RESILIENCE AND DISASTER RECOVERY IN AMERICAN SAMOA: A CASE STUDY OF THE 2009 PACIFIC TSUNAMI

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Abstract

On September 29, 2009 an earthquake off the coast of American Samoa generated a tsunami that struck the islands minutes later. The local response to the physical impacts of the tsunami was swift and efficient, reflecting a core cultural competency of physical resilience. Cultural mechanisms for dealing with grief, however, proved insufficient in helping people manage the emotional trauma caused by the disaster. Groups within American Samoa are setting an example of how the culture can adapt by forging culturally grounded methods for addressing the emotional needs that arose in the tsunami’s wake. Outside aid was critically helpful in some respects, though the amount of aid received and methods of distribution resulted in a significant disruption of local response efforts, social networks, and village hierarchies. The unique experiences of special populations (the elderly and immigrants) are assessed. Events are analyzed through the lens of the social support deterioration deterrence model.
# Table of Contents

Abstract........................................................................................................................................ iv  
Introduction..................................................................................................................................... 1  

Literature Review............................................................................................................................ 4  
The impact of natural disasters outside of the continental United States ......................... 4  
Special populations......................................................................................................................... 10  
Community resilience and the role of social networks in disaster recovery ...................... 17  
American Samoa.......................................................................................................................... 23  
The Purpose of This Study.............................................................................................................. 28  

Methods......................................................................................................................................... 29  
Study design.................................................................................................................................... 29  
Data Analysis.................................................................................................................................. 34  
Validity........................................................................................................................................... 36  

Results........................................................................................................................................... 37  
Resilience......................................................................................................................................... 37  
Local Capacity and Outside Aid....................................................................................................... 54  
The Experience of the Tsunami for Special Populations.............................................................. 61  

Discussion..................................................................................................................................... 71  
The experience of special populations ......................................................................................... 73  
Reassessing the role of outside aid in non-Western cultural contexts...................................... 75  
Building Emotional Resilience in a Samoan Cultural Context..................................................... 80  
Posttraumatic stress in a Samoan cultural context......................................................................... 88  
Applying the Social Support Deterioration Deterrence Model as an analytical framework...... 95  
Activity settings theory.................................................................................................................... 100  
Limitations...................................................................................................................................... 104  
Recommendations for Future Research......................................................................................... 108  

Conclusion..................................................................................................................................... 110  

Appendix A: Map of the Samoan Islands...................................................................................... 125  
Appendix B: Interview questions..................................................................................................... 126  
Appendix C: Focus group questions............................................................................................... 128  
Appendix D: Oral consent form...................................................................................................... 129  
Appendix E: Personal stories of the tsunami ............................................................................... 130
List of Tables and Figures

Figure 1: The Social Support Deterioration Model ..................................19
Figure 2: Social Support Deterioration Deterrence Model .......................22
Figure 3: The Ceremonial Division of Food .............................................76
Table 1: Observed Criteria for Posttraumatic Stress Disorder ...................90
Figure 4: The tsunami’s Impact on Activity Settings ...............................103
Introduction

The threat of natural disasters in developing countries is increasing as a result of global climate change, and these changes are targeting populations that have the fewest resources with which to prepare for and recover from disasters when they do strike (Mendelsohn, Dinar, & Williams, 2006; Tol, Downing, Kuik, & Smith, 2004). Still, only a fraction of existing disaster research has been conducted outside of the continental United States (Norris, Baker, Murphy, & Kaniasty, 2005). While we are beginning to have a clearer understanding of concepts critical to disaster response and recovery in the continental United States, our knowledge of how these concepts (i.e., community resilience and the process and conceptions of long-term recovery) translate (or don’t) in other cultural contexts is very limited.

Disasters that strike in developing countries often occur in a complex context that includes ongoing development efforts by local and international organizations, resource limitations, social inequalities, and even active conflict. The consequences can be severe, and can significantly impact the cultural, economic, environmental, social, and constructed systems on which communities depend. It is imperative that we improve our understanding of how disasters impact communities and cultures that face these challenges, and then use that information to increase the efficiency and effectiveness of recovery efforts. If aid and recovery strategies are to be successful, they must be reflective of the existing local context, respectful of cultural practices and norms, supportive of local capacities, and sensitive to the expressed needs and recovery goals of the community in which they are operating.
The current paradigm of disaster response and recovery involves the direct management of response efforts by governmental or non-governmental organizations according to the policies and working systems of those organizations. It is largely dependent upon outside resources (donations from individuals or governments), and is time-bound (the responding organizations remain on the ground in the affected area for a set amount of time, and then move on). It is now widely accepted that climate change is likely to increase both the frequency and severity of natural disasters in coming years, and that developing countries (that have the fewest resources with which to respond) are most at risk. It is only a matter of time before the carrying capacity of the existing system is exceeded. While the world may generously respond for a time to a tsunami in Southeast Asia or a massive earthquake in Haiti, we cannot assume that external resources will be sufficient to meet the needs of disaster-affected communities throughout their recovery process. We must learn how to address the challenges of disaster response and recovery at the community level, how to leverage community capacity from the earliest stages of disaster response, and to use external resources to bolster and supplement local capacities.

There are many anecdotal examples of communities that have experienced a natural disaster but, for a variety of reasons, received few external resources to aid in recovery. This may be because they are politically isolated (Vidal, 2010), they are not in the media spotlight (Thompson, 2003), or they may be sub-communities that are marginalized or otherwise receive little notice (Venkateswaren, 2005). By studying how these communities have responded to and are recovering from the disaster we can also better understand the unique needs, challenges, and capacities of vulnerable groups (and
increase our understanding of how to support and assist them in times of disaster). In addition, we can learn how the disaster industry can more efficiently and effectively support affected communities by leveraging existing local resources and networks.

American Samoa is one example of an area that was recently devastated by a natural disaster. On September 29, 2009 a tsunami struck the Samoan islands, killing 34 people and destroying hundreds of homes in American Samoa ("Tsunami in Samoa, one year later," 2010). While American Samoa did receive some external aid, media reports and anecdotal evidence indicate that aid was limited and not distributed equally. While American Samoa is a territory of the United States, it remains largely independent of U.S. socioeconomic and cultural influence, and therefore, provides an excellent opportunity for understanding the impact of natural disasters and the process of disaster recovery outside of the continental United States. The focus on special populations provides new insights into the experience of marginalized sub-communities that experience major disasters and are left to face the recovery process with limited external support. The findings of this research, then, are relevant beyond this specific community.

The purpose of this study was to increase our understanding of the disaster recovery process in non-Western cultural settings by documenting the lived experiences of residents of American Samoa during and after the tsunami of 2009. I hoped to gain insight into how communities draw upon existing resources and local capacities in the recovery process, thereby providing clues as to how aid organizations can better support these existing systems.

We know from the disaster literature that the elderly and immigrants are considered to be particularly vulnerable in natural disasters (see Aguirre & Quarantelli,
2008; Kilijanek & Drabek, 1979; Norris, VanLandingham, & Vu, 2009; Pekovic, Seff, & Rothman, 2007; Sanders, Bowie, & Bowie, 2003). The elderly and immigrants from Independent Samoa, we can presume, experienced the tsunami and the subsequent aid and relief efforts in a way that was distinct from the experience of the general population. Their experience is shaped and impacted by their social and political status, culture, and social networks, among other factors.

**Literature Review**

**The impact of natural disasters outside of the continental United States**

This section will discuss the current literature on the impact of natural disasters on communities in non-Western cultural contexts. Specifically, I will discuss findings related to leveraging local capacities and resources, ways in which outside aid is often ill suited to the local context, and account for specific vulnerabilities faced by disaster victims in developing countries.

**Local capacity.** There is widespread agreement in both the disaster and development literature that supporting and building local capacity before, during, and after a major disaster is critical to the well being of any community. However, aid and relief efforts often fail to reflect this principle in practice, especially in the immediate aftermath of a disaster. In a review of the role of aid agencies after the 2004 Asian tsunami, Telford & Cosgrave (2007) state that “International agencies tended to ignore and ‘mis-recognize’ local capacities in the early stages, and only later looked for local organizations to help with recovery” (p. 17). Some practices of international aid agencies actively undermine local capacity, such as the recruitment or “poaching” of staff from
local organizations during emergencies (Telford & Cosgrave, 2007). Interventions that fail to recognize local capacities are not well received and may even stymie long-term recovery after a disaster. Again from Telford & Cosgrave:

… the early recovery phase saw cases of poor transparency on the part of aid agencies toward affected populations, unfulfilled promises and an undervaluing of national and local capacities. These were tantamount, according to some reports, to an undermining of those actors and their rightful ‘ownership’ of the response. (2007, p. 10)

There is evidence of success in interventions that do leverage local capacity. In a study of the impact of the 2004 tsunami in Thailand, Paton, et al. (2008) found that the capacity of Thai communities to adapt to adverse circumstances had developed through the context of their routine community activities, rather than through any specific disaster training. The authors state, “Building on naturally-occurring capacities increases the likelihood that some level of adaptive capacity will be sustained over time in ways that accommodate community characteristics (such as livelihood, size, and administrative arrangements), needs and expectations…” (p. 116). In Aceh, Kenny (2007) documented the successes of local Islamic NGO’s in building community capacity. Defining capacity building in terms of community development, these local organizations were able to work with the community to define goals and priorities and to determine what help was needed from outside sources.

**Ill-fitting aid and recovery strategies.** The use of top-down, ill-fitting aid and recovery strategies is documented in the literature, along with the consequences of these practices (see Berke, Chuenpagdee, Juntarashote, & Chang, 2008; Telford & Cosgrave, 2007; Thorburn, 2009). Often aid programs fail to achieve their stated goals because the type of aid and/or the delivery methods used do not match the expressed needs of the
affected community. The expressed needs of disaster victims vary according to geography and culture, and change according to the amount of time that has elapsed since the disaster. Housing is often a key concern for disaster victims, though questions of the type of housing needed, decisions by survivors of where, whether, and when to leave their homes, and the process used for rebuilding are all culture-specific and critical to a successful recovery process. In a survey designed to identify perceptions of the effectiveness of aid programs in post-Tsunami Aceh, Thorburn (2009) asked villagers to identify aid programs that they had found to be most beneficial, least beneficial, and those that failed to deliver on promises. Housing topped the list in all three categories. Other studies have demonstrated considerable variation in terms of victims’ decision-making with regard to leaving their homes after a disaster. The government of Turkey established tent camps after the 1999 earthquake, but many people still chose to live on the side of the road or in makeshift shelters near their (damaged) homes (Daley, Karpati, & Sheik, 2001). Rashid (2000) found that residents of urban slums in Bangladesh chose to remain in their homes rather than abandoning their possessions, even though their homes had been destroyed by floods and there were no longer any available sanitation facilities. Clearly one size does not fit all when it comes to understanding the housing needs of affected communities.

Telford & Cosgrave (2007) conducted an evaluation of the international response to the 2004 Indian Ocean tsunami, and found that a lack of local and contextual knowledge among the international disaster response community resulted in wasted resources, duplication of efforts, errors in implementation, and the exclusion of some groups of people. A study of disaster resiliency in Thailand (Berke, et al., 2008) provided
community-level evidence of this by documenting cases of physical and cultural mismatches between local need and aid, particularly in regard to housing. Houses were rebuilt on stilts and with stronger materials than the houses that were destroyed by the tsunami, but did not take into account, for example, the inability of older and physically disabled people to climb the steep stairs into their newly built homes. The frustration of the local community from this process is evident in the words of a local official who stated, “How can [the elderly and disabled] go up the stairs? It is as if it meant for them to commit suicide (p. 312).” Barenstein (2006) studied local perception of five different approaches to housing reconstruction in the aftermath of the January 26, 2001 earthquake in Gujarat, India. She states:

… in a context where people are traditionally involved in building their own dwellings, given adequate financial and technical support they have the capacity to construct houses that are more likely to respond to their needs and preferences than houses provided by outside agencies. The study confirms many of the drawbacks and risks associated with a contractor-driven approach: inflexibility, cultural insensitivity, failure to adapt to local conditions, and a tendency to introduce external construction materials ill-suited to the local climate, and which are difficult to maintain and upgrade. (p. 25)

While housing is often among the highest priorities for disaster survivors, this issue of mismatched aid is evident in other areas as well. Berke, et al.(2008) found that villagers in Thailand reported receiving large amounts of unusable aid in the form of fishing and boating supplies. An elder in the village stated, “if only they asked the receiver first… they need nets but are given traps… why don’t they ask the people what they need (p. 313)?” Similarly, fishermen in post-tsunami Aceh reported receiving aid in the form of boats that could not be used:

Most of the aid we received isn’t appropriate for fishermen here, like the boats and the engines. In the past, the old men used small boats, but we’ve been
provided with these big boats and engines. We can’t even get them out to sea most of the time. It’s a lot worse because the estuary is so much shallower now since the tsunami. (Thorburn, 2009, p. 92)

**Unique vulnerabilities of disaster victims in developing countries.** Like these fishermen, individuals living in resource poor areas and communities that are largely resource self-sufficient are uniquely vulnerable to the impacts of natural disasters. This was the stark reality faced by rural migrants living in urban slums in Bangladesh in 1998. That year massive flooding submerged two thirds of the country (which is essentially a series of large river deltas) in water, and the flooding persisted for over two months (Rashid, 2000). Rashid (2000) discussed the unique vulnerabilities of Bangladesh’s urban poor, highlighting their dependence on jobs (daily wages), which disappeared as a result of the flooding, and their practice of buying food daily. Their rural counterparts, in comparison, fared considerably better in the floods, as they were able to draw on shared assets and stored food.

This example shows that perhaps one of the greatest threats posed by natural disasters in developing countries is the threat to the livelihoods of victims. No community can be expected to recover from a disaster if the basic systems of income, commerce, and production on which the community depends are not reestablished. Of course, in developing countries, these sources of income and provision tend to be fragile to begin with, often based on micro loans (which must be repaid in a timely manner if the borrower is to maintain access to the credit needed to keep their business operating), subsistence agriculture (chronically threatened by a variety of weather related and ecological hazards), or other similarly tenuous endeavors.
The need to reestablish sources of livelihoods is well established and transcends geographic boundaries. After the 2004 tsunami a coalition of local NGO’s in India, the East Coast Development Forum (ECDF), played a leading role in recovery efforts, with livelihood recovery being a primary focus (Kilby, 2008). Based on a perceived disparity in official aid of livelihood recovery programs for women (most aid delivery programs focused on restoring basic infrastructure and the fishing industry, both typically male-oriented professions), ECDF focused their efforts on micro loan programs for women.¹

It was the rural poor who suffered unexpected (and largely unaddressed) consequences from Hurricane Mitch in Honduras in 1998. Morris et al. (2002) surveyed households outside of the worst-affected regions of Honduras to determine the level of asset loss due to the storm and to inventory aid received in these areas. They found that one third of households reported lost income due to extensive crop damage. The poorest of the poor (those in the lowest income quintile) lost 18% of their pre-hurricane assets in the storm, but only recovered 10% of their losses through aid programs. While Nicaragua received a large amount of aid and recovery funding, it did not extend to the areas outside of the most heavily impacted regions, though significant losses were incurred outside of these areas.

¹ It should be noted that micro credit and micro lending programs, while increasingly popular in international development, remain controversial as a form of intervention. While they do often increase the household income of participants, there is also evidence that they often also increase the (already burdensome) workload of women heads of household and girls, and have mixed impacts on overall well-being as women are often not permitted to manage and allocate the household funds, even if they are the ones responsible for the earnings (see J. Hunt & Kasyanathan, 2001; Montgomery, 1996; Rogaly, 1996).
**Special populations**

When natural disasters strike, whole communities are impacted. However, there are certain populations within a community that are uniquely vulnerable in disaster situations, or whose ability to recover after the disaster is limited by their circumstances. The most vulnerable populations vary according to geography and culture, but often include women and children, people living in conflict zones, and people with physical disabilities. In American Samoa, the vulnerable populations include the elderly and immigrants from Independent Samoa. This review of the literature on the impact of disasters on special populations will focus on these two groups, drawing on examples from the continental US and, when possible, less developed countries.

