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Disruption and renewal in Samoa's health services: The role of humanitarians

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Disaster, disruption and coincidence in Western Samoa

- **1902 -1930 New Zealand: Two unique community – based health & maternal child health systems in Maori pas and settlements and NZ towns**
 - » First community based public health and MCH systems in the world
 - » The lasting life achievements of Dr Maui Pomare and Sir Truby King

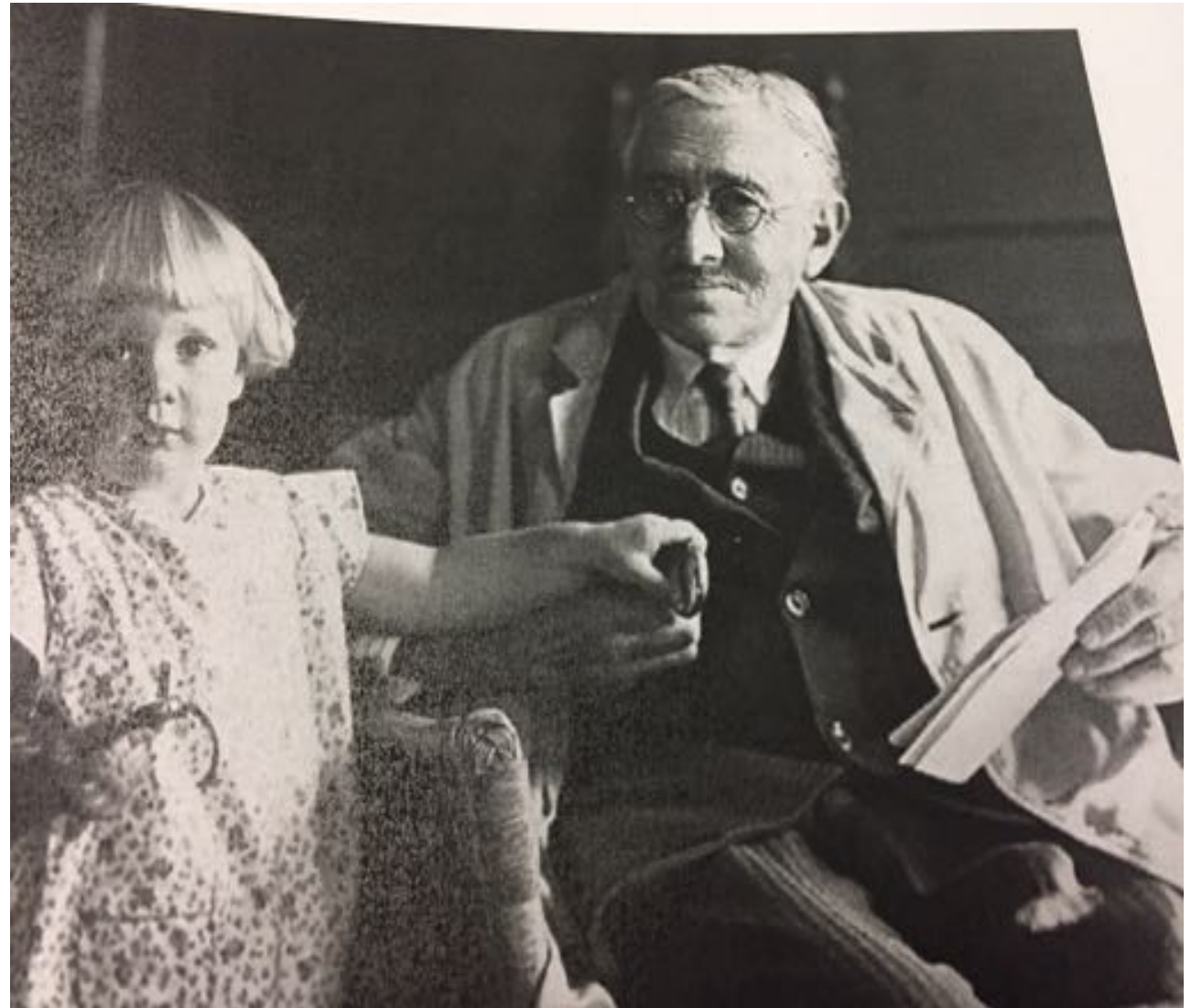
Result: NZ had lowest infant mortality rate in the world
- **1890 – 1914 Western Samoa: German control - no interest in improving health**
 - » Regular epidemics of measles, typhoid, whooping cough
 - » Very high infant mortality
- **1914: New Zealand took control of Samoa** – later a League of Nations Mandated Territory under NZ administration
- **1918/1919: Spanish Flu Pandemic in Samoa**
- **1920: NZ establishes community-based women’s MCH system in Samoa based on the Pomare/King models**

