, medicines are not dreamed every time someone falls ill. Many have been in Rapa longer than anyone's memory, and some were brought from other islands when people married and moved to Rapa. The second cluster of evidence of their cultural quality relates to the fact that they are *owned*. Every medicine on Rapa has an owner, and it generally will be effective only if administered with the permission of the owner.<sup>19</sup> One manifestation of he'a is a menstrual disorder. The woman who owned the medicine for it was not resident in Rapa. The ingredients were known but her permission was necessary for the medicine to be effective. Often the owner not only gives permission but also responds to the request by personally preparing and administering the medicine. There is never a charge for this; it is a gift to the community. One woman in Rapa who was physically disabled and mentally limited owns the medicine for earache. It is made of the candlenut, two nuts of which must be chewed together with leaves of another plant and the juice spit in a cloth and squeezed into both ears (the good one as well as the aching one). Candlenut is nauseating and very few people can chew it. This woman was among those who can, and despite her disability she made a unique contribution to the Rapan community through her medicine. I was told that debts even out because everyone shares the medicines they own with the entire community. Rules regarding the ownership of medicines and the gratis sharing of them are both marks of their cultural quality.

(iii) Property may last longer than a single owner, and again medicine is imbued with culture by transmitting it through inheritance. In a society strongly marked by joint inheritance and communal ownership of lands, gardens and houses (see Hanson 1970b), interestingly the heir to a medicine is an individual, usually a female. Normally the transfer is made when the owner gets older and formally gives the medicine to one of her daughters. Most women on Rapa owned at least one medicine, and a few owned several.<sup>20</sup> Individuals, that is to say, are vehicles for the circulation of medicines in society and through the generations, but they are not the

source of them. Some are dreamed, the origin of others is unspecified or unknown, but all are owned,<sup>21</sup> and I have never heard of a medicine being invented by a human being.

(iv) If a medicine is to be effective, when the request for it comes the owner must drop everything and immediately go about preparing it. Sometimes instead of going her- or himself, the owner will ask a younger person (often a daughter) to gather the ingredients. The rules governing medicines decree that if the child dawdles or is distracted in the process, the medicine will not be effective. A child who goes immediately and allows nothing to distract her from gathering the ingredients will often be chosen to inherit the medicine.

(v) On occasion the owner of a medicine will become *fiu* 'tired, fed up' with preparing it, especially if numerous requests for it are made. In that case, the owner would make an announcement at a church meeting setting out the recipe and officially giving the medicine to anyone who wishes to make and use it. This is principally the case with medicines such as *ra'au he'a* and *ra'au ĩra* that were frequently administered to young children as preventive rather than curative. It is not common for Rapan medicines in general; only a few medicines are communally owned.

(vi) Linking the application of medicines for *ĩra* and *he'a* to the new and full moons is another rule that contributes to their cultural quality. This brings the medicines within the recognition of time and regularity, which is an expression of culture as opposed to the obliviousness to time that is characteristic of nature.

(vii) Rapan medicines are further brought into the realm of culture by being classified as hot or cold. This distinction is found in medical systems spread throughout the world. In Rapa it generates several rules that pertain to medicines. An individual should avoid anything of the opposite temperature when treated with a medicine. Thus one should not put one's hand in hot water when under treatment with a cold medicine. Nor should one smoke a cigarette, a hot activity, if treated by a cold medicine (although the addiction to tobacco was strong enough that this rule was often broken).

Most important is the rule that when under treatment with a medicine one should not eat food of the opposite temperature, apparently to avoid compromising the effectiveness of the medicine. Moreover, if a woman is lactating and her nursing child is being treated with a hot medicine, the mother as well as the child must eat only hot food. Temperature alone determines if a food or a medicine is hot or cold. For example, taro (the Rapan staple) is classed as a hot food if it is eaten hot, and as a cold food if it is eaten cold as with the ubiquitous *popoi* 'taro paste'.