**The elderly as a special population.** This section will describe: 1) the psychosocial impact of disasters on the elderly, and 2) the unique needs and vulnerabilities of elderly disaster survivors. One caveat is that as is true of disaster research generally, most of the research that has been conducted on the elderly in disasters has been conducted in the continental U.S. or in other westernized countries. Therefore, most of what we know about the experiences of the elderly in disasters is known in a limited context only. While research from the US can certainly provide a useful starting point for understanding the experience of disasters by elderly persons in other cultural settings, some fundamental challenges do arise. For example, there are varying definitions of “elderly” within the literature. The identification of an individual as ‘elderly’ in the western literature varies, with some studies classifying anyone over the age of 55 as being elderly, while other studies use 60 or 65 years of age as the cutoff.
point; others subdivide further into several tiers of old age (Fernandez, Byard, Lin, Benson, & Barbera, 2002).

However, when examining the disaster experiences in differing cultural and development contexts, a single, age-based definition is not useful. Life expectancies vary widely across cultures, and disparate access to advanced medical care and nutritious food directly impact the length of life and frailty of the aged. In areas with lower life expectancies, where ‘old age’ may begin as early as one’s forties, elderly persons may be faced with a unique set of challenges during and after a disaster. As Kohn et al. (2005) explain:

…those reaching the age of 60 [in developing countries] may be those that were able to survive the health hazards of underdevelopment. Therefore, the differential vulnerability may indeed be reversed. Alternately, the elderly affected by a disaster in a developing country may be placed at further risk by the relative unavailability of resources to provide rapid reconstruction where younger populations may be favored. (p. 839)

Regarding the psychosocial impact of disasters on the elderly, the literature is contradictory. While some studies have shown the elderly to be at increased risk for psychopathology (Norris, Kaniasty, Conrad, Inman, & Murphy, 2002) others have indicated that they are equally at risk as compared to other adults (Kohn, et al., 2005). A number of theories have been developed to explain the mental health risks faced by older adults in disasters, and have been tested in the literature with mixed results. For example, the Inoculation Hypothesis states that the elderly develop skills to cope with stressors based on past experience, and therefore, are less at risk for psychological distress from disasters. Norris & Murrell (1998) provided support for the inoculation hypothesis by demonstrating that older adults who had previously experienced flooding fared better
than those who had not. More recent research, however, has been less supportive of this theory. Knight, Gatz, Heller & Bengtson (2000) found only partial support for the theory among older adults in the Los Angeles area after an earthquake in 1994. They found that, while previous experience with earthquakes was associated with lower levels of depression after this event, it had no effect on on-going personal reflection about the quake. Other studies have found evidence to contradict the inoculation hypothesis; Data from a study of the psychological impacts of technological disasters found no difference among age groups in incidence of post-traumatic stress (Chung, Werrett, Easthope, & Farmer, 2004), while a study of elderly residents in Poland found that the skills and experiences that the elderly had developed to cope with stressful situations were no longer helpful after the country experienced a dramatic post-Cold War socio-political shift (Norris, et al., 2002).

Other attempts at explaining the psychosocial impacts of disasters on older adults include the Buffering Hypothesis and the Main Effects Model, both of which attempt to explain the relationship between stressors and social support. The Buffering Hypothesis suggests that individuals with strong social support are (or should be) more capable of coping with crises (Cobb, 1979 as cited in Tyler, 2006), while the Main Effects model states that the positive effects of social support on well-being are independent of stress (Russell & Cutrona, 1991 as cited in Tyler, 2006).

Developed in part as an explanation for the lack of clear results surrounding the previously discussed models, the social support deterioration model is well represented and well supported in the literature. In the context of natural disasters, this model describes a phenomenon in which victims’ levels of perceived support (the belief that
help will be available when needed) and social embeddedness (the number and type of relationships a victim has) declines after a disaster when the expected support does not materialize, or is not sufficient to match the scope and duration of the disaster’s impact (Krzysztof & Norris, 1995). Decreases in levels of perceived support and social embeddedness have negative impacts on the psychological well being of victims. Studies on the impacts of natural disasters on the elderly have supported this model; a study of the impact of the 1993 Midwest floods on older adults (aged 55 to 90) found that flood exposure resulted in a decrease in perception of social support after the disaster (Tyler, 2006). Similarly, a longitudinal study of older adult victims (aged 55 and older) of major flooding in Kentucky in 1981 found that the floods decreased social support (specifically social embeddedness, and perceived support from family- and non-family sources), and that the decrease in social support in turn partially accounted for psychological distress experienced by victims.

Although the literature on the psychosocial impact of disasters on the elderly may be contradictory, there is widespread agreement that the elderly do face a unique set of vulnerabilities in disaster situations. The elderly are often physically vulnerable in disaster situations due to limited mobility, limited sensory awareness, or health-related problems (see Pekovic, et al., 2007 and Kilijanek & Drabek, 1979). They also face unique economic challenges; lower or less flexible incomes may make recovery much less feasible (Kilijanek & Drabek, 1979). The loss of independence or disruption in daily activities is frequently cited in the literature as a point of vulnerability. Elderly people who had been relocated after their neighborhood was badly damaged by Hurricane Andrew cited an inability to perform daily activities (including laundry, cooking, bathing,
and walking to the grocery store) as a key reason for wanting to their original homes, even if those homes had been damaged by the storm (Sanders, et al., 2003). For the elderly, the disruption of routines can mean significant losses in terms of their ability to perform daily activities independently, and this loss of independence translates into a reduced quality of life.

Not only are the elderly uniquely vulnerable in disasters, they are also less likely to receive help after a disaster strikes. Kilijanek & Drabek (1979) found that older victims received aid less frequently and from fewer sources than those in other age groups after tornadoes struck Topeka, Kansas in the mid-1960’s. Trainer & Bolin (1975, as cited in Kilijanek & Drabek, 1979) found a similar pattern among the elderly victims of an earthquake in Nicaragua, while Sanders, Bowie & Bowie (2003) identified disparities in aid received among elderly African-American victims of Hurricane Andrew. The elderly may face a similar disparity in their access to social support resources: for victims of Hurricane Hugo, levels of received support decreased as age increased (Kaniasty & Norris, 1995). Kaniasty & Norris (1999) found that older adults whose lives or health were threatened by a disaster were provided with the support they needed through their social networks, whereas those whose losses were only tangible (such as property damage) tended to have their needs neglected.

However, as stated previously, these seemingly minor disruptions seem to be the very issues that are of greatest importance to the elderly. Phifer (1990) found that “outreach efforts were most effective when they took the form of assisting older victims with the various practical problems arising during the crisis, such as their needs for housing, medical care, material aid, and social services rather than focusing on ‘feelings’
or ‘mental health problems.’” One study focused on identifying the needs and priorities of elderly disaster survivors found, for example, that the elderly place more emphasis on the loss of or damage to their homes, gardens, and trees than their younger counterparts (Kilijanek & Drabek, 1979). Explanations offered for this phenomenon include a decreased ability to replace the lost items, an inability to qualify for loans to rebuild their homes due to age and/or fixed incomes, and discomfort with accepting aid (see Kilijanek & Drabek, 1979 and Bolin & Knenow, 1983). Interestingly, a study of elderly victims of tornados in Texas found that, while the elderly did not sustain greater losses to their physical property than their younger counterparts, they did consistently perceive their losses as being greater (Bolin & Knenow, 1983).

**Immigrants as a special population.** Immigrants face many of the same challenges and vulnerabilities as other special populations in disaster situations, but they also face a unique set of vulnerabilities due to their status as immigrants. Take, for example, the immigrants and undocumented workers who were killed in the 9/11 terrorist attacks in New York City. After the attacks, aid programs were established to support victims’ families. While these programs did not specifically exclude the families of illegal immigrants from receiving benefits, they did have requirements that assumed the deceased had social identities in the United States, and that their families could produce requisite documents, such as court-issued death certificates, to prove it (Aguirre & Quarantelli, 2008; Bolin & Knenow, 1983). Similarly, after an earthquake in Newcastle, Australia immigrants who were non-native English speakers were found to have higher levels of morbidity (both related to the event and independent of it), but were not more likely than their native-born counterparts to visit a doctor or use other available support.
services (Webster, McDonald, Lewin, & Carr, 1995). As another example, consider the dilemma faced by illegal immigrants in California during the Whittier Narrows earthquake of 1987. While aid was universally available to all people impacted by the quake, many immigrants did not receive aid because it would have required them to enter an area staffed by government officials, and to provide proof of identity to the organization through which that aid was being distributed. For these individuals, the risks of legal action or deportation outweighed the benefits of aid (Rubin & Palm, 1987).

While not a popular topic in the literature, a small number of studies have been conducted in recent years on the experiences of immigrants in the wake of a disaster. After Hurricane Katrina in New Orleans, Vietnamese immigrants, (almost all of whom had come from the same three villages in Vietnam) and their families managed to recover and rebuild with very little outside help and very little political clout. The key to their success was the central role played by the church prior to Katrina, which served not only as a religious center, but also as a social center, taking a leadership role in social events, community redevelopment projects, and other community-wide initiatives. In the days after Katrina, this pre-existing social structure not only facilitated the physical rebuilding of the community, but also served as a social center of gravity, of sorts, convincing community members to return and rebuild, rather than relocating to other parts of the country (see Airriess, Li, Leong, Chen, & Keith, 2008; and Chamlee-Wright & Storr, 2009). A separate study of the same population (Norris, VanLandingham, et al., 2009) did, however, find that symptoms of PTSD were higher among those Vietnamese immigrants who were less adapted to the host culture.
Other victims of Hurricane Katrina did not fare so well. After the storm, waves of internally displaced persons (“Katrina refugees”) fled to various cities across the country, either looking for temporary shelter or a permanent place to relocate. A study of how these refugees, most of whom were African-American with low socioeconomic status, were received in cities with African-American populations below the national average showed that while the refugees were welcomed in the days immediately following the disaster, they soon came to be seen as a threat both physically (threatening limited economic resources) and culturally (threatening to the communities’ values and practices) (J. S. Hunt, Armenta, Seifert, & Snowden, 2009).

Strug & Mason (2007) studied the impact of the 9/11 terrorist attacks on New York City on elderly Chinese and Hispanic immigrants. They found significant cultural differences in the responses of the two groups, particularly related to the feelings experienced in the aftermath of the attacks and in the coping mechanisms used; Chinese respondents reported feeling “disbelief, hopelessness, intense fear, and sadness (p. 31),” where Hispanic respondents reported feeling “acute distress (p. 33)” and experiencing “intense physical reactions (p. 33).” In terms of coping strategies, Chinese respondents sought support from social networks (such as senior centers) and found comfort in discussion their concerns among their peers; Hispanic respondents coped by increasing church attendance and found comfort in a belief that the attacks were part of God’s plan.

Community resilience and the role of social networks in disaster recovery

The concept of resilience has frequently been applied in the disaster literature as a means of understanding how and by what means individuals and communities respond to
and recover from catastrophic events. While the concept of community resilience is distinct from that of resilience in an individual, the two are closely related, and we can learn a great deal from the literature on individual resilience. Most notably, several studies on an individual’s resilience to traumatic events have demonstrated that resilience, rather than being a rare or extraordinary response to trauma, is actually very common, or even the norm. Norris, Tracy & Galea (2009) while differentiating between resistance (virtually no negative impacts), resilience (a speedy “bouncing-back”), and recovery (when a period of short-term negative impacts is followed by a gradual return to normal functioning), found that the majority of participants who experienced either devastating flooding in Mexico or the 9/11 terrorist attacks in New York City experienced one of these three positive outcomes (78% in Mexico and 72% in New York City): remarkably high success rates given the severity of these events. As stated by Mancini & Bonanno (2006):

There is now substantial evidence that resilience to interpersonal loss or violent or life-threatening events is neither a reflection of extraordinary coping abilities nor a pathological inability to experience the pain of loss. Rather, resilience appears to be a normative expression of the human capacity to cope with and even thrive after the most extreme life events. (p. 976)

For the purposes of this study, resilience provides a conceptual framework through which we can better identify the local mechanisms and processes associated with recovery in American Samoa. While the literature offers many definitions of community resilience, it is generally considered to be the adaptive capacity of a community or, alternately, a linked network of adaptive capacities including economic development, social capital, information and communication, and community competence (Norris, Stevens, Pfefferbaum, Wyche, & Pfefferbaum, 2008). While the specific definitions vary,
it is widely agreed that social networks and social support are a crucial determinant of resilient communities (see Kaniasty & Norris, 1993; Norris, et al., 2008; Paton, et al., 2008).

Social support has been defined as “Those social interactions that provide individuals with actual assistance and embed them into a web of social relationships perceived to be loving, caring, and readily available in times of need” (Norris, Murphy, Kaniasty, Perilla, & Ortis, 2001, p. 470). Social support is typically considered to have three components: received support (support actually received by victims), perceived support (the support a victims expects to receive or assumes to be available), and social embeddedness (a measure of an individual’s relationships within a community). It should be noted that perceived and received support are largely independent variables, and perceived support has been shown to be most critical to the psychological well-being of disaster victims (Norris & Kaniasty, 1996).

Disasters and other community-wide events frequently result in decreased levels of social support in the affected community. A study of the effects of flooding on
perceived social support and social embeddedness in two towns in Mexico in which received support was minimal found that, even six month post-event, levels of perceived support and social embeddedness were still below normal for that region (Norris, et al., 2005). A study of elderly flood victims in Kentucky demonstrated that, in addition to the impact on individual losses of social support, *community* losses that disrupt normal social functioning (such as environmental and structural damages that prevents community members from attending religious services, engaging in recreational activities, or shopping) also erode levels of perceived social support, specifically social embeddedness and support from non-family members (Kaniasty & Norris, 1993). However, Norris & Kaniasty (1996) demonstrated that this decrease in perceived social support is not inevitable; it can be countered by sufficient levels of received support in communities that have the capacity to mobilize sufficient levels of social support.

The social support deterioration (SSD) model and the social support deterioration deterrence (SSDD) model have been shown to be useful platforms for analyzing disaster response and recovery at the community level. The social support deterioration model has been successfully applied in disaster situations and asserts that post-disaster psychological distress is related decreases in social support. After a stressful event such as a natural disaster, affected communities often experience uncharacteristically high levels of altruism and helping behavior in the form of received (actual) support. This response, however, is typically short-lived, and is followed by marked decreases in perceived support and social embeddedness.

Kaniasty and Norris (1993) demonstrated that the erosion of social support mediates the impact of the disaster stressor on psychological well being. In a study of
elderly flood victims in Kentucky, the authors examined the role of social embeddedness, social support from kin, and social support from non-kin on the short- and long-term impact of a severe flood. They found that perceptions of non-kin support mediated the influence of disaster stress on depressive symptoms. A decrease in social embeddedness was found to mediate stress related to community destruction. Decreases in social support accounted for the impact of the disaster on the victim’s psychological state. Figure 1 illustrates this process. Social supports, when in place, can guard against the detrimental effects of stressor, but without those supports in place, victims are vulnerable to psychological distress.

The social support deterioration deterrence model posits that this deterioration in social support is not inevitable, but can be counteracted by sufficient levels of received support. Figure 2, adapted from Kaniasty and Norris (1999), illustrates the social support deterioration deterrence model. Path A represents the direct influence of the disaster on psychological distress. This can be caused by a variety of factors including exposure to death, injury, or life-threatening situations. Path B represents the (received) support that is mobilized post-disaster. As mention above, however, this support is typically fades before the stress of the disaster ends. As support begins to deteriorate (Path C), people soon realize that “their losses and psychological trauma are accompanied by social disruption, interpersonal conflict, and a depletion available support” (Kaniasty & Norris, 1999, p. 53).