The Humanitarians in New Zealand

- **Dr Maui Pomare 1876-1930**
 - Maori community health, sanitation, hygiene
 - Toured Maori districts on foot advising and teaching about health, nutrition, maternal child health care
 - As Minister for Health responsible for developing a skilled Maori health workforce
 - Promoted Maori leaders as leaders in health
- **Sir Frederic Truby King -1938**
 - Responsible for dramatic improvements in maternal child health care – lowest infant mortality in the world
 - Established Karitane nurses and hospitals for mothers and babies
 - Began the Plunket Society and clinics to support new mothers and their babies – established creches



Dr Maui Pomare



Sir Truby King & friend

Humanitarians in Western Samoa

- **Dr T Russell Ritchie**
 - University of Otago 1910 - 1919
 - Army Medical Core – Gallipoli
 - Public health, community health
 - Chief Medical officer, Western Samoa 1920-28
- **Dr Robert Lyall Christie**
 - University of Otago 1910 - 1919
 - Army Medical Corp – Gallipoli
 - Army Medical Corp – France
 - Medical Officer Apia Hospital, Samoa 1922-1926
- **Dr Mabel Christie (nee Hanron)**
 - University of Otago 1915 - 1920
 - Baby Welfare Officer, Western Samoa 1922-1926
- **Dr Regina Flood Keyes**
 - American Red Cross Hospital surgeon, Greece, Crimea and Serbia 1917-1920
 - Western Samoa Maternal Child Health volunteer 1921-1926



k Row—II Will CS Fraser, GP Fitzgerald, RL Christie, N Cameron



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Establishing the Women's Health Committees

- Doctors adhered strictly to Samoan etiquette and recognition of traditional Samoan chiefly status
- Went on a series of traditional visits – or *malaga*
- Travelled with a high ranking orator or *tulafale*
- Addressed chiefs in their *fono* or meeting house
- Presented traditional gifts of pigs and fine mats in accordance with the perceived status of the village chiefs
- Discussed the health situation and what the chiefs thought could be done to improve it

Regina Flood Keyes 1926:6 Appendices to the Journals of the House of Representatives, Annual Report to the Department of Health, 1926

- ***Special efforts are being made to reduce infant mortality by systematic child welfare work And as much responsibility as possible will be thrown upon the Samoans to hold their interest and gain their cooperation... from my experience the women are anxious to learn.***

Mabel Christie, 1926:20 'Report on child and maternal health in Samoa', in *Appendices to the Journals of the House of Representatives, Wellington*

- Accompanied by an orator and translator, Mabel Christie walked, canoed and rode on horseback around much of Samoa where she:
- ***'....visited every village in five large districts, inspected babies and children ...and set up committees. 85 villages were visited in 1926 ... in all there were about 1,360 Samoan women of the women's committees actively engaged in assisting in the work of child welfare.'***



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Sylvester Lambert, Rockefeller Foundation, 1929, *Medical conditions in the South Pacific*, Australian Medical Publishing Co., Sydney

‘The Samoan Women’s Health Committees and their work are a brilliant illustration of the possibilities of preventive medicine.’



Why did the Samoan women's health committees succeed?

- Samoans recognised the need to save children's lives
- Established by humanitarian doctors concerned with women's and children's health
- Doctors understood and observed Samoan etiquette and ranking structure
- Made use of the ranking structure and of high status village women
- Maintained encouragement and assistance with regular visits and on-going training for women
- Regular praise for the women's work
- Accepted village adaptation of Committee structure

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