(viii) A few other food prohibitions exist. Eating lobster was prohibited to lactating women, and some Rapans imagined that it may affect the nursing child's navel. Some informants said fish caught from the deep sea, lobster

and octopus constitute a trinity that is prohibited to people being treated with a cold medicine, others said the prohibition is for hot medicines, and still others said it applies to people taking any medicine at all. One woman opined that these foods are bitter, causing them to clog the uterus and thus prevent menstruation. Tahiti may provide a further clue, although the list of forbidden foods is somewhat different. There red meat, fish from the deep sea and crustaceans are thought by healers to irritate the internal organs because they are hot. They are prohibited to persons who suffer such irritations, and also to patients with a fever (Grand 2004: 305). As with medicines in general, however, Rapans followed the rule because it is a rule, but most of them frankly admit that they are at a loss when it comes to explaining why this trinity of foods is prohibited.

(ix) Their very susceptibility to contamination demonstrates that medicines belong uniquely to the realm of culture. One might vent one's anger by contaminating a medicine that an enemy owns. The recipes of most medicines are generally known, even if they were effective only when given with permission of the owner.<sup>22</sup> One way to contaminate a medicine was to prepare it in the proper way and then give it to a dog or a pig. A medicine is purely human, just as culture is purely human, and any use of it outside the human/cultural realm is antithetical and contaminating to it. Another method was to urinate on the medicine. Natural functions such as urination and defecation must be done far away from the medicine to avoid contaminating it. Again, as something entirely cultural, to associate it with anything natural is to destroy it.

Informants were of mixed opinion regarding sex and medicines, agreeing that one must not engage in intercourse while going to get ingredients, but disagreeing as to whether a patient being treated with a medicine could have intercourse. Their equivocal attitude toward sex is interesting. On the one hand, sexual intercourse is an act that belongs to nature, something we have in common with animals. On the other, culture domesticates sex, identifying when and where it may be practised and strictly limiting it to certain categories of people. This makes it something different from and more than animal sex. The disagreement among informants regarding sexual intercourse while being treated with a medicine mirrors this equivocation about whether sexual intercourse is a natural or a cultural act.

Tūpāpa'u diseases have already been discussed as being intelligible in terms of human sentiments and motivations. That said, they have much in common with the cultural aspects of ordinary medicines. The tahu'a's procedure of being told what medicine to use by her familiar tūpāpa'u in a dream is consistent with the notion that medicines for ordinary diseases are revealed in dreams. Dreams are even more important than with ordinary medicines in one sense, in that they were part of her standard practice rather

than being limited to the source of a new medicine. On the other hand, the ritualistic character of an ordinary medicine is cemented by it having been dreamed once and then prepared in exactly the same way in subsequent applications. The idea that medicines for *tūpāpa‘u* diseases are individually owned and inherited also fits with the cultural quality of medicine that we have been describing. Indeed, spirit familiars may themselves be inherited by individuals through kinship ties. Although the ingredients may be different, *tūpāpa‘u* medicine was still thought to be hot or cold and to be effective only if prescribed with the permission of the owner. It might even work, as with ordinary medicines, while the ingredients are being assembled and before the patient takes it. And finally, as with ordinary medicines, the *tahu‘a* was at a loss when asked to explain why her medicines drive out an offending *tūpāpa‘u* or otherwise bring about a cure.

\* \* \*

One of the most penetrating analyses of Polynesian medicine I have read is that by Hooper (1985: 179–83). He holds that illness and its healing has a moral aspect that is specifically tuned to the complex array of social relations that engulf rural Society Islanders, ranging from joint ownership of property to relations between relatives, friends and spouses. Sometimes people are offended, and the offender is liable to get sick. This applies especially to illnesses caused by avenging ghosts, who may be called upon by the injured party to punish the offender. These supernatural illnesses are explained by eminently human reasons such as the anger of God or the vengeance of a ghost. This interpretation fits personal relationships in Rapa, as well as most of Polynesia generally. However, given the facts that ghost diseases were relatively rare in Rapa when I was there and that I was more interested in ordinary diseases, my analysis is oriented toward how herbal medicines are thought to cure them.