This deterioration can be counteracted, however, if level of perceived support is adequate: if the amount of support received is seen as being adequate, then survivors have no cause to adjust their perceptions of available support (Path D). Path E, then,
illustrates the process of deterioration deterrence (support mobilization combined with adequate received support). In Path E we see that disasters can directly (though experiences of horror, loss, and the like) and indirectly (through the depletion of social support, or through the protective role of sustained social support) influence the psychological well being of disaster survivors. Received support is not believed to have any direct effect on distress. In a test of the SSDD model, Norris & Kaniasty (1996) demonstrated that over time, the indirect effects of disasters on distress are more salient than the direct effects. The indirect path was composed of the effect of the disaster on survivors’ perceptions of support (Path C) and the general, protective effect of perceived support on mental health (Path F).
Finally, the literature also has something to teach us about how and where communities seek support after a disaster; research has shown that, in both individualistic and collectivist cultures, and in several distinct ethnic groups, across cultures, people are most comfortable seeking help from family members, then from friends, and that they are least comfortable seeking help from outsiders (Kaniasty & Norris, 2000). Given this knowledge, response and recovery efforts should seek to provide help through the channels from which victims are most comfortable seeking and receiving it.

**American Samoa**

In understanding the events that occurred during and after the tsunami of 2009 it is helpful to understand a bit about the history and cultural context of American Samoa. To begin, it should be noted that American Samoa and Independent Samoa (formerly Western Samoa, and still referred to as Western Samoa by many of my participants) are separate political entities, but this distinction is very recent and is primarily a political, rather than cultural, one. The islands shared a cultural and political history until late in the 19th century. By the 1870's Samoa was embroiled in a political tug-of-war between the United States, Germany, and the United Kingdom. Disagreements among these nations eventually resulted in a brief civil war in Samoa from 1898-99 ("Samoan Civil War 1898-1899," 2000). Fighting ended with the signing of the Tripartite Treaty in 1899. Much like the Berlin Conference had done to Africa in 1884, the Tripartite Treaty arbitrarily divided the group of Islands into two distinct political entities without regard for their shared culture and history; the eastern Islands became a protectorate of the United States (now known as American Samoa), while the remaining islands became a
German colony ("Cultural History of American Samoa," n.d.). American Samoa remains a US territory today. The German colony was taken over by New Zealand at the beginning of World War I, and then eventually gained full independence as Western Samoa in 1962. Western Samoa officially changed its name to Samoa in 1997, and is now commonly referred to as “Independent Samoa” in order to distinguish it from its American counterpart ("A Brief History," 2004). See Appendix A for a map of the Samoan islands.

While American Samoa is a territory of the United States, much of the indigenous cultural systems remain intact. Samoan cultural practices have proven remarkably resilient in the face of outside influence, as evidenced by the modern political history of the islands. Though American Samoa experienced a stretch of outside administration it was never colonized in the tradition of the European colonial powers, and the US managed to implement only limited society-wide interventions. Go (2007) tells the following story of the governor appointed over American Samoa at the turn of the last century, when the United States was establishing its rights over the new territory:

When governor Tilley tried to first secure consent to American sovereignty from Manua chiefs, he noted hesitance on their part. The Tui Manua [ruling chief of Manua] welcomed Tilley “but at the same time giving me plainly to understand that he did not wish any interference with his ‘kingdom’ by any outside power…” In response, Tilley declared: “There is no intention to disturb your quiet, peaceful living, or interfere with your property or affairs. We do not want your lands or anything you have unless we buy them with your consent.” After this declaration, the chiefs finally accepted the new arrangement. (p. 89)

Tilley made the decision to appoint existing chiefs as political leaders in the new government, rather than attempting to dismantle or replace the existing system. Not until 1920 were public schools established in American Samoa, after what Foreign Affairs
magazine reported as an unusual episode of “native unrest” (Blakeslee, 1928-1929). The major US influence on American Samoa has been military; it was originally annexed for use as a naval base, and during World War II the base was expanded and the navy was the dominant employer for males (Pearson, 1992).

Even a cursory examination of Samoan culture will reveal that the culture and society hinge on two very powerful institutions: the family (‘aiga) system, and the system of chiefs (matai). The matai system is incredibly complex (for a detailed explanation see Shore, 1982). Suffice to say that each family unit has a matai (generally male) who is empowered, depending on their specific rank and status within the larger social hierarchy, to make decisions on behalf of the family, settle family disputes, manage land and property, and the like. The ‘aiga – or family – refers to members of the extended family, and includes relatives by birth, marriage, and adoption (Fitzgerald & Howard, 1990).

Family connections, too, survived the political history, such that families often have members living in both Independent and American Samoa. A study by Fitzgerald & Howard (1990) found that households in American Samoa have an average of about 8 inhabitants, and house members of two or three generations.

I think that American Samoa can best be characterized as being American and Samoan, rather a blend of the two cultures. It is at once very American and very Samoan. The complexity this creates is non-trivial. Howard (1986) explains:

The viewpoint is based on an assumption that contemporary Samoans represent a collectivity of individuals attempting to cope with an increasingly complex milieu. Their world is no simple mix of things Samoan and Western. At one level their world is dominated by legal, political, occupational, and educational institutions imposed by the prevailing American … social system, albeit with modifications of a particularly Samoan nature. At another level Samoans are affected by the cultural prescriptions of fa’a Samoa, and by the norms generated
within local communities, within work groups, and extended families. These relate to ways of speaking, using time and space, and behaving toward various categories of people, and they influence the organization of daily routines. (p. 396)

A notable cultural difference between the U.S. and American Samoa is that Samoan culture is collectivist in nature. Poasa, Mallinckrodt, & Suzuki (2000) demonstrated this in a study of Samoan responses to vignettes dealing with family conflict. They found that, in explaining behavior and assigning blame to characters in the vignettes, responses from Samoan young adults reflected their social position and status and often placed blame on higher social authorities for a failure to develop and enforce policies that would have addressed the problems described in the stories.

Still, there is some evidence that cultural changes are beginning to occur. Fitzgerald & Howard (1990) found that families in American Samoa have become increasingly fragmented as people move to urban areas or abroad. Some have expressed a level of dissatisfaction with the matai system, and membership in village organizations is reportedly low (only 30.8% for men and 13% for women, as compared to 100% and 93.8% in Independent Samoa, respectively). While the elderly continue to enjoy a position of high status there is evidence that attitudes toward the elderly are beginning to shift as well; Pearson (1992) found, for example, that young people in American Samoa were less likely than adults to report that the elderly contribute to household well-being daily, and several respondents admitted to withholding portions of their earnings from their parents even though family members are expected to work for the well-being of the entire extended family (Furuto, Fu, & Mata'afa, 1998).
On the topic of disasters, it is interesting to note that the Samoan term disaster is *fa’alavelave*. This term, which according to my participants translates roughly as *interruption*, is also the term used to describe birthdays, weddings, a death in the family – essentially any event that disrupts the flow of daily life, whether expected or unexpected.

**History of natural disasters.** American Samoa is no stranger to natural disasters. In addition to the tsunami in 2009, the most recent major events were Cyclones Ofa (1990) and Val (1991). Studies on the social impacts of these and other disasters are limited. Paulson (1993) conducted a study of the response to Cyclone Ofa in Independent Samoa. While some households were more vulnerable and suffered more than others, remaining resources were sufficiently redistributed so that there were no signs of malnutrition among any villagers nine months after the storm. Paulson (Paulson, 1993) observed a strong, community-based recovery effort and attributed the “self-help” response in the villages to the strength of existing social institutions.

It should be noted that “community cohesion” in this case has something of a twist: it is a cohesion reinforced by rules and edicts passed down through the *matai* system and other social institutions. For example, the mayor of one of the villages required all men to plant additional taro to compensate for lost crops. The women inspected yards, and any that were found to be unkempt were subject to a fine (Paulson, 1993). This practice of fining for social infractions is also described by Shore (1982) who lists such acts as failing to attend church, being outside after curfew, or failure to have sufficient provisions on hand to entertain guests as being punishable by fines. This, of course, does not reduce its value in any way, but it is helpful to note that the societal differences impact the interpretation of concepts such as this one.
The Purpose of This Study

The human impact of natural disasters has been a popular topic in the literature for the several decades. However, researchers have only recently begun to study the impact of disasters on communities outside on the United States and Western Europe. The work that has been done in this area has demonstrated that existing models of disaster response and recovery are culture-bound, and more work must be done if we are to effectively respond to disasters in non-Western cultural settings. While there may be an underlying belief that post-disaster communities are capable of guiding their own recovery process, response efforts often fail to reflect this belief in practice. More research is needed to understand the experience of disasters in diverse cultural contexts, and to gain insight into how communities draw upon existing resources and local capacities in the recovery process. Additionally, while we are beginning to understand the psychological impacts of social support quite well, less attention has been given to the role of social support and social embeddedness (and, by extension, resilience) at the community level, and their role in the recovery process.

The purpose of this study is to contribute to the existing literature on disaster response and recovery in non-Western cultural settings by documenting the lived experiences of residents of American Samoa during and after the tsunami of 2009. While American Samoa is a territory of the United States, it remains largely independent of U.S. socioeconomic and cultural influence, and the indigenous cultural systems remain intact. The tsunami in American Samoa, therefore, provides an excellent opportunity for understanding the impact of natural disasters and the process of disaster recovery outside of the continental United States. There is a particular focus on the interplay between local
capacities and outside aid, and on the role of social networks and social support in the response and recovery process. The original aims of this study were framed by the following three questions:

- What was the experience of the tsunami and subsequent recovery efforts for special populations (i.e., the elderly and immigrants\(^2\)) in American Samoa (and how did that experience vary from the general population)?
- What social and physical resources did residents draw on in the recovery process? What can their experiences teach us about how communities with limited external resources recover?
- How do disaster-affected communities leverage and contribute to their social networks during the recovery process? What role does social support and social embeddedness (as a proxy of resilience) play in the recovery process?

**Methods**

**Study design**

I conducted a case study of the 2009 tsunami in American Samoa following the guidelines established by Patton (2002), Creswell (2007) and Corbin & Strauss (2008), focusing specifically on the experiences of the affected general population and two sub-populations: the elderly and immigrants. This case study was bound by time (covering the period from when the tsunami warning was first issued in September 2009 through

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\(^{2}\) For the purposes of this paper I am using the term *immigrant* as a general term to refer to anyone who is not an American Samoan national. I did not, however, use that term in my interaction with participants, as it has a rather derogatory connotation. In American Samoa, people generally used the term *foreigner* to describe a person who was neither from American Samoa nor Western Samoa. When referring to a person from Western Samoa, people generally indicated that person’s island of origin (Upolu, Savai’i, etc.).
January, 2011, the time of the study) as well as geography (all data collection took place on Tutuila Island, the main island of American Samoa). I collected data from multiple sources, including:

- Interviews with elderly and immigrant participants, affected individuals from the general population, and community leaders.
- Focus groups with elderly participants and local organizations.
- Interviews and discussions with cultural experts.
- Observations.
- Archival records.
- Media reports.

Participants.

Participants in this study included:

- 6 members of the general population who participated in interviews;
- 23 individuals who participated in focus groups;
- 2 government representatives who participated in interviews;
- 2 representatives from a local counseling program (which I will refer to as the “Counseling Program”) who participated in a joint interview (in addition to a focus group);
- 3 immigrants;
- 5 people who participated through my website;
- 2 cultural experts.
A total of 9 men and 27 women participated in this study, not including those who participated through the website (website posts are anonymous). Participants were recruited through a key local partner who participated in the development of this research project as well as through UH Mānoa faculty contacts in American Samoa. Additional participants were identified using snowball sampling. I conducted a total of five interviews with six members of the general population. In addition, I conducted one interview with two members of the Counseling Program, and two interviews with government representatives. Although I did not originally intend to interview government representatives (I discuss why in the Limitations section), I conducted these interviews due to introductions from other participants. Both interviews were informative, though insufficient to accurately depict a governmental perspective on the events. I was able to interview three people who had come to American Samoa from different countries. The immigrant participants came from Western Samoa, the Philippines, and Tonga. While I would like to have conducted additional interviews with members of these special populations, I was able to gather a significant amount of data about the experience of these populations through my other interviews and through more casual conversations. In addition to individual interviews I conducted two focus groups. One focus group involved a group of elderly women who had experienced the tsunami. The second involved counselors from the Counseling Program.

**Data Collection**

The data for this study were collected primarily during my field visit to American Samoa from January 4-26, 2011. During my visit I lived with a Samoan family in Pago Pago, the capital of American Samoa.
The primary data sources for this study were individual interviews and focus groups. For interviews I attempted to use a culture-specific method of data collection called *talanoa*. *Talanoa* literally means face-to-face conversation (Otsuka, 2005), and is a method that fits easily into the structure of a case study. *Talanoa* has been successfully adapted and used as a method of data collection via individual interviews (Lesa, 2009; Otsuka, 2005; Vaioleti, 2006). Unlike typical interviews, *talanoa* requires the establishment of a positive personal relationship between the researcher and the participant (people and relationships are valued above stated goals or desired outcomes) and is based on an exchange of information and a sharing of emotions, rather than a one-way transfer of information from the respondent to the researcher (Otsuka, 2005). It begins with a period of formal exchange; interactions between the researcher and respondent must first go through a period of formal exchange and then, if the respondent is comfortable doing so, move on to more informal and directed discussions.

However, in most cases I did not have the opportunity to use this method, and it is possible that my data suffered as a result. All of my interactions with participants were facilitated through key contacts in American Samoa and/or my host family. I had little control over who I met with or how many times I met with any given person. For this reason, I was unable to interview any participant more than once. When I tried to discuss the *talanoa* method with my host family, they dismissed it as unnecessary. It is possible that, as American Samoa is undergoing a significant cultural transformation, this method is no longer as applicable as it would be in Western Samoa. Because I was introduced to all of my participants through trusted community members, I do not feel that this had a significant effect on my data collection process. Still, I feel that some of my interviews...
would have benefited from an initial, social meeting, followed by an interview at a later date.

Participant interviews consisted primarily of open-ended questions about the participant’s experience of and since the tsunami. The interviews were conducted in person and, when possible, digitally recorded. While most interviews were conducted in English, I did work through an interpreter on occasion, especially when speaking with the elderly. The transcribed interviews contained no information that could be used to identify the participant. Sample interview questions are listed in Appendix B.

The two focus groups provided an opportunity for participants to hear and react to each other’s experiences and interpretations of events related to the tsunami and to discuss participants’ reflections and reactions to initial themes that emerged during the individual interviews. Both focus groups were extremely informative, and participants seemed comfortable expressing themselves in their peer groups. Sample focus group questions are listed in Appendix C.

I supplemented the data collected through interviews and focus groups with data collected through observations. Living with a Samoan host family and participating in family and village events allowed me to gather a great deal of data through observation, which I recorded in my daily field notes. The goal of the observations was to collect data on:

- Ongoing recovery efforts;
- Remaining visible impacts of the tsunami;
- Cultural norms and practices;
• Social interactions, especially between members of the general community and members of the special populations of interest.

The names and identities of all participants have been kept confidential. Since confidentiality is a particular concern for immigrant participants, I never asked a respondent any specific questions about his/her citizenship or immigration status (whether he/she is in American Samoa legally or illegally). I relied on my community partners to direct me to individuals who could provide me with the information I sought about the immigrant experience of the disaster. All meetings and interviews were conducted in a location of the participants choosing. The purpose of the study and the rights of the participants were explained to each participant both verbally and in writing (see Appendix D for the consent form). Participants were asked to give oral consent for their participation, and a copy of the consent form was given to each participant. All study methods were approved by the University of Hawai‘i at Mānoa Committee on Human Studies to ensure the protection of respondents who participated in this study.

Data Analysis

Participant interviews were conducted in person and, when possible, recorded with an Olympus DS-40 Digital Voice Recorder. For participants who did not wish to be recorded I kept detailed notes during the interview, and then documented the content of the interview in as much detail as I could afterward. Both focus groups were also recorded.

