REVIEWS


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This is a potted social, demographic and health history of the Pacific community in New Zealand since the Second World War told through seven chapters and 80 pages, using tuberculosis as a starting point and something of a lens on the evolution of this community. This is a way of “telling our story” in Aotearoa as it evolves into the post-colonial multi-cultural society we know. Along the way it gives us an insight into the welfare state, the economy, and the changing social and cultural pattern as seen from the (disad)vantage point of a struggling and striving migrant group. What *Bro Town* and *Sione’s Wedding* have done in television and film story-telling with plenty of artistic licence, the academics are now following through—characteristically, of course, with more restraint and due scientific rigour and objectivity!

“Better Lives”—the short title—is the ninth in a Monograph series from Auckland’s Department of Anthropology. That series runs under the rubric of *Research in Anthropology and Linguistics* (RAL), it dates back more than a decade, and it seems to have had a largely national and regional focus. This is useful and painstaking work for the public record. This will win no academic or cinematic prizes, but it is necessary work along the lines of a social “observatory”, tracking our citizenry and telling their story. A fuller book-length social history treatment of the topic would be a worthwhile project for the future. The multi-disciplinary team drawn from anthropology, history, geography, population health, development and Pacific studies would surely be up for that.

Despite its predominantly documentary nature, there are some real insights here, some of them needing further development. One of the strong themes of the monograph is that the Pacific community needs to be seen as “transnational”. In other words, Aotearoa/New Zealand, as a nation of migrants within historical memory, is linked in to a network of human connections that span the near-Pacific. The nation state becomes a less meaningful unit of analysis in these circumstances. From a bleaker political economy perspective this can be seen as a network of transnational relationships of power and inequality. But looked at within a demographic, cultural and social framework, the concept has a more benign and human aspect, evoking a vision of multiple family and community exchanges of meaning.
A second theme is the use of a health condition—tuberculosis—as a lens or tracer for a consistent line of historical enquiry. This is a helpful and insightful approach since it provides us with a coherent story through social complexity over time, albeit from a particular perspective (the Pacific community). It is part of the social mosaic of the emerging urban New Zealand: the conditions of disadvantage, the circumstances of migration, inequality, race relations, cultural change and relations with the host society. But the concept loses its power over time as the condition—tuberculosis—no longer tells us a full story of the community as a lens or tracer, if it ever did. So the authors deploy the terminology of syndemics; with multiple conditions—diabetes and other health problems now dwarfing tuberculosis—we are entering a model with a complex and sophisticated relationship between health, biology and society. There may be a loss of human agency and too-ready a cession of ground to a disease perspective, but the emphasis on synergy and on the bigger picture of social change is a helpful corrective to a biomedical frame.

A third theme is a multi-faceted story of social history seen “from below”: the gentle and not-so-gentle decline in New Zealand’s social and economic circumstances; the hollowing out of many blue-collar occupations; the struggling welfare state; a transition from a culture of paternalism to one of greater mutual respect; the next-generation spectre of youth crime, health disability, and a potential urban underclass. It is difficult to tell this story without the risk of stereotype and fatalist futures, but it needs to be told.

There are two vignettes that exemplify these themes: the emergence of health services more oriented to the needs of Pacific peoples, and the adjustments made over time in the priorities and tenor of Pacific health research funding. If we look at the latter we can track the changing relationship between the Pacific community and the dominant scientific culture from the study of colonial exotica to an incipient migration story to the current syndemic picture of a complex and multi-cultural melange so typical of parts of New Zealand’s emerging urban landscape.

If there are elements missing in this volume they are texture, conceptualisation and a school or programme of research. I recently reviewed for the New Zealand Journal of Sociology an Otago University Press publication on the social history of a clutch of Dunedin suburbs that in their own way were also exemplary of an emerging social order in modern, post-colonial New Zealand. The book comes from years of teamwork involving the close analysis of secondary data and the contributions of multiple student theses and dissertations. This enterprise had texture, it had conceptualisation, and it reflected a distinct school or programme of research played over a quarter of a century of scholarship.

Our challenge is to project from the Otago model of integrated scholarship in history and the social sciences organised around one regional, pre-modern urban setting to the emerging modern, multi-cultural pattern that is contemporary urban New Zealand.