This essay has stressed the many cultural rules governing medicines. Those rules include beliefs that they are revealed in dreams featuring beloved ancestors who demonstrate how relatives should be treated; their near-ritual preparation; their ownership, inheritance and occasionally being given as gifts to the entire community; their classification as either hot or cold; the foods that may and may not be eaten in conjunction with a medicine; and their contamination by exposing them to natural beings or functions. The argument has been that the eminently cultural quality of medicines, demonstrated by the many rules and conventions associated with them, is the source of their curative powers.

Ordinary diseases are representatives of nature. They do not happen because of a moral failing; they can strike anyone at any time, for no apparent

reason. In their effort to cope with the workings of arbitrary nature, Rapans place their faith in something that is knowable and reassuring, and that can even bring nature under their control. The cultural quality of medicines encourages such confidence. But for them, as for us, it is not fail-safe. Human beings wander in a natural world full of dangers, and nature is not entirely overcome by science or culture. A shark may kill a skin diver, a hurricane may strike, disease can cripple. But just as we think that the threat of disease is lessened by science, in Rapan culture its virulence is lessened by the many rules associated with medicine. This analysis has been that their medicines are indicative of the power of the rule-governed social order—of culture—to tame or domesticate naturalistic diseases and, often, to cure them.

## NOTES

1. Although this paper is mainly about Rapa in 1964, I will often use the present tense (the “ethnographic present”) to describe it. The context will make it clear when I am discussing Rapa of the early twenty-first century or of a time before my fieldwork.
2. Sāmoans make the same distinction between *ma'i sāmōa* ‘Sāmoan diseases’ and *ma'i pālāngi* ‘foreign diseases’ (Macpherson and Macpherson 1990: 89) and Tongans distinguish between *mahaki faka-Tonga* and *mahaki faka-Pālāngi* (Parsons 1985: 91–93).
3. The Stokes manuscript is maddening in that each page bears several numbers. I have used the numeration that seems to be the most consistent.
4. If not otherwise noted, the source of what is given below is my field journal.
5. The latter of course is and always has been impossible. Ghasarian’s book, as the title indicates, is precisely about the networks that make Rapa remote from the outside world but still part of it.
6. Actually there were two, but the second one was entirely inactive.
7. In Sāmoa an ordinary disease that does not respond to treatment might come to be thought to have a supernatural cause (Macpherson, pers. comm.). In Rapa the symptoms of supernatural diseases are quite different from ordinary diseases and I did not find this situation.
8. The closest I have been able to come to ‘otu’i in the literature on other islands is from a medical expert in the Leeward Society Islands (Hooper 1985). One of the illnesses he describes is *māriri ‘otu’i ate* (p. 189). This has symptoms of fever and pain inside the trunk of the body and the patient wanting to drink a great deal of water. The notion of internal pain seems to be the main link with ‘otu’i in Rapa. But menstruation is not mentioned in the description of the disease in the Leeward Societies while it is central to the Rapan case, and the medicines to treat the disease in the two places have nothing in common.
9. This has interesting implications for the Rapan theory of conception. See Hanson (1970a).
10. Maire tutae moa is known in Tahiti as *mairē metua pua’a*, which is defined by Jaussen as *Polydium nigrescens* (1949: 152) and Papy (1951–1954: 367)

as *Polypodium nigrescens*. Margaret Stokes identified some plants used as medicines. She identifies *mairi* (her spelling; *Polypodium phymatodes*) as a fern which is crushed, mixed with water and drunk cold as a purgative or as a hot bath for an aching body. She also identifies *mairituae* as *Polypodium phlegmaria*, which is the basis of a cold poultice for backache or headache (Stokes 1930: 812).