After the data were collected, all recorded interviews and focus groups were transcribed from a digital voice recorder to a Microsoft Word document. The participants determined the length of the interviews and focus groups. Most interviews were about 1
hour in length, with a total range of 20 minutes to nearly three hours. The focus groups were approximately two hours in length. Each interview was transcribed verbatim, reflecting the original wording and grammar used by the participants. Tangential conversations that occurred before or after the formal interview were not coded. Both digital and hardcopy records were kept in a secured location for the duration of this project.

Data from the interviews and focus groups were coded using NVivo8 qualitative coding software. Prior to beginning the coding process all data were reviewed and an initial codebook developed. A process of open and axial coding (Corbin & Strauss, 2008) was used to organize data into themes and to identify lower-level (explanatory) and higher-level (thematic) concepts. Memos were used to draw out and develop emerging themes, and to link data from interviews and focus group to data collected from other sources. I was specifically looking for themes related to:

- similarities or differences in the disaster and recovery experiences of special and general populations;
- our current understanding of the role of community resilience and social networks in the disaster recovery process;
- themes or patterns that provide insight into the process of recovery for communities with limited external resources;
- insights into how existing community resources and capacities can be leveraged to improve the effectiveness and efficiency of the disaster response and recovery process.
As I collected data from three different populations (the general population and two sub-populations) I conducted within-case and cross-case analyses of the data as a means of identifying themes within and across groups. I also included in my analysis an exploration of the context and circumstances in which the participants’ experiences took place, including the modern political history of American Samoa, the history of natural disasters, and the current cultural and social context. This contextual data was integrated into the themes identified through other forms of data collection and used to inform the data analysis.

**Validity**

I had been advised before my trip that people in American Samoa, in order to extend hospitality to guests, often respond to researchers by trying to tell the researcher what they think she wants to hear. This was a concern because it has the potential to severely threaten the validity of my results. To check my interpretations and understanding of the data, I used two validation measures described by Creswell (2007): triangulation of data sources and member checking. I triangulated my finding by cross-checking my interpretations across data sources: checking the results of the interviews and focus groups against observational data, media reports, written materials from Samoan authors and cultural experts, and archival data for both confirming and disconfirming evidence. Second, once I had identified my key organizing themes, I used member checking to review my themes with project participants. This process was limited by the fact that I did not have physical access to the participants beyond the data collection process. Still, I was able to review my themes with a Samoan person who now
lives in Hawai‘i and with some project participants through email and my website, www.brokoppbinder.org, which I developed in order to facilitate ongoing communication with my participants. The main feature of the website was a blog that I used to post questions and comments about my research. I then invited my participants (via email) to participate in the blog by posting their comments and thoughts. Most people chose to reply by responding to my email rather than posting on the blog (likely due to a lack of familiarity and comfort with blogs). These steps alleviated my concerns that my data may have been contrived, and made me comfortable with the validity of my results.

**Results**

**Resilience**

This section reviews my findings on disaster resilience. My findings indicate that people in American Samoa displayed a great deal of physical resilience in the aftermath of the tsunami, though due to cultural expectations, emotional recovery proved to be much more challenging.

**Physical resilience (“Helping means doing”).** Physical resilience is built into the fabric of Samoan culture. It is a culture that values (and even expects) that help will be offered when it is needed, and that operates from a principle, as explained by one of my respondents, that “helping means doing.” One woman explained:

… that’s the beauty of the Samoan culture. It doesn’t matter if you guys are related or whatever but if something happens to another person or whatever, everybody, you know, they have that part that, you know, to, they wanna help. They feel obligated to each and every one and I see that that’s the beauty of the Samoan culture, and it’s in each and every one of us.
Another participant agreed: “… Samoan culture always has the heart for everybody. So, whatever happens to one family, even though you’re not related or not a part of that family, you always wanted to help.” Help is understood as a practice of doing something very practical for someone else. This cultural norm has made Samoans physically resilient. This physical resilience is evident when looking at how people responded after the tsunami. In the immediate aftermath of the disaster, people were quick to come to the aid of their family members and neighbors. According to Young (2010):

In most areas, the extended family, the village family – were the first responders. The first helpers. Church ministers organized search parties to return to look for the missing. The matai (chiefs) mobilized the young men to erect rough shelters in the sweltering forest so the elderly could get out of the hot sun. No one had to face their crisis alone. (p. 190)

As soon as the initial crisis phase ended, the work of cleaning and rebuilding the villages began. No one waited for outside help to arrive. Several participants in the current study mentioned how quickly cleanup began:

But from the beginning, as soon as the water receded, people didn’t wait for FEMA and say, “Oh, my gosh, what’s happened to us?” They got up, they got out, got the shovels, started digging people out, starting cleaning up, started cooking for people, started making sure they had food and water and a place to stay. Um, the recovery started within minutes.

…the clean-up started immediately. People came out with wheel barrels and their brooms and shovels and they started cleaning up. And they started sharing food and cooking for one another… I think that was a revitalization of the old Samoan ways

…but when that tsunami came, it brought up everything, all, it was all over the fish, everything, and was like three, four days later that the smell of the village wasn’t even, it wasn’t even popular or just, how to say it. But then everyone tried their best to clean. Everyone cleaned. So that’s how it went out real fast, real quick.
Businesses, too, offered what resources they had. Respondents described how local business owners simply opened their warehouses to let people take what they needed. This expectation of help was also felt by Samoans living off-island. I asked participants in a focus group to tell me what would have happened if outside agencies (such as FEMA and the Red Cross) had never arrived to offer help. They responded by saying that these agencies helped to tide them over until “real help” came, by which they meant help that came from expatriates who responded to their cultural duty to provide help, and who understood what type of help would be most useful to their families back home:

Interviewer: The real help being, the local help, or the…
Man: I wouldn’t… no I would still say still the local businesses opening up their things, and donations from our families off island.
Man 2: Yah, donations more.
Man 3: Those crates starting coming in and all the communities and, and the mainland were pouring in help for can foods, lots of water, clothing, what not.

The provision of physical help continued into the recovery phases of the disaster. I heard stories of how families whose homes were not damaged freely shared water and electricity (via long trains of extension cords) with neighbors whose houses had been damaged. Others opened up their homes to family members and others who had lost theirs; there were reports of families who had taken two and three other families into their homes, and provided them with shelter and food. One man who owned an inn opened it up to people who had lost their homes in his village. People prepared and shared food with those who needed it.

The repair and rebuilding of homes was a high priority, and this work began immediately. In fact, this work actually began too quickly by some accounts. By the time
FEMA arrived to begin assessing the damage, much of the damage had already been repaired. As a result, people had difficulty obtaining compensation for the damage their homes had sustained.

FEMA and the Red Cross delivered tents for use as temporary housing. While people expressed gratitude for the tents, they were not conducive to life in American Samoa: they are poorly ventilated and too small to house Samoan families. Instead, people who had lost their homes quickly built small *fales*, or traditional Samoan huts, next to where their homes had been or farther up the mountain on family property. Families were living in the *fales* and using the tents for storage while they rebuilt their homes.

Other adjustments were also made to protect the villages and ensure that everyone’s physical needs were provided for. In one small village that had been almost completely destroyed, the village council quickly instituted strict curfews, as well as bans on fishing, alcohol, and swimming. One respondent explained the council’s role with regard to fishing, previously a major part of daily life in the village:

Woman: But then after that, the whole year when September came, we, uh, the first anniversary, uh, um, no one went and fish in the ocean anymore. They kept the ocean, you know, they wanted to, uh, have it make maybe save, save some fish and all that, make them grow and make them, because we know they’ll grow. Interviewer: Okay, to let the fish grow, again, let them, the population build up again. Woman: Let the fish grow again, and, yeah, everything else… That’s what happened. Until now, we only had it only two weeks last year of the month of, I would say October, that’s when two weeks, uh, two weeks 2010, only two weeks we were allowed to go fishing.\(^3\) You know this group of men in the village,

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\(^3\) This temporary lifting of the fishing ban likely coincided with the Palolo swarming season. Once a year an edible worm known locally as Palolo swarms the shores of the Samoan islands. The worms are considered a delicacy, and are harvested by the locals during the swarming season. See [http://news.nationalgeographic.com/news/2004/10/1029_041029_palolo_worms.html](http://news.nationalgeographic.com/news/2004/10/1029_041029_palolo_worms.html) for more information.
they’re the one who did that, and then everyone in the village, every family have some.
Interviewer: So they fish and then they gave the fish out to everyone.
Woman: Uh, yeah, everyone, they were giving it out, donating to everyone, make sure every family have something to eat like fish…

Ablon (1972) sums up this propensity toward physical resilience, concluding that

Samoans are very well equipped to cope with disaster, both as individuals and family units:

… Samoan families and communities have their own disaster plan, a complex pattern of expectations and actions that spontaneously becomes activated when a crisis arises. This plan is evident on a small scale at the time of the death of an individual, when all family members – including those so remote in degree that most Americans would have lost all record of relatedness – are expected to donate money and ritual items of goods and food to the bereaved family. (p. 52)

The social and emotional response (“It happened, let it go”). I began most of my interviews by asking people to tell me the story of what happened to them on the day of the tsunami. In most cases, this was all the prompting that anyone needed to begin telling me, usually in great detail, everything they went through on that day: where they were, how they tried to find their family members, what they lost, and who they lost. People seemed very eager to tell their stories, but many people did so without expressing much, if any, emotion.

In Samoan culture, emotional expression has a time and place. One participant described the normal grieving process for Samoans. When, for example, an individual passes away, the family immediately begins to pray. Spiritual guidance and prayer are the primary coping mechanisms.4 This is true of family members off-island as well who

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4 Many people said that the first thing they did after the tsunami was to pray or attend church services. In the past, pastors have provided spiritual guidance after tragic events. One participant remembered as a young girl, when hurricanes would hit the islands, pastors (never counselors) came to the schools to provide spiritual guidance. Using
“although… separated by land and water, [are] still connected through God.” The family gathers and, over the following days, the chiefs come together to make arrangements for the burial service and determine what contributions (which may include money, food, or ceremonial objects such as fine mats) to collect on behalf of the family. Meanwhile, the family will talk, share, and cry for the person who has passed. In this way, space is set aside to grieve lost loved ones.

When the burial service is over, however, the time for grieving is through. Emotional expression outside of the assigned context is considered, at best, inappropriate. This is related to the cultural values of control and strength. Shore (1982) presents a Samoan perspective on individual behavior and social norms in which an important role of social norms is the tempering of selfish behaviors. He states, “Social laws channel energy into socially useful tasks (p. 158).” Uncontrolled emotion is seen as emanating from a “destructive energy (p. 148)” that works against the (all important) social life. Similarly, findings from the current study suggest that strength also is highly valued. This is true of physical strength, but is equally important for one to have self-control and control of one’s emotions. If someone is unable to control himself (for example, if he has an inappropriate emotional outburst), then he will be considered weak (*lotovaivai*, or weak in spirit). If someone is weak, he can’t be counted on to fulfill his role in the family, or to respond appropriately to family needs (J. Mayer, personal communication, July 27, 2011). In order to be considered strong, one must be in control of his emotions. If examples from scripture they would try to help the children recover from the disaster. My participant explained that the pastors would tell the story of Jacob who, though he went through many difficulties, was still able to be strong.
someone is unable to do so, then he will be seen as weak and an embarrassment to the family.

The expectation, then, is that grief will be expressed during and contained in the appropriate family gathering. Someone dies, and it is acknowledged in the appropriate arena (family gathering), but then the person is just gone. There is nothing to be done about it. It was God's will, so why continue to grieve? This response is reflected in the saying *E ola mo nisi*, meaning “we live for others who are still living (J. Mayer, personal communication, November 14, 2011).” Exceptions were not made after the tsunami:

But it goes directly back to, everybody knows that [the tsunami] has affected you, but don’t bring it up, don’t talk about it, yeah? God help the person who talks about it… That’s not, you don’t want to be that person cause, and I’ve seen that they will tell you, family members will tell you, “Ay, shut up, that’s not, this is not the place for that.” But you’re amongst family, so when is the time to talk about it?

A related theme ran through many of my interviews: the desire or pressure to be ‘okay’ once the grieving period had passed. A Samoan woman who had lived on a mainland but since returned to American Samoa, and whose family was directly impacted by the tsunami, explained this to me: “You’d ask somebody, ‘Well, how are you feeling?’, and they’d say, ‘Oh, I’m fine, I’m fine,’ you know. It’s like nothing was happening. So everything was just kept under the rug.” A woman who worked as part of the Counseling Program told the story of a family she had visited that had lost a child in the tsunami. When she asked the parents how they were doing, they said, “Oh we’re okay.” They talked, and after a while the couple’s second daughter joined the conversation. The counselor explains:

… the parents never, *never* bothered to ask [the surviving daughter] if anything bothering, if there’s anything wrong with her. She, maybe because they looked at
her as a college student, like, “oh she can handle herself, she’s old enough.” When we had that conversation she was in tears. She let it out. And the mother was surprised. She didn’t even know that this burden that’s been with her daughter all this time. … [The mother] said to us that she never knew that this was going, was happening to her daughter. She was only looking at the outside. She didn’t see what was inside… Every time [the daughter was] on the car by herself she had to very scaredness feeling: She can just see the tsunami coming. Like she, the mother never really thought about it. She never, never hit her until we walk in to their doors and we helped them be aware of what is going on.

There are several key cultural factors that discourage people from talking about what happened, expressing emotion, or generally dwelling on a tragedy or unfortunate event. In my interviews, emotional expression was associated with a sense of shame, and words such as “disgrace,” “embarrassment,” and “weakness.” In describing his experience driving through Pago Pago after the tsunami and witnessing the destruction one respondent stated, “I had to shield my eyes from my son so he wouldn’t see how much it had affected me.” Other respondents described their reactions to the events of that day by saying things like they “nearly cried” or they “were almost walking around with tears in their eyes”, as if crying were at the extreme end of the spectrum of emotional expression, or they were too ashamed to admit these behaviors to me. Another woman, who wept throughout her interview, expressed shame over the fact that she still cries when she talks with her friends about the tsunami. She said, “The only bad thing is that I always cry, very hard. I can’t hold my tears.”

Talking to strangers or non-family members about internal family matters is very unusual. Doing so may damage a person’s credibility or image, or even lead to a serious
physical illness\(^5\) (Howard, 1986). This may be, at heart, an issue of trust (i.e., by talking about family issues with non-family members, a person is betraying her family’s trust). This is especially true for the elderly, who are revered as family and village leaders. The pressure to suppress family concerns from non-family members is illustrated in the following exchange that took place during a focus group with Samoan counselors who had been visiting the elderly in their homes:

Woman: Some of the elderlies, they really let it out in tears. They were really willing to give it, to show… how they felt. And then afterward they would say, “Thank you.” It was a, a releasing of the stress that they had with them…

Man: It was really kind of unheard of.

Man: It’s not, it’s not typical in Samoan culture, especially for older people to talk outside of the family and share tears and tell of what happened and their experiences and what’s going on within their family…

Man: It’s like they didn’t want to show weakness, like they don’t want to show weakness toward their family.\(^6\)

To put this practice in context, it is important to clarify that family issues, though not discussed directly, are often not unknown to others. It’s common for people (especially women) to talk about other people’s families (\textit{faitala}, or gossip). It is less acceptable, however, to embarrass someone by discussing her family while she is present. In other words, people won’t talk about their own family’s business, but they are more willing to discuss someone else’s family business. This is especially true if something considered \textit{matagā} – ugly or repugnant – happens within the family (drunkenness, incest,

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\(^5\) Samoans view health as a state of equilibrium between the natural, social, and spiritual or supernatural realms. Illness can result from a disruption in any of these three areas. For example, discord in a relationship may explain one’s physical illness, as could interference by spirits. For a detailed description of Samoan beliefs about health and wellness, see Macpherson and Macpherson (1990).

\(^6\) In Samoan society, the social norms for expressing emotion are relaxed for the elderly. If they continue to cry beyond the mourning period, it is not considered \textit{matagā} (ugly or repugnant), as it would be for others. Still, the depth of emotional expression so many months after the tsunami was not considered normal, and sharing about family problems was still quite unusual.
or causing a public disturbance, for example) (Shore, 1982). In that case, people do not want the ugliness to be seen by outsiders, so they will deal with matagā behavior as quickly as possible, and then move on. With the tsunami, however, there was no bad behavior, nor anyone to blame.

Based on my experiences and what I have learned from other sources, it seems that one possible explanation for the lack of emotional expression may have to do with the cultural belief in the primacy and importance of the family unit. In day-to-day life, personal needs and desires are subsumed by the needs and interests of the family. This value is evident in Samoan views of health and sickness, where individuals may ignore or not recognize illness as being a problem unless it impacts their ability to fulfill their role in the family and village.

Ablon (1972), in describing the response of victims of a fatal fire in a Samoan community, states:

It appears that much emotional distress at the time of the fire was caused more by the total disruption of households and worries about juggling time for work, the care of children, and those recuperating, than by the patient’s or other injustices, or even a death in the family. Thus, the immediate problems of household logistics may have displaced acute concern over injury or death in the family. [emphasis added] (p. 23)

Personal emotions, then, may not be considered to be of much consequence compared to the much more critical functioning of the family unit. Mourning and emotional distress are personal. Perhaps grieving is not encouraged (outside of the family gathering designed for that purpose) because grieving is a personal action, not something that benefits the family, while working to provide for physical needs is seen as benefiting the family as a whole, not just one’s own well-being. Prolonged grief over things that
cannot be changed does not benefit the family, and because personal grief does not
directly impact the functioning of the family, those needs are subsumed by household
needs and logistics.

In addition to the cultural pressures, though, many people expressed a strong
desire to forget about what happened. This was a common theme in many of my
interviews; people wanted to forget about what happened, but they could not forget. I
asked one woman from Failolo (a village that was not destroyed, but its inhabitants
relocated to the mountains after the tsunami) how often she thinks about the tsunami. She
said, “I don’t know how to forget.” She went on to explain that she thinks about it every
night, especially during the rainy season. Another woman swore that she would never
forget what happened that day. She said:

...sometimes when the ocean got no waves, no, I stay, I stay home. I don’t want to
come to work. I stay home. I want, I tell my kids, ‘Nobody go to school. Nobody
go work. No, let’s all stay home.’ I don’t want to bring back the memories of
what happened before.
Interviewer: Even still now?
Woman: Still now, still now. Yeah. So, that’s all I can say right now. But I never
forget.

The will to forget was also evident in other sources as well. In a book of stories
collected by the Counseling Program one of the counselors describes the plight of a client
who is no longer comfortable leaving his home. He states, “Until now he can’t get it out
of his mind and it’s hard to forget. He is scared to drive his car and just going to the
nearby store is out of the question. He rather stayed home.” Another counselor made a
similar observation about another client: “He was scared and gets distressing thoughts
about the Tsunami because he witnesses the waves and can't get it out of his mind.” In
her book *Galu Afi*, Lani Wendt Young (2009) recounts stories of the tsunami’s impacts in
Samoa, American Samoa, and Tonga. Speaking about a woman she interviewed in American Samoa, Young says, “For some who are trying to cope, blocking out the tsunami memories has been their best defense” (p. 333). This woman was in the hospital for three months after the tsunami, and told Young, “I don’t think about it too much, I try to forget about it, because if I dwell on it and keep thinking about it, my mind might also get affected…. For me – I don’t think about it” (p. 333).

But what happens when the tragedy is too great, and the grief cannot be contained? While the cultural norm is to grieve for a time and then move on, this has proved difficult or impossible for many tsunami victims. They are still experiencing fear and dealing with the disruptions to their families and social networks that were caused by the tsunami, and they are unable to simply let it go.

**Fear.** While people were hesitant to discuss or express emotion, many admitted that they still experience fear. As one would expect, people’s stories about what they witnessed and experienced on the day of the tsunami were laced with fear. There was fear of the tsunami waves as they crashed onto land:

… I just sat down on my desk and opened up my computer. And then a lady called me… ‘Come! Let’s go! The wave is coming!’ I never know nothing! So I open my window and I saw the wave was over here. So I just opened the door, we ran all way over here, up to the mountain. I was crying, yelling to God to help us… There’s nothing, ‘cause the wave was coming that fast.

Fear of what the waves had done to their villages.

And some men went over there, upstairs, and they stood on the back, uh, back part of the building and they looked down. And some, I remember the other man said, ‘Wow! I can see a container floating like a boat.’ What? He saw a container. ‘Really?’ ‘Yeah, a container! Floating like a boat, or like this on the field down there.’ So, the man said, ‘Mama, came over! Oh, come over! Come over! Come look.’ I didn’t, I didn’t want to go up there. I was so afraid.
And fear of facing the first night with no homes, no electricity, and no supplies:

But, it was, it was very scary to be back here, especially when night comes. Everything you hear, every sound you hear, you can’t sleep, you go, ‘Oh!’ You know, everyone was awakened, like late in the evening. You hear a big sound like that or the waves were banging and all that.

What was less expected, however, was the lasting sense of fear. Even sixteen months after the tsunami, fear was evident in almost everyone I met and spoke with, at all ages. This fear was still very present and a major influence on people’s day-to-day lives. Many people talked about how they are fearful of the ocean: the sound of the waves, or the way the low tide makes the ocean floor visible, just like it was before the tsunami struck. Several people reported that they have not been in the ocean since the tsunami came.

This fear also seems to extend to all weather events, so that heavy rain or wind will invoke fear. One woman, speaking through a translator, said that she “cannot take the tsunami out of her mind. Every time, every morning when it rains or the wind blows, she’s… her heart beats faster. She’s afraid. She’s afraid.”

The fear was intense enough to disrupt normal activities. Counselors at the Counseling Program asked people whether they were still participating in activities they used to enjoy, such as going to the beach, having picnics at the beach, swimming, or fishing. One counselor summarized a typical response: “…invariably, we would get, ‘No, um, I don’t want my husband to go fishing. I don’t allow the kids to go swimming. And I don’t sleep very good at night’ …. [or] ‘During heavy rain, you know, my son or daughter has nightmares,’ or, ‘They’re very scared at night.’”. In addition to impacting recreational activities, fear disrupted work. One woman reported that fishermen in her village had
stopped fishing and were now farming instead. A woman whose office was located next to the ocean was afraid to come back to work:

“When our director told us to come back here, I feel so bad. I feel so sad. ‘Cause I don’t want to come here. I’ve seen it, what happened. So, I don’t want to happen again… I don’t want to come here to work over here anymore. It’s better off over there. Right over here, I don’t want. It’s really close to the ocean.

Why was the sense of fear so intense, even these many months after the disaster? This can be explained, in part, by the fact that tsunami is still very much a part of people’s everyday lives. It’s a fa’alavelave – a disruption – that has lasted for months. They cannot put the event behind them because it is not something that is in the past; it is something that they are reminded of everyday as they face the physical and social damage it left behind. The wave is gone, but the disruption remains.

**Shifting social structures.** Even beyond the fear, the impacts of the tsunami were still visible at the community scale in the form of disrupted social networks and activities, and these serve as a constant reminder of the tsunami’s impact. Samoan social networks are centered around the family, and families are governed by their matai, or chiefs. After the tsunami, matai who wanted to leave their village because they felt unsafe (or who were compelled to leave, along with other members of their village, because of government restrictions regarding coastal buffer zones) risked losing their titles and their status within the family. Not only does the individual face a loss in this case, but his children do as well, possibly for many generations. According to one respondent:

7 The matai title may be removed from an individual person, but it would still remain in the family (the title would be given to another member of the family). The impact of the loss of a title, then, will be felt by that person’s nuclear family, but not by the larger family unit.
We have an instance where a high-ranking member of a family in the village, um…was, was, you know, terribly affected. And because of his status in the village, he must remain in the village or lose his status. He is under pressure from both sides of his family and the village to, to be in the village. But he doesn’t feel safe in the village. And he doesn’t, you know, want to, he doesn’t want to be there. But with the status and the title, if he is not there, then they can take the title…which means that the family has less or no status, and that he could possibly lose land, which, for future generations, it could be very impacting. So, in those types of circumstance, and I can’t believe that he is the only one, that it can have, again, lasting and wide-ranging effects for a few generations.

This may also cause discord within the family unit if the elders or higher-ranking members do not agree with an individual’s decision to leave:

And because families are so close-knit and because it…wide and varying range of emotions, um, maybe the dad of, of, of the father doesn’t agree. “Well, you shouldn’t move,” you know. “I gave you this land, and now you’re moving to your wife’s land and someplace else. And so, are you weak? [emphasis added]

In addition to the matai system, Samoan villages include a number of gender segregated social groups – men’s and women’s organizations – that perform important functions within the village. The men’s organizations are charged with, among other things, maintaining the village grounds, planting of food crops, establishing and enforcing village rules, and maintaining safety. The women’s groups are responsible for welcoming and entertaining guests, ensuring that the village is presentable, and maintaining village cleanliness and sanitation (Shore, 1982). Together, these organizations keep the village operating smoothly.

In a village that was heavily damaged by the tsunami, I was able to gather some data about shifts that occurred in these village-level social networks. I interviewed the wife of a pastor who told me about the groups that were active in the village before the
tsunami, the impact of the tsunami on those groups, and the resulting impacts on the village as a whole. She told me that the village women’s groups stopped meeting after the tsunami, and their meetings had not resumed. She also described the village council, a group of young men (“strong men of the village”) whose job it is to protect the village and enforce the rules (she was referring, presumably, to the ‘aumaga, or untitled men’s organization). This group continued to meet, and adapted their focus and role to account for the tsunami:

…they meet, and they talk a lot about what happened, and from that, they’re experiencing, and they’re building up, they’re trying to, um, build up some other good methods so that when these things happen, they’re still together, building each other, no matter what… it’s building the village strong, too, and they’re looking after, like, they have curfews, they’re still having curfews continuing the curfews, the village, yeah, for the sake of everyone to be safe, and they’re holding up, they’re holding up signs too, for no fishing, no alcohol, no littering and all that, loitering…

I asked why some groups had stopped meeting, and the pastor’s wife explained that people were focused on building their houses and cleaning up their land, and so they were not available to meet like they had been before. She felt that the village was suffering as a result of this new isolation, however:

You know, it’s like they’re spending most of their time being, you know, away from everyone else. And I think it’s about time to… that’s the first thing I really need, I think, we really need is to, uh, communicate. You know, bringing them together, for good communications. So if we could communicate, if communicate real good, then other things that were in the village before, we would be able to rebuild it, ah, a community, ah? And the oneness of everyone, that’s the other thing. Instead of some are, you know, neglecting others because of, they have to do their own thing… And then to bring back that heart to, you know, relate together and help each other together. I think that’s the most thing that we need. So that… then we’ll see, everything else will be in order, too… Knowing that everyone needs another. That everyone needs everyone, you know.
These shifts in the village social structure, then, had very real consequences. It’s interesting to note that the men’s organizations (responsible for the physical work required for recovery) remained active after the tsunami, while the women’s groups (responsible for hospitality and the social life of the village) stagnated. On the surface this looks like an understandable and reasonable change; why should the women’s groups continue to meet when their contributions are not seen as critical to the recovery of the village? Why worry about entertaining when the homes have been destroyed? Still, this seemed to lead to a number of unintended consequences, including a weakening of the social fabric as changes in routine social interactions and activities resulted in strained relationships among villagers.

Some church groups also continued to meet. However, there were a few key changes. Most notably, the pastors from the four village churches were no longer meeting together. Before the tsunami, this group had played an important role in the village, functioning as a symbol of unity in the village and provided support and encouragement to people who needed it:

Woman: The church, especially, needs to come back together. Yeah. [Before the tsunami they] go out and visit the whole village.
Interviewer: Together?
Woman: Ah, twice a month. They go out together. Yeah… Now they don’t do that. They don’t do that.
Interviewer: And is that for the same reason? That people are busy? Or, is there some reason why that happened?
Woman: No. Maybe, yeah I don’t know why they did but it’s there… I think all this is from the experience they had during the tsunami. And what every, and what they got from it, you know… But the church are okay because we pastors are… you know, we communicate each other. But it’s just that, if we see what’s going on around the village, so, how can we go out and visit if there are other people that are rejecting... You know, I mean, from each other.
Interviewer: Rejecting from each other.
**Woman:** Yeah, rejecting from each other. And, um, I guess that’s the thing that we need to work, work doing this year. We are working on it, we’re working on, with the help from God. [emphasis added]

**Local Capacity and Outside Aid**

In American Samoa, people’s needs in the immediate aftermath of the tsunami were exactly what one would expect: water, food, shelter, electricity. In a moment, and in many cases, without warning, people in the heavily hit areas had literally lost everything they owned. One respondent described what he saw when he came back down from the mountain:

Interviewer: The whole house, the whole house is gone?

As is true in many disasters, response to the tsunami came from local individuals and groups, as well as outside aid organizations such as the Red Cross and FEMA. This section will look at the processes by which aid was delivered, and the social implications of the response.

**Local capacity.** In the previous section I described how in this situation, as is often true in disasters, the victims were their own first responders. Those with physical needs looked to their normal channels for support – village leaders, family members living in other villages, churches – and found what they needed. Family members living off-island were seen as a key (possible the key) component of the response effort, as were local village groups that continued to meet, such as the village councils. Physical resilience, which has developed as a core capacity, was effective during a major disaster even though there had been no other disaster on this scale in living memory.
Beyond this embedded physical resilience, other forms of local capacity were also visible. Local organizations did respond. The American Samoa Voluntary Organizations Active in Disaster (ASVOAD) is a coalition of faith-based, governmental, and community organizations that was established in 2004 and rekindled just before the tsunami of 2009 (American Samoa Voluntary Organizations Active in Disaster, 2009). Prior to the tsunami, ASVOAD had never been activated, and it was not clear from my interviews how cohesive the organization was. Still, two of my participants reported having responded to the tsunami through their roles in ASVOAD, primarily by distributing food, water, and clothing in the villages. Other local organizations formed or rallied to meet the needs of the elderly and other special populations.

Local churches are another key component of the local capacity. Churches in American Samoa are an integral part of people’s everyday lives. As a result, church leaders were aware of the needs of their parishioners. A pastor’s wife described how, after the tsunami, some people came to her and her husband looking for help, but many people were too shy or embarrassed to ask. In those cases, she and her husband would approach families and ask how the church could help.

A pastor’s wife in another village described how she was able to use her intimate knowledge of her parishioners to ensure that aid that came into the village reached the people who needed it most. Additionally, she described how they had been able to leverage support to rebuild the church building, which had been completely destroyed. While many in the village were still waiting for their payments to arrive from FEMA, they had been able to raise all of the money they needed to rebuild the church:
Respondent: But for our church… we have the money to rebuild the church. We have the pledges that came in from the church members.
Interviewer: From the church members here? Or from…
Respondent: Church members here and some from off-island.
Interviewer: Wow, that’s fantastic.
Respondent: … we got the money to rebuild the church, and we’re just waiting for… other things to be processed, so we can get the, the permit to rebuild the church, yeah.

Local churches were connected with sister churches off-island. By leveraging these relationships and soliciting and managing donations, churches were able to acquire additional resources for distribution in the village.

**Outside aid.** Soon after the tsunami, outside aid began arriving. Aid came in a variety of forms and from a number of sources, including FEMA, the Red Cross, the US military, World Vision, Feed the Children, Catholic Charities, and Teen Challenge, among others. People expressed gratitude for the help that arrived in the days immediately following the tsunami: water, food, and clothing. When I asked about the value of this outside aid, one participant explained:

…we thanked them for what they did, you know, just showing up out of the blue just to help out with our people. They helped our people get over the hump, you know, especially the immediate needs. We need the water, we need this, we need that, the food, the clothing.