11. Or Ahuore; Stokes spells it both ways (1930: 883, 884).
12. This is the only utterly irrational notion I have ever encountered. The size of the container doesn't matter, be it a glass, a cooking pot or an oil drum. Two knuckles is two knuckles, and that's the end of it.
13. Hooper encountered a similar lack of concern among his informants when he tried to understand why a number of disparate illnesses were all called *ira* (1985: 172–73).
14. Whistler states that massage was universal in pre-European Polynesia and is commonly used today (1992: 35).
15. Prayers and Bible discussions continue to be common in Rapa today (Ghasarian 2014: 151).
16. The nature/culture distinction is not universal (Descola 2006, 2013), and Saura has claimed that it is unknown in French Polynesia (2008: 165, 201–6). Support for that view may be that certain natural species are said to act as protectors for the island, or for particular groups in it. Rapans do not kill or eat the large eels that live in their taro terraces and streams because “local people have a legend about a guardian spirit in the form of a blonde-haired woman who changes into an eel” (Anderson 2012: 42). This is presumably a *tāura* ‘animal protector’, which according to Saura is a vestige of ancient totemism (2008: 204–5). Ghasarian states that the Rapans knew of *tāura* when he conducted research there in the early twenty-first century (2014: 161–63), but I must admit that while I was aware that freshwater eels were not killed or eaten, I heard nothing in 1964 of the legend about the blond-haired woman nor did I encounter a belief in *tāura*.
17. Dreaming new medicines occurs in Rarotonga (Baddeley 1985: 137), Tubuai (Aitken 1930: 85), Tahiti (Grand 2004: 319) and Hawai'i (Whistler 1992: 114–15). In Rapa dreaming as a means of learning cultural skills is not limited to medicines. Elaborately woven hats are a Rapan specialty, and Christian Ghasarian tells me that the best hat maker in Rapa today was actually taught by a deceased aunt who demonstrated the craft to her in dreams (pers. comm.).
18. As described by Stokes (1930: 883–85), Faaora's cure is an exception to all these requirements.
19. Medicines are owned in the Society Islands (Hooper 1985: 170–71; Whistler 1992: 75, 84). Whistler also states that medicines are owned in the Cooks (p. 91), Sāmoa (p. 60) and possibly elsewhere in Polynesia (pp. 18, 101).
20. Women were owners of medicines in twenty-first century Rapa (Ghasarian 2014: 180), as elsewhere in Polynesia (Whistler 1992: 35).
21. The one exception is the analgesic medicine made from the *kōpōro* berry, described above.
22. In Sāmoa medicines, while owned, are often made by others who know the recipe (Whistler 1992: 61). This seems not to be the case in Rapa.



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## REVIEWS

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CHITHAM, Karl, Kolokesa U. Māhina-Tuai and Damian Skinner: *Crafting Aotearoa: A Cultural History of Making in New Zealand and the Wider Moana Oceania*. Wellington: Te Papa Press, 2019. 304 pp., biblio., illus., index, notes. NZ\$85.00 (hardcover).

BILLIE LYTHBERG  
*University of Auckland*

The introduction to the book under review begins with seven stories of craft. This review begins with one:

In 1923, a Māori medical doctor with a passion for plaiting, basketry and weaving was shown a netmaking technique, altogether new to him, by a proponent of *taonga puoro* ‘Māori musical instrument performance’. Just a year earlier, John Stokes of the Bernice Pauahi Bishop Museum in Hawai‘i had visited Aotearoa and met with the doctor to discuss his work on Māori weaving. The doctor would later become director of the Bishop Museum; we know him today as Te Rangihīroa/Sir Peter Buck (Ngāti Mutunga). His extensive archives at the Bishop Museum include a card catalogue detailing a life’s work of research into woven and other Pacific objects, in the field, in institutions and via posted letters, along with parcels of photographs and notes. A polymath of sorts, Te Rangihīroa is acknowledged for his roles and contributions as a doctor, military leader, health administrator, politician, anthropologist and museum director. He was also a maker.