Outside aid was seen as helpful insofar as it helped people to “get over the hump;” it helped to fill an important gap in aid between what local people could provide for themselves, and the time it took for the “real help” to arrive from families and other organizations off-island. Unfortunately, however, the approach taken by many of the outside aid organizations proved, in the end, to be disruptive. According to my research,
aid that was intended to help with the recovery may have, in the end, hindered it. How did this happen, and why?

**Chaos in the system.** When outside organizations landed and began their operations in American Samoa, they introduced a new level of complexity to an already chaotic situation. Community members, as I mentioned, were very grateful for the help they received in the first few days after the tsunami. Interventions by outside organizations past that point, however, were viewed in a much more negative light. There was a sense that the outside organizations were disconnected from the community:

> You know, like, this plane landed and [FEMA was] set up immediately… State of the art kind of, you walked in there and you think you were walking into the FBI building in DC or something, you know, very official, very, but really detached from what was really happening in the community. That’s what I found.

There was a strong sense of frustration at the lack of communication between local and outside aid organizations. One woman, who was active in local response efforts, expressed her frustration with outside organizations that talked about cooperating, but did not do so in practice. She stated:

> But the local organization wasn’t connecting with the federal, like two separate heads. And then you had the organizations, the faith based, functioning from the heart, arriving, and there’s no real coordination… the local government and the federal government are coming to [the meeting of our local organization] saying, “This is so good,” … And, you know, “We really need you, [name of organization].” You know, “You were a critical part of disaster relief.” And, you know, it was just so disorganized!

Another woman described how FEMA had asked her organization for a list of names of the elderly, bedridden, and disabled persons who may need extra assistance. Her organization offered to assist FEMA in reaching these individuals, but FEMA did not take advantage of their offer. My research, then, indicated that local groups and
organizations were interested in working more closely with the outside organizations, but the outside organizations did not actively partner or cooperate with local or community-based organizations. However, to be fair, I did not interview any representatives from the outside aid organizations as part of this study.

In terms of individual assistance, many people who had been promised assistance from FEMA were still waiting for their disaster assistance sixteen months after the event. A woman in one of the heavily damaged villages explained their situation to me, though she was, characteristically, hesitant to make any directly negative statements:

Interviewer: …if [people] applied for money from FEMA to help rebuild, did… everyone get that, or did some people get it and not other people, or how did that work?
Respondent: I think everyone got it, but some of us… we didn’t get anything from them yet…
Interviewer: Did you get the money from FEMA yet, though? Not yet?
Respondent: No, we, no.
Interviewer: So people are still waiting.
Respondent: Still waiting.

Issues also arose related to the inappropriate nature of some of the aid that was provided. For example, some organizations delivered tents for use as emergency housing. The tents, however, were too small to house Samoan families, and too hot to use in a tropical climate. Traditional Samoan houses, or *fales*, however, can be easily constructed from materials that are easily accessible on the island, and they do not have walls to block the breeze. Many of the affected families, therefore, built small *fales* on their property and used the tents for storage:

Interviewer: So then are people still living in the tents that are out here at all?
Respondent: Some. Some are using tents just to store stuff and everything.
Interviewer: Oh, okay.
Respondent: But they’re, they’ve built some shacks. You know the people from here, they like to build shacks, and built it right on where their property, yeah. The tents are where… Interviewer: Right next to where the houses were. Respondent: They’re, right.

Criticisms were not exclusive to outside organizations. I heard mixed responses about the role and value of the local organizations. While many people spoke highly of the work of ASVOAD, for example, others were frustrated because they felt that the organization had made promises to help that they were not able to keep. The local government was also highly criticized for its role (or absence) in the response effort. Two participants described the response this way:

Participant 1: You will see it froze. The government just froze. It was like nothing – they couldn’t do anything…
Participant 2: They were paralyzed.

**Aid as a disruption to the social and cultural landscape.** A very common criticism of the response and recovery efforts was that the aid that came in through outside organizations was not distributed to the people who needed it. Outside organizations, in an effort to operate within the local cultural context, often distributed the aid to the village *matai*, with the expectation that the *matai* would oversee the (appropriate) distribution of aid within the village. While some *matai* did distribute the aid, others were reported to have hoarded the aid, or to have distributed it to their family members, instead of those in need. Similar problems were reported when aid was distributed through the village mayor (who are often *matai* as well) or the local government.

Um, the distribution of goods wasn’t what it should have been. They would, and they tried to… adapt into the culture so that they would go to the senior person in the village – the *pule nu’u* or the mayor – and they would take all the water and all
the food and all the clothing there. And it’s sad to say, but it didn’t get distributed the way it could have been.

One woman, in response to a question I posed on my website, also commented on this issue:

Of course government corruption has kept the money being sent victims of the tsunami from being distributed to them and people around the world sent money to help and none of it is given to the victims and a lot of stuff that was sent is not distributed. A lot of things the Red Cross sent- like water coolers- were given to government officials and chiefs first and then to victims. Money given victims to rebuild houses was sent off island in many cases to relatives in Western Samoa. (Website post, April 20, 2011)

This issue was also documented by Young (2010):

There were complaints of course. Some said they did not get much when a pulenu’u (village mayor) oversaw the distribution of a container full of aid because “he doesn’t like our family”. Other times relief didn’t get to the people it was targeted for. A grocery store sent a truck full of food for the Taufua family which was stopped by others and distributed to the rest of the village. At Saleamua, Lee described the haphazard distribution. “If the goods were delivered by government, and you weren’t on the list – you wouldn’t get it. If the goods were delivered to the religious sectors, it only went to the members so you didn’t get any if you weren’t a member of their church. So there was a lot of inequity going on. (p. 224)

Several people commented on the disruption caused by the influx of aid, and its impacts on the recovery process in the villages. There was a sense of frustration and bitterness toward people who were not affected by the tsunami, but who still took aid.

One person associated the influx of aid from FEMA with Christmas:

When FEMA comes, you know, it is like, um, Christmas… You know, “We gotta get something! We gotta get something!” You know? “Go, go down there, I know you’ll get something.”

Another person explained “the aid was too much.” When so much assistance arrived, it may have discouraged people from relying on local resources and capacities.
Paulson (1993) touched on this issue in her analysis of a hurricane response process in Western Samoa. One of the explanations she offered as to why Western Samoa’s local response had been so effective was that “The amount of aid received at the village level was not overwhelming” (p. 52). Households received very small amounts of goods (some food supplies and a small amount of cash) – not so much that it discouraged village-level rebuilding and recovery efforts.

Previously I discussed how the tsunami resulted in shifts and disruptions in local social structures. While the tsunami may have been the cause of these shifts initially, the outside aid certainly exacerbated the problem. As described above, a pastor’s wife in one of the devastated villages explained that many groups that were meeting before the tsunami were no longer meeting. When I asked why the groups had stopped meeting she explained that people were focused on building their houses and cleaning up their land, and so they weren’t available to meet like they had been before. When I asked what impact she thought this was having on the village, she indicated that it was breeding jealousy among the villagers:

Woman: Before everyone was like close and normal was like to talk to each other or, you know, if they see you anywhere they, you know, they track you down and they say hello. You’ll feel happy to see them, too. But it’s like sometimes, right now, not everyone is happy to see, you know, like, to bring that good feeling, ah… We’ve seen others too that are not even, I don’t know, maybe… Sometimes it’s because of what they’re getting, and what we’re not getting, you know? All that.
Interviewer: Like a jealousy?
Woman: Yeah, something like that. [emphasis added]

The Experience of the Tsunami for Special Populations

One of the primary goals of my research was to document the experiences of special populations in American Samoa. I selected two special populations on which to
focus: the elderly and immigrants. As I discussed in the introduction, the disaster literature identifies these two groups as special populations primarily because they are considered to have specific vulnerabilities. In many respects, this is true in American Samoa. However, the experience of the elderly differed markedly from the literature in a number of ways due to their status in Samoan society. This section will review my findings about these special populations, with an emphasis on how their experiences were similar to and different from members of the general population.

In many ways, the experiences of members of the special populations were very similar to those of the general population. Personal stories of people who survived the tsunami followed a similar script: what they were doing the morning of, their surprise and shock at seeing the wave, what was lost, and who was lost. When asked to recount their experiences on the day of the tsunami these participants shared stories marked with fear, and went on to describe how that sense of fear still lingered. After an emotional focus group with a group of elderly women I wrote in my field notes:

As they told their stories today, all 13 of the women cried, and I cried with them. The pain is still so raw for them – the fear that they felt that day for themselves

When I first began looking into conducting research on the 2009 tsunami, one of the first issues I heard about was the situation of people from Western Samoa who are living in American Samoa. Individuals from Independent Samoa frequently immigrate to American Samoa in search of economic or educational opportunities or for American national status for their children. While Western Samoans often live with family members in American Samoa, people from Western Samoa are treated as second-class citizens in a number of respects (including access to jobs and services such as healthcare). This treatment, I was told, extended to the tsunami, and meant that people from Western Samoa did not have the same access to outside resources as their family members who were U.S. citizens. While I originally hoped to focus on the experience of people from Western Samoa, during my fieldwork I decided to expand the scope of my research to include all immigrants. Unfortunately, I was not able to interview as many immigrants as I had hoped (see the limitations section for a more detailed explanation of why this happened). Still, I was able to collect a fair amount of data regarding the immigrant experiences of the tsunami and the recovery process through interviews with three immigrant participants and second-hand information provided through interviews with other participants. Despite these limitations, I feel that it is important to report on the information I did collect since so little information is available about immigrant experiences in disasters, and since immigrants are left out of most studies.
and their families. And they are still afraid, every time the rains are hard or the winds are strong or the sea is rough. (Field notes, January 12, 2011)

One participant in the focus group, speaking through an interpreter, explained:

She cannot take it out of her mind. Every time, every morning when it rains or the wind blows, … her heart beats faster. She’s afraid. She’s afraid. So you are witnessing another elderly person who is still going through a recovery phase… A very long recovery phase for the elderly person.”

Another similarity between the special populations and the general population was the desire to forget about that had happened on the day of the tsunami, and simply move on. A participant from the Philippines, whose home was completely washed away by the tsunami, repeatedly stated that he couldn’t keep thoughts about the tsunami out of his head. He returned to this theme several times throughout our interview:

Just make a normal day, just like that. For me, it’s, I think that in my, in my mind, that, make it normal day. I don’t want to think the other way, the, what happened… I need to think to myself that, “Don’t think of that.” Make a normal day, go on. Just like that… the…past is past, go on.

Immigrants and the elderly as special populations. While there were a number of similarities, both the elderly and immigrants faced unique challenges during and after the tsunami. One key difference related to the difficulty faced by special populations is their access to outside aid and resources. While the reasons why this aid was difficult to access varied by population, the end result was the same for both: limited access to needed resources.

My data on immigrant access (or lack of access) to outside resources is extremely limited, and should not be taken as more than anecdotal evidence from a small number of specific cases. Still, these cases are instructive. One immigrant participant described how he had received assistance from the Red Cross, but though he was eligible for some
assistance from FEMA, he was denied that assistance because his paperwork was mistakenly filed with the wrong program. He felt that, due to his status as an immigrant, it was best not to try and have the paperwork refilled correctly.

I found some evidence that, for immigrants, their access to resources from organizations like FEMA or the Red Cross had to be mediated by other family members or villagers. A woman from Amanave described how people from Western Samoa who lived in her village were especially in need of help after the tsunami because they were not working. She explained how she was able to help them access aid from the Red Cross, but not from FEMA:

They were able to get the help from Red Cross, because we give them their names and their family because we know they live here. Here in the village. So they were able to get all those. But from FEMA, they have to go through like, one of the, you know, okay, if the family that they’re staying in is US national, so they’re the one who can go and apply and, and, you know, give them the help that they need, ‘cause they’ve got their own places, you know, got their own places.

Other stories surfaced of people extending help and kindness to immigrants in their village, especially in the immediate aftermath of the tsunami.

Because in one village, uh, foreigners, they can’t even speak the Samoan language, but they just made it part of their family, you know, by taking them up to the higher grounds. Like, in one village, Failolo, the people who own the store were, they have no ties to the village. They’re just foreigners. But I guess they, when the thing happened, the villagers took them up to the mountain with them and gave them the whole house to themselves while they slept outside in the village fale that they built, like, tents outside. They said because they don’t have a family here, so they’re going to give them their respect and give them the house, the only house they had up in that mountains.

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9 This may have been related to the closure of a large tuna cannery, which occurred before the tsunami. The cannery employed many people from Western Samoa.
While I was not able to collect as much data as I had hoped on this point, there was a sense among a number of my participants that immigrants, especially those from Western Samoa, were not included as they should have been in the aid distribution process:

… I really think that, you know, even though they’re from Western Samoa, they should still be treated the same as American Samoa because they do live here and they are, um, registered to work here in American Samoa and live here. So, if they have property here, you know, they should get help for their properties also if it was damaged, you know, in a disaster. It shouldn’t matter where they come from. It, all that matters is that they get the assistance that they need because they were affected by the disaster.

In addition to facing difficulties in terms of accessing resources, immigrants faced additional challenges related to being far away from their families when the disaster struck. A woman from Western Samoa described how she knew the tsunami had also hit her home island of Upolu, but she was unable to contact her family members there. A man from the Philippines described how his family was unable to contact him for four days after the tsunami.

The elderly also faced unique challenges. Because of the timing of the tsunami, many elderly people were home alone when the waves struck, or home with the family’s very young children (other members of the household had already left for school or work). Many elderly were physically unable to evacuate on their own. The inherent vulnerability of the elderly is evident in the fatality statistics: the majority of people who died in American Samoa were elderly (Young, 2010).

One elderly woman spoke about her ordeal. She was still in her village when she felt the earthquake. When she and the other villagers looked out and saw that the ocean had moved out from the shore and exposed the ground beneath they began evacuating to
their plantation, higher up the mountain. As she began to evacuate she heard her son calling for help; he was trying to assist a bedridden woman in the village who could not escape on her own. She ran to help him, and was caught by the wave as a result. She survived by holding onto a pole while the wave washed in and out.

Another participant described how her mother was the oldest person in their village that day. She, her husband, and their school-aged children had left for the day, leaving her elderly mother to care for the young children. When the villagers heard that a wave was coming the young children were able to evacuate with the other villagers, but the grandmother could not climb the mountain. She survived because the wave did not hit her village directly. Just up the coast in Poloa, another elderly woman was not so fortunate. She, too, was unable to evacuate with the rest of the village. Poloa, however, was completely destroyed by the wave. Her body was later found behind what was left of the church.

After the tsunami, there were two main categories of unmet needs for the elderly. First, the loss of mobility aids such as wheelchairs and walkers hit the elderly especially hard. These items were not included in the outside aid packages, and were difficult to replace. Without these items, many elderly were immobilized in the weeks after the disaster. Secondly, there were stories of the elderly, who were unable to leave their homes easily and access aid for themselves, being unable to obtain the food, water and clothing that they needed. I have no way of gauging how widespread this issue was, or understanding why these elderly persons did not receive sufficient assistance from their family members. People who worked with local organizations tasked with assisting the elderly, however, reported that this need was fairly widespread.
Special populations, but at opposite ends of the power spectrum. While both the elderly and immigrants faced unique vulnerabilities related to their status as special populations, it is also important to note that these two groups are at opposite ends of the power spectrum in American Samoa. Life for immigrants in American Samoa is fragile. In order to enter the country legally, a person needs to have a sponsor who is a citizen of American Samoa. Based on what I learned through my interviews, the sponsors accept full responsibility for the people they sponsor, and in turn, can withdraw their sponsorship at any time, without warning. The power differential between immigrants and citizens is more severe than I realized, and it manifests in subtle (and sometimes not so subtle) discrimination in the daily lives of immigrants.

Examples of discrimination against immigrants, or the view that they are second-class citizens, arose frequently in the course of my fieldwork. One woman, in telling a story where her then suitor had offered to pump gas for her car, responded to him by saying, “No, let the Tongan do it.” Another woman, who made handicrafts to sell to tourists who come on cruise ships, explained that she had never been able to sell her crafts at the market in town because “they reserve the stalls for the Samoans first” (Field notes, January 7, 2011). A third woman explained that it was simply too dangerous for her to speak to me, because her words might be used against her later. Other people described how immigrants were most often employed in the fish canneries (a job that is considered undesirable) or on the plantations.

For people from Western Samoa, the situation is even more complex. Immigrants from Independent Samoa can be considered economic immigrants, but they are not, by and large, cultural immigrants: that is, they have changed their geographic location, but
both their place of origin and their host country share a similar culture. Also, the situation for Samoan immigrants is unique because they are extremely integrated into the general population in some ways (they typically live in the same home with their relatives from American Samoa, and participate in the same core social activities), but not integrated in others. One woman, in recollecting her childhood, told me that her Western Samoan family members were brought in to do chores: things like gathering firewood and working the plantations. She remembered, as a child, asking her mother if she could go with her cousins to find firewood, but her mother said no, that was a job for the Western Samoans. She said that this is still the case today. It is not surprising, then, that this daily discrimination translates into vulnerabilities in the wake of a disaster.

In contrast, the elderly are highly respected in Samoan culture and play an important role in family and village life. While there is some evidence that the views of the elderly are shifting as American Samoa becomes more modernized and more American Samoans spend time living off island, the vast majority of American Samoans still report that the elderly are highly respected (Pearson, 1992). A participant explained: “If you can see in our society, in our society it is the elders who have the power, you know what I mean? It is them who hold the knowledge of how to lead the family…” In a family-centric social system, it is the elderly who are ultimately responsible for the well-being and continuation of the family unit. Another woman echoed this sentiment: “The elderlies, they’re always seen as, um, the most knowledgeable and the wise ones.” While the elderly were physically vulnerable during and after the tsunami, then, their power and responsibility in society set them quite apart from immigrants.
The elderly “carry the load.” While my interactions with immigrants were limited, I was able to spend quite a bit of time with the elderly in several different villages. In addition to conducting interviews and focus groups with the elderly, I also had the opportunity to attend a number of meetings of local organizations whose mission is to serve and represent this population. These organizations are a marker both of the deep involvement of the elderly in everyday life, and of their evolving role within the community. Two of the organizations I encountered were active before the tsunami, and one had been created as a result of the tsunami. The groups had a range of goals, including providing work and economic opportunities for the elderly, planning social events for the elderly, and advocating on behalf of the elderly. At the time of my fieldwork these groups were just beginning to combine and coordinate their efforts.

As the keepers of the history of American Samoa, I was curious to hear about the elders’ past experience with disasters. When I asked whether they had ever heard of a tsunami, some said they had heard stories from their parents or grandparents about galu afi (fire wave) or galu lolo (big or deep wave), the responses were mixed. Some said they had never heard of such a thing, while others remembered hearing stories:

I heard my father talked about galu lolo which had occurred in the early 1930s. But that was not a strong one. No one got hurt or afraid for that was quite mild galu lolo. He told me that he was fishing at dawn and a big wave about 12 feet high brought him back to shore right in front of our Catholic Church in Leone… When that galu lolo pushed back, he held on a mango tree inside his canoe. I thought that was an awesome story and did not forget it for it seems like galu lolo is part of our nature but we tend to forget. It can be destructive and it can also be mild. I grew up knowing that galu lolo or galu afi is part of us for the land and water is the realm of our nature… (Website post, May 12, 2011)

In all of my interactions with the elderly it was clear that they, as leaders of their families, felt uniquely responsible for the loss and suffering their families faced from the
tsunami. Among their other responsibilities, the elders are responsible for ensuring that the family is prepared for the future, including designating new leaders within the family. In this way they ensure that the family’s needs are met, and that the new generation is left in good hands. When the tsunami came, it ruined all of their plans, and left many feeling helpless:

If you can see in our society, it is the elders who have the power, you know what I mean? It is them who hold the knowledge of how to lead the family and then something came along which was out of their control. You know in everyday life they control what is going on in the family, they have a say who is chosen to do what, who’s - and here comes the tsunami which is out of their control. It takes a whole bunch of the family members who were, you know… they were prepping for the future. You know, like say these are our chosen leaders who are for a certain purpose, and maybe the wave came and took out that person and now they’re, they’re scrambling, they’re saying “Oh, it’s all out of our power now. It’s totally topsy turvy” you know what I mean? So for them, it’s building up on them ‘cause their families are looking up toward them, you know, so they have this extra stress on them. And as leaders, you know leaders, they take stress upon them. They don’t open much to their, they don’t want to show weakness down to whoever, even if it’s a son, a daughter. It is just that they’re the ones that have the final say in the family. But, now they don’t know what to do, you know, their hands are tied, they’re out of a house, their children are out of a house, so in reality now they’re taking things more and more upon themselves.

Some of them were worried about shelter for their kids and for themselves ‘cause a lot of homes have been destroyed at that point. A lot of them were worrying about, it’s more like, you know, they were elders but they were strong. They weren’t worried about them because they had that, like, sense that their time is coming up but they wanted to make sure that if they do go that their kids and, you know, and their grandchildren were taken care of ‘cause you know like at the beginning at the scene, like, before the disaster they saw the future bright and you know flowery, you know, like their kids it’s settled. But then during after the disaster they lost hope of what’s the future of their, you know, kids growing up.

When their family’s future was suddenly threatened, the elderly felt personally responsible. This deep sense of responsibility, when combined with the cultural expectation of emotional restraint and isolation, took a great toll on the elderly. A
Samoan counselor from the Counseling Program commented on the effects she had seen in her elderly clients:

But somehow, two things they were blaming; one is God, because they’re so really, really into church. One is God, they blame God for this, and second one, they blame themselves for not being prepared to take care of the family. So they’re blaming themselves for that… So it really, really affected them emotional wise because of that. They weren’t able to take care of their families in, like, material wise, physically, and also emotional else. Then, they just let go. Some, they were just lying on their beds and just welcoming death.”

The elderly felt that it was their responsibility to carry the loads for their families, and for many, the burden was too great.

**Discussion**

The purpose of this study was to increase our understanding of the disaster recovery process in non-Western cultural settings by documenting the lived experiences of residents of American Samoa (including members of two special populations) during and after the tsunami of 2009, with a particular emphasis on how affected communities drew upon existing resources and local capacities in the recovery process. This study was framed by three questions, each of which I will address in turn.

The first question related to the experience of the tsunami for special populations, and the ways in which their experience differed from that of the general population. My original intention was to gather data from both the elderly and immigrants. While I was able to gather a great deal of data of the experiences of the elderly, ethical and logistical issues made interactions with immigrants more complex. Still, the limited data I was able to collect suggests that both groups faced numerous challenges in the aftermath of the tsunami. The elderly, however, are highly respected and are considered leaders of their
families. While the elderly were physically vulnerable during and after the tsunami, their status in society set them quite apart from immigrants.

The second question examines the social and physical resources that residents drew on in the recovery process, and asks what their experiences can teach us about how communities with limited external resources recover. Residents of American Samoa leveraged a suite of local resources in their response to the tsunami. Key resources included family and village networks, family members living off-island, and local organizations and churches. American Samoa also received aid from a number of international aid organizations. My data suggest that while this outside aid was initially helpful, the type of aid that was provided and the ways in which it was distributed ultimately proved disruptive to local rebuilding and recovery efforts.

The third question addresses the issue of how disaster-affected communities leverage and contribute to their social networks during the recovery process, with a specific focus on the role of social support and social embeddedness. My data indicate that the social networks were very responsive with regard to providing physical assistance (e.g. cleanup and rebuilding), but that, due to cultural norms related to expressing emotion, the emotional support available from victims’ social networks was not sufficient to meet their needs. Additionally, victims experienced intense and on-going fear that was strong enough to disrupt their normal activities, especially activities that take place in or near the ocean. Social support and social embeddedness decreased as women’s organizations stopped meeting, families were displaced and relocated, and village social networks were disrupted.
In the next section I frame the overarching themes of this study as they relate to the questions posed above, discuss applications of these themes in the Samoan context, and analyze the applicability of current theories of disaster response and recovery. In particular, with respect to the third question, I address the need identified through my study to build emotional resilience in American Samoa and present the stories of three local groups that are leading that effort. Also, given that many of the respondents mentioned continued fear and changes in their behaviors resulting from this fear, it is helpful to discuss the emotional response to the tsunami through the lens of posttraumatic stress disorder and how these symptoms may impact recovery. Finally, I describe the response and recovery process in American Samoa using the Social Support Deterioration Deterrence model.

The experience of special populations

Both immigrants and the elderly faced unique vulnerabilities in the aftermath of the tsunami. For immigrants, especially, the subtle discrimination they face daily and their status as second-class citizens translated into an inability to access needed aid. While there were stories of people going out of their way to assist immigrant victims of the tsunami, most, it seems, were not so fortunate. Anecdotal evidence suggests that immigrants were the last to receive available resources, and that aid provided by outside organizations was often completely inaccessible to them. Even beyond the specific context of this disaster, life for immigrants in American Samoa is fragile, and there seems to be little chance that their situation will change any time soon. A recent and sobering example of this was the situation of more than 200 Vietnamese and Chinese immigrants
in American Samoa that became international news in the 1990’s when Daewoosa, the clothing manufacturing company under which they were employed, was accused of engaging in “modern day slavery” (Guardian, 2003). According to media reports, workers at the plant were routinely “cheated of their wages, beaten, starved, sexually harassed and threatened with deportation if they complained” (Institute for Global Labour and Human Rights, 2003). The owner of the sweatshop was convicted in 2003 of human trafficking and holding the Vietnamese workers under conditions of involuntary servitude in what was the largest case of human trafficking ever investigated in the U.S. While the outcome of this case may have helped these factory workers, it did not, to my knowledge, lead to legal reforms that would keep this situation from being repeated or that would alter the immigration laws that require immigrants to have a resident sponsor.

The elderly also faced unique vulnerabilities due to mobility issues and the fact that many elderly persons were home alone or with young children when the tsunami struck. Unlike the immigrants, however, the elderly are highly respected, and are considered leaders of their families. While the elderly were physically vulnerable during and after the tsunami, then, their status in society set them quite apart from immigrants. While some did face challenges in accessing resources, they were still firmly embedded as respected members of their family units, and seen as having an important role in supporting and leading their families through the recovery process. The elderly also faced a unique burden because of their role as family leaders in that they felt it was their responsibility to “carry the load” for their families. It is their responsibility to ensure that their family’s needs are met and to prepare the next generation of family leaders. When the tsunami struck, it disrupted all of these plans and left many feeling helpless.
Reassessing the role of outside aid in non-Western cultural contexts

By all accounts, the local response to the tsunami was impressive. Residents mobilized to help with the rescue and clean up efforts, and to provide food, water, and shelter to those who needed them. Still, the magnitude of the disaster meant that outside aid was necessary. The outside aid that arrived in American Samoa after the tsunami was critically helpful in many ways. There was an acute need for food and water, and outside aid organizations helped to meet those needs until additional help could be mobilized from family members off-island, church networks, and other sources of assistance. In other respects, however, outside aid (and the way it was distributed) resulted in a significant disruption of local response efforts, social networks, and village hierarchies. This case study of the tsunami in American Samoa provides a poignant example of the need to reassess the role of outside aid organizations in non-Western cultural contexts.

We know from the literature that aid and relief operations often “ignore and ‘mis-recognize’” (Telford & Cosgrave, 2007, p. 17) the existing capacities of disaster affected communities. Additionally, challenges arise when disaster aid workers are operating from a different set of assumptions and beliefs than the impacted community:

…these helping volunteers and professionals may lack information and understanding of the lives of those individuals they are trying to help. Helpers’ working models of how to help, of what help is needed, or of what is appropriate and when are direct reflections of their own cultural and societal standing and convictions. (Kaniasty & Norris, 1999, p. 36)

The tsunami in American Samoa precipitated a complex set of events in which Western aid organizations responded to and attempted to aid disaster victims with a different cultural worldview. I have suggested that the main issue in American Samoa may not have been a lack of aid, but rather that the way in which that aid was introduced
was fundamentally disruptive to local response efforts. Instead of being helpful, the introduction of aid was disruptive, and in the end, that aid failed to reach its intended recipients.

The reasons why the aid did not always reach its intended recipients are varied and complex. To begin, it’s important to recognize that in Samoan culture everything is determined according to the social hierarchy. For example, traditionally the division of food is strictly guided by ceremonial rules. If a pig (or a turtle, or shark, etc.) is killed in the village, the pig must be carefully divided and distributed to members of the village according to each person’s status; the best pieces go to the high chiefs (see Figure 3 for an illustration) (Hiroa, 1930; Hiroa, et al., 1966). In this way, the pig provides a helpful analogy for understanding why the post-tsunami aid was distributed like it was. When the aid arrived, it was delivered to the chiefs who kept the best pieces and distributed the rest accordingly. From this perspective it wasn’t corruption, it was custom. As an outsider observing this system, it would be difficult to determine what ‘appropriate’ distribution looked like. In fact, a
generation ago the patterns of distribution may not have been questioned at all, but the culture is changing.

Beyond this cultural norm, the outside aid, when it arrived, entered a context in which local response and recovery operations, based on cultural norms and the work of local people and organizations, was already underway. The people of American Samoa were in need of help, but they were not helpless, and this is a very important distinction. They were leveraging their capacity as families, social groups, and villages to respond to their needs using methods that emerged from cultural beliefs, practices, and norms. People knew what they could expect (the village hierarchy would have played into this), and they knew from where they could expect it. Outside disaster response efforts appeared to mis-recognize these capacities, and in so doing, caused an interruption in this existing system of response:

...you had [many organizations] all landing at the same time and choosing who they were going to go and give these things to. That kind of... changed the, the landscape of people. Uh, “Did you get assistance? Who did you get that from?” You know, “We didn’t get a tent,” and “We didn’t get this! We didn’t get that!”... And you know... the last supplies, the village mayors, they just gave it to their families... And I say that to you quite freely because that’s really what people, what happened. [emphasis added]

The influx of outside aid changed things. There are many possible explanations as to how and why this change occurred. One likely contributing cause was the fact that most of the aid that arrived was physical aid: food, water, clothing, tents. And yet, as I have established, the response to the physical damage caused by the tsunami was rapid and extraordinary, and physical resilience is a core capacity of American Samoa that has evolved to meet people’s physical needs. While the aid received in the days immediately
following the tsunami was seen as helping survivors “over the hump,” it was not reflective of the fact that this system, while strained, was still quite functional.

A second possibility is that the influx of aid changed the expectation of help. If we think of the response process as a system, then affected individuals would expect help from three primary sources: family and village leaders, churches and other local organizations, and family members living off-island. The arrival of outside aid introduces a large and unfamiliar source of potential assistance, thereby introducing a volatile factor into the system. Related to this, it seems likely that the volume of aid discouraged reliance on local resources and networks as other options were introduced.

Finally, it is possible that, rather than precipitating this change in the landscape, the influx of aid exacerbated an underlying cultural shift. Historically, one’s status in Samoan society is determined by how much one gives away – generosity. One woman told me a story about her grandfather, who was a matai and a minister. When he would travel to another village to preach that village would always give him food and gifts to take home. When he got home he would divide everything up, then have the grandchildren go around the village to distribute it. This is the kind of behavior that matai were expected to display, and many still do. When a pig was divided, the best parts may have gone to the most important members of the village, but everyone got enough. In recent years, though, my respondents reported that this has begun to change as people have become more materialistic. With this shift in values the emphasis is placed on what one has. This may have contributed to the issues that arose with some of the aid that was given to the matai not being properly distributed in the village. The volume and the nature of aid that was received may have shifted this balance. While it seems that basic
necessities, such as food and water, were distributed according to need (at least in the
days immediately after the tsunami), complaints about greed and hoarding tended to
focus on non-essential goods such as coolers, tents, and cash. The fact that the matai kept
the first and best goods for themselves and their families would not necessarily have
cause discontent. Maybe this time, though, they simply kept too much.