Te Rangihīroa’s card catalogue includes detailed sketches and meticulous notes based on his observations, his comparisons with other objects and his particular “maker’s” method of unravelling and reconstructing weaving and lashing to discover connections and disjunctures in techniques. As Ioana Gordon-Smith quotes on page 141 in *Crafting Aotearoa*, Te Rangihīroa proposed that “[t]he question of diffusion [how cultures spread and change] has been confused by comparing end products which have been arrived at by different technical processes. Unless the technical details are similar, the end products cannot well be regarded as identical” (from *Samoa Material Culture*, 1930). By the 1930s, he had sorted close to 2,500 objects into categories of his own devising, weaving a new (old) system of classification spanning the makers—named and “unknown”, alive and long since passed—of the great Moana Nui a Kiwa (Pacific Ocean). The catalogue remains useful and in use today, an analogue database of which questions may be asked and from which connections can be deduced, suggested, tested and rejected. Te Rangihīroa was a maker and unmaker of not only plaited, woven and lashed objects but also sketches, connections and knowledge systems.

Nearly 100 years later, *Crafting Aotearoa: A Cultural History of Making in New Zealand and the Wider Moana Oceania* is similarly ambitious: a 460-page volume

comprising 13 chapters co-authored by the editors, along with shorter features by 67 guest writers. Reviewing the volume for *Art New Zealand* (Autumn 2020), David Eggleton described it not as a “comprehensive craft history” but rather “an editorial digest which captures a cultural moment: the iteration of a radiant iconography aggressively asserting the robustness of the applied and decorative arts in ‘Aotearoa’.”

It is, indeed, an assertive tome, masterminded by three of the country’s foremost formal experts in the history and present practice of craft/making/applied and decorative arts: Karl Chitham (Ngā Puhī), Kolokesa U. Māhina-Tuai and Damian Skinner, with prominent credit given to researcher Rigel Sorzano. The editorial triumvirate brings *mātauranga Māori* ‘Māori knowledge, world view’ into conversation with Tongan and Pākehā knowledge systems and practices, extrapolated out to the wider expanse of “Moana Oceania” and indeed the world, establishing an expansive remit reiterated in the book’s contributors and contributions. A reader expecting a history of “craft” in Aotearoa must immediately confront their own expectations of these categories and all that they connote, stretching to consider what’s at stake in trying to define or contain either the practice of making or the context of Aotearoa New Zealand. As the editors neatly summarise on page 16 in the final sentences of their introduction, “The many interactions and intersections between Māori, Pākehā and wider Moana Oceania [are] central to what this book sets out to achieve. Making—whatever term you use to describe it—has been crucial in establishing the conditions that have helped build the multicultural nation of Aotearoa. Craft is at the heart of this story.”

The publication is complemented by a series of 50 essays described as a “sister project” to the Te Papa Press book, hosted online by the Auckland War Memorial Museum, with some crossover of authors between the two collections. This arrangement demonstrates the support for the *Crafting Aotearoa* project of Aotearoa’s two largest museums along with the Blumhardt Foundation, the Kelliher Charitable Trust and Creative New Zealand, though the object catalogues reveal participation from many smaller institutions as well as private collections.

The book itself is a fine object, debossed with an *aute* ‘barkcloth’ work by Nikau Gabrielle Hindin (Te Rarawa, Ngā Puhī) depicting star navigation. It’s a bold choice for the cover, this recently revitalised Māori art of barkcloth making, and one which underpins the many stated goals of the volume, including to empower and privilege indigenous perspectives. Hindin is one of a tight group of makers who bring their own voices to their work. In a self-authored feature that was a highlight for me (pp. 64–65), Hindin discusses her research and making processes, and the cover artwork *Kuaka* (2019) is illustrated in its entirety.

Elsewhere, stalwarts of the GLAM (galleries, libraries, archives, and museums) and education sectors write impressively and at times lyrically in a volume predicated on a deliberate circularity, spiralling in and out of the past and present. The chapters are thematically driven, and their refusal to adhere to a linear chronology brings a currency to older works and practices, placing recent works and makers in a vast and impressive continuum. Collaborations between today’s makers, institutions and the “unknown makers” of objects in museums are brought to the fore; ancestors and descendants are on the same page.

It is this approach that reminds me so much of Te Rangihīroa's praxis. In a letter written from Hawai'i in 1928 to his *hoa aroha* 'beloved friend' Sir Apirana Ngata, published in the collection of their correspondence, *Na To Hoa Aroha* (vol. 1, p. 122), he described the approach he was taking to his own research, rejecting what he called the sorting of material culture and knowledge systems into "bottle[s] that have been labelled in the university class room and not in the field that the labeller never saw" and proposing to weave new baskets. By then he also knew that he might learn about netmaking from a musician.

In offering "A Cultural History of Making in New Zealand and the Wider Moana Oceania", *Crafting Aotearoa* also weaves a new basket, with enough gaps to breathe and enough tension to generate further discussion. While its expertise is indubitable it is also a treasure for the non-expert, who may yet find within its pages room for their own contribution.

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PUBLICATIONS RECEIVED\*

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January to March 2021

BALLANTYNE, Tony, Lachy Paterson and Angela Wanhalla (eds): *Indigenous Textual Cultures: Reading and Writing in the Age of Global Empire*. Durham and London: Duke University Press, 2020. 358 pp., bib., index, notes. US\$28.95 (softcover).

CONROY, John D.: *The Informal Economy in Development: Evidence from German, British and Australian New Guinea*. Canberra: Development Policy Centre, Australia National University, 2020. 406 pp., bib., index, maps, notes. Free download (e-book): <https://devpolicy.crawford.anu.edu.au/departments/news/18242/informal-economy-development-evidence-german-british-and-australian-new-guinea>

RICHARDS, Rhys: *Moriori: Origins, Lifestyles and Language*. Wellington: Paremata Press, 2018. 264 pp., bib., illus., index, maps, notes. NZ\$68.43 (softcover).

\* The inclusion of a publication in this list neither assumes nor precludes its subsequent review.

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NOTICE OF MEETING  
THE AGM OF THE POLYNESIAN SOCIETY (Inc.)

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8th July 2021  
James Henare Māori Research Centre, Building 225  
The University of Auckland  
18 Wynyard Street (off Alten Road), Auckland 1142  
Time: 5:00 PM

Dear Members,

You are invited to attend our Annual General Meeting to be held at the James Henare Māori Research Centre at 5:00 pm on Thursday July 8th. Items to be discussed include important revisions of the Society's rules.

Following the AGM, the Society will be presenting two medals at 7:00 pm (venue to be announced). The Elsdon Best Memorial Medal for "outstanding scholarly work on the New Zealand Māori" will be presented to Dr Ngāpare Hopa MNZM. The Rusiate Nayakacalou Medal for "recent significant publication on the Island Pacific relevant to the aims and purposes of the Polynesian Society and the interests and concerns of the late Dr Nayakacalou" will be awarded to Prof. Lisa Matisoo-Smith. Following the award presentations, Prof. Matisoo-Smith will be addressing the Society with a lecture on her research, entitled *What can DNA tell us about Pacific origins, interactions, and adaptations? – the value of transdisciplinary approaches*.

Further details on the AGM (agenda and papers) and the lecture will be made available on the Society's website: <http://www.thepolynesiansociety.org/jps/index.php/JPS/announcement>

Society members are encouraged to contact the Society at [JPS@auckland.ac.nz](mailto:JPS@auckland.ac.nz) to update your contact and subscription details.

On behalf of the President Dr Richard Benton

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