Whatever the underlying cause, the influx of aid placed considerable strain on
local social systems. There is an important lesson here, which is that there is a danger in
operating from a partial understanding of the culture. The aid organizations that
distributed supplies to the village matai had clearly done their homework, learned about
the centrality of the matai system to Samoa culture, and then acted according. This is
laudable. However, by acting on a surface-level understanding of the culture, their well-
intentioned attempt at cultural sensitivity became a major flaw in their efforts, and
probably a major stumbling block in American Samoa’s recovery. We can see from this
case study that minor adaptations to a Western model do not result in a culturally
appropriate model; they only result in a slightly altered Western model, still ill-suited to
other contexts. Relief and recovery organizations must rethink this approach.

Additionally, relief and recovery organizations bypassed opportunities to work
with and support local organizations. These local organizations (which, in American
Samoa, include non-profit organizations, village organizations, and churches) played vital
roles in the functioning of American Samoa before the tsunami, and they are crucial
players in the long-term recovery of their villages and society. By working through these
local organizations to provide aid outside organizations could have provided aid in more
culturally appropriate ways, helped to ensure that aid reached its intended recipients, and
made an important contribution to the success of long-term recovery efforts. These are the organizations that are going to be responsible for the success of American Samoa after the outside organizations leave, and that makes them a very good investment.

I have only been able to scratch the surface of a much larger issue. In reality, any time a disaster strikes in a non-Western cultural context, the result is a meeting of two very different worldviews: that held by the relief organization, and that held by the affected population. The relief efforts may be altered to fit the local context, but the underlying cultural assumptions are still those of the responders. For American Samoa, we are left with the questions of how the response and recovery process could have been made to fit better in this cultural context. What could have been done differently so that it was supportive of, instead of disruptive to, local capacities? One solution might be to have community members or representatives of community organizations serve as intermediaries to the outside organizations, as they could provide important information on locally-appropriate methods and means of providing support (Kaniasty & Norris, 1999). However, this runs the risk of reinforcing negative social biases, and may be complicated by the social hierarchy. I believe it would be extremely beneficial for a future to study to address these questions directly, as they have important implications for the future of American Samoa, as it will, inevitably, face another disaster.

**Building Emotional Resilience in a Samoan Cultural Context**

I will now turn to the question of how communities in American Samoa leveraged and contributed to their social networks over the course of the disaster. While affected individuals received considerable support from their social networks with regard to their
physical needs, those networks, in keeping with cultural norms, could not provide sufficient emotional support. No past events (at least none in living memory) had prepared Samoans to deal with the emotional aftermath of such a major trauma. When the tsunami struck it unearthed a need for greater emotional support and, more broadly, a need to build emotional resilience.

I found only one other recorded event that offers some insight into the questions of how Samoans deal with a severe, collective trauma. In 1964, 250 members of a Samoan community who were living in San Francisco attended an evening dance and entertainment event in the social hall of the All Hallows Church. A fire erupted during the event in which 17 people were killed and 41 suffered severe burns (Ablon, 1972). Ablon (1972) documented the fire and its impact on the Samoan community. Much of Ablon’s analysis was based on accounts given by emergency room physicians and staff whom had cared for the injured and dying on the night of the fire. The staff commented on the unemotional response displayed by relatives of those who died. The surgeon in charge of the emergency room stated that he “had no occasion to give medication to relatives for shock for grief – ‘not even an aspirin’” (p. 15). This same sentiment was expressed by multiple informants:

Red Cross officials, physicians, and lawyers independently, but in a remarkable consensus, commented on the extraordinary manner in which Samoan fire victims and their families absorbed the disaster and its effects on their lives. Most made a point of stating that Americans in such a situation would have been far more agitated and would have demonstrated much more overt emotional distress. (p. 23)

There are ways in which Samoans are very well equipped to cope with disaster, both as individuals and family units. There is a system in place for dealing with tragedies;
it is to grieve for a time, but then to move past the grief and return to the task of running the family. In the case of the death of an individual, and in the context of this cultural expectation, grief can be contained. Even in the case of a larger, community scale event like the All Hallows Church fire, it seems that people were able to quickly move past their losses and suffering. The approach of “it happened, now let it go” seemed to be a workable solution. The community’s capacity to absorb the disaster was not exceeded.

Conversely, with the tsunami, people were still suffering the effects of the trauma sixteen months later. So why was the tsunami different? Why did the normal approach of compartmentalizing emotions and moving on not seem to work? Was it the scale of the event (after all, while losses from the fire were certainly tragic, people did not lose their homes and all of their possessions in addition to their loved ones)? Or was it the community-level impacts? Ablon (1972) described how Samoans have their own disaster plan, but the family and community are that plan. Helping each other with physical needs and family logistics is that plan. What happens when all the help has been given, and all the work is done, and people still cannot forget? What happens when this plan is not sufficient to meet the needs of the village? Under the weight of an event of this scale, the system buckled. And in this case there was an added component – a deep-seated fear – that is not present, for example, when an individual dies, and that makes it very difficult to just forget what happened. People cannot stop thinking about what happened, and the culture is not equipped to manage this contingency.

Still, there are groups of people in American Samoa who are forging new, culture-specific adaptations to the emotional and social needs that arose in the wake of the tsunami. These groups have recognized that the strategies and cultural norms that have
been developed to help people deal with loss and tragedy were not sufficient for this event, and they are setting an example of how the culture can adapt and become more resilient to major, community-scale events. I will discuss three examples: a group of elderly women in Pago Pago, the Counseling Program, and a group of men in Leone.

In Pago Pago, there is a group of elderly women who meet every day in a large *fale* on the ocean. They were meeting there before the tsunami, many of them were there during the tsunami, and they have continued their meetings since. These women are participants in a government funded program aimed at integrating the elderly into work positions that allow them to share their wisdom and experiences with the younger generations. This particular group is focused on making traditional handicrafts, which they then sell in small shops and at the local market.

I met with this group of women one morning, and they welcomed me to their meeting with hugs and a song. As they began sharing their stories, what was immediately evident was their raw and overwhelming pain. Many of the women began weeping as soon as the discussion began, and they did not stop until we finished an hour and a half later. Part of the reason for their pain stems from the loss of loved ones on that day; four of their friends from the program died in the tsunami. From speaking with them, though, I also got the strong sense that they felt responsible for what the tsunami had done to their families. They are the leaders, the wise ones, in the family, and they expressed tremendous grief for not having prepared their families for the disaster. As they and others described it to me, these women carry the load for their families. Normally, they would be expected to carry this load alone, and not to discuss the business of their families with outsiders. But these women were taking a different approach. As they
explained, the tsunami had become a regular topic of conversation during their meetings. They shared and listened and supported each other as they went about their work. In this way, the women were providing a type of social and emotional support that is rare in Samoan society, and the support they provided to each other made each of them stronger and better able to lead their families.

A second group that I have already mentioned is the Counseling Program. This was a federally funded group that was created after the tsunami to provide counseling services to the public. All but one of the counselors (at least all of the counselors whom I met) were Samoan. They had found this job through various means after the tsunami and left of variety of other roles and positions in order to take it. They received training through the National Child Traumatic Stress Network (NCTSN). Their job was essentially to canvas the island, going door to door and asking how people were doing, assessing whether they needed counseling, and working with the families to provide on-going support. From the start they knew that counseling, especially as it was described by their trainers, was going to be a difficult fit. As one of the counselors described to me:

…that was another big challenge when we started going out there to introduce the program to our, uh, people – to the islanders. It was one of the challenges that we were facing that if they were going to accept it because it’s, it’s not in our tradition. It’s not there.

Only two participants mentioned that they had any previous experience in counseling. Each person, though, had a reason for joining the program and saw it as a way that they could help:

Anyways, the reason why I joined was mostly because I wanted to help out, I wanted to help. You know and that’s always been my thing, is helping out people. Uh, and there was a great need for people here in American Samoa and again, uh, as we spoke earlier there’s really no field for mental health or anything like that.
and this was like a new thing our people, like the tsunami happening, you know it’s not everyday that you see these emotions all affect everybody not only a small part of the village but the whole country as a whole, a nation, Samoans as a whole and I just wanted to help out, you know… You know, some of the stories, uh, you know some found family members, some did not find family members and just them speaking – you know, telling their stories – it’s, you know, you can’t help but commiserate with them, in a way so, you know, you’re part of them or something like that. I guess that’s why we care.

On the week of the disaster, I’m, actually I’m a housewife, um, the second day after the disaster I was telling my husband that morning, if you hear any story, anything about volunteering, any program going on, let me know… and then that same week they found out about the program… I joined not knowing what’s gonna, what we were going to be doing, all I wanted is to help, whatever way. Then found out the kind of help that we are offering, it’s was very good, it was like, it was my field already ‘cause I love to meet new people, I love to help people I love to, I, even before coming to the program I’d always do this in my family. I would, or my group, my congregation, my choir… I am a conductor for my choir and I would love to help them solving problems in, in whatever kind of problems, even with the youth, I am in the youth. So joining in this program helped advance the skills, give me more knowledge on how to cope with the people.

The groups spoke very highly of the training they received and the people who trained them. They also explained how, while they saw a clear need for counseling services, the program as it was presented to them would need to be adapted to fit within Samoan culture. For example, they knew that they could not simply knock on someone’s door and start asking them about their feelings. They took the time to connect with the families they encountered, whenever possible discussing how they were linked either by faith (nearly all of the counselors were pastors or children of pastors) or by blood (establishing the relationship between the counselor and the client’s family lines).

And to them as [another counselor] said, for people, strangers to come into your house, they don’t just open up. They don’t just release. It’s more kept inside. It’s our family business, not your business. But, I guess the uniqueness of the, of our group was there were ways because there was a servant of God, which is easily relatable because they’re saying, “Okay, that person is maybe higher than I am, they will relate to what I have to say. They’ll understand what I am coming
from.” Compared to say, if a stranger came, a complete stranger, who has no ties in American Samoan culture, no ties at all, coming sit here, they wouldn’t open up that much, you know they’re saying, I don’t know who this person is, why should I open up more? So, that was, I guess, the uniqueness of this thing right? Because they were servants of God who work with us like we had uh, ministers, uh, people related to churches, pastor’s daughters, pastor’s sons, all these things.

Another crucial adaptation was the way in which the group blended counseling with other (standard and acceptable) forms of help:

And that was, that was the mind set here was that helping is doing for somebody else, and that really had to change. The model that they brought for us to work upon was based on their experience in the mainland – Umm, Katrina, 9-11 and so, you know, the first thing was immediate needs: food, water, shelter. And then they would be referred out. Well when it happened there was VOAD, Red Cross and some other smaller organizations. Um, the distribution of goods wasn’t what it should have been. And it’s sad to say, but it didn’t get distributed the way that it could have been. And so when we went out to visit, many of the people that we saw didn’t have food, water, and they had very little clothing left. And so the response from many of us here was, “Well, can we go buy this, I want to give them something, I want to do for them…” and that was something that we were told we couldn’t do. But we had to find some….middle ground because the way that the model was wasn’t gonna work here… And I think we as a group reconciled, um, helping from the model and doing as a culture. If they were going to stick by the textbook and their own past experience, we would have been done with them in three months and nobody would want to talk to us.

The counselors saw an unmet need in their communities, and adapted what they saw as a useful tool to help meet that need. They shared several stories of how their program had, indeed, helped others, many of who did not initially acknowledge their need for help. I have already shared some of their stories, but here is one more that demonstrates the somewhat surprising effectiveness of this locally adapted model:

I would say, the biggest, one of the most impacting stories for me was just, I visited a lady who, who lost her daughter. And the last thing that she felt was her daughter’s hand slip out of her hand and she was taken away. And she grieved for a long, she grieves today. Um, but when I met her, you know I’m, I’m a counselor and I’m trying to think, well, how do I help this lady, a month and a half later, how… What can I say that’s going to help her! And I didn’t have anything. So I told her, you know, I’m at a loss I, you know, of all the things running through
my head and my heart right now to talk to you, I don’t know what to say to you. So I asked her what would be something that I could ask you that would help? And she said oh everybody asks me how am I doing and bringing me something and money or something you know but none of that helps. But nobody ever asks me about my daughter. So I asked her, so tell me about your daughter. And she started crying and telling me about how she loved to dance and to sing and her favorite things at school and what she liked to do with her brothers and… so subsequent visits you know, not the first question but, you know in the conversation you know I always make sure that I ask her, so tell me something else about your daughter. She’s always willing to share.

Young (2010) documented a related example of cultural adaptation in Leone, a rural, coastal village that was badly damaged by the tsunami. She describes a group a men who call themselves the Tsunami Club, and who meet in the evening to play cards, share a few beers, and talk. One of the members describes the purpose of the club:

After you have a beer, you start to get talkative and relaxed and then you can talk. We talk and each of us tell our story and find the funny side of it, that’s what we do every night. Some of the stories make us cry, but when we listen together, it makes it better. So that’s why we are quickly healed, I think, because we are tight. We talk every night. And when our friends come to our meetings for the first time and each of us tells a story about the tsunami and we are laughing but they – they are crying because it’s so sad. (p. 334-335)

These groups are providing examples of culturally grounded adaptations to a large-scale disaster. Their activities represent a change in tradition; they are discussing problems outside of the family and acknowledging and sharing the on-going emotional weight left by the event. They are examples of a movement away from the strict belief that problems should not be discussed outside the family to a practice of sharing about what’s happening in one’s own family. They are demonstrating that there is a way to move forward, though it may require a shift in the traditional approach to tragic situations. Time will tell whether their efforts are accepted and adopted by the broader community.
Posttraumatic stress in a Samoan cultural context

While there are examples of groups in American Samoa that are modeling how social networks can provide positive emotional support to affected individuals, the fact remains that the majority of tsunami survivors were left to face their recovery without sufficient emotional support. The consequences of this situation manifested in decreased social embeddedness, on-going emotional and psychological distress, and strained interpersonal relationships. In analyzing these impacts, the issue of posttraumatic stress developed as an emergent theme from my data.

My participants displayed and expressed several emic descriptors of posttraumatic stress, which arose without specific prompting and from very general questions such as “Tell me what happened that day” and “Do you still think about what happened that day?” Reviewing the findings from previous sections of this paper, we can see a number of recognizable markers of posttraumatic stress. These include the strong desire to forget the tsunami that was expressed by a number of my participants, as well as deep-seated, on-going feelings of fear that were severe enough to interfere with everyday activities (driving, swimming, fishing, going to work, and even relocating to villages farther from the ocean). Other participants described an inability to sleep or an experience of recurrent nightmares. Other culture-bound symptoms were present that may also be indicators of posttraumatic stress. Since these symptoms presented so frequently in my data, and since the issue of the applicability of diagnostic criteria and treatment for post-traumatic stress disorder (PTSD) in non-Western cultural contexts is one of current interest in the field, I will briefly address this issue here.
A small number of studies have applied the diagnostic criteria for PTSD in non-western cultural settings. In general, these studies find some overlap with regard to the criteria defined in the DSM, but also some marked differences, or ways in which PTSD is not a full or accurate description of the posttraumatic symptoms of the group studied. For example, a study by Jenkins (1996) examined the relationship among culture, emotion, and posttraumatic stress among female Salvadorian refugees living in the northeastern United States, all of whom had been exposed to a traumatic event while living in El Salvador. She found that symptoms of Criterion B (intrusion) and Criterion D (arousal) were common among participants, while symptoms of Criterion C (avoidance of stimuli associated with the trauma) were rare. She also cited several culturally specific symptoms that were not accounted for in the DSM, notably those experiences described by the women as nervios (which includes anxiety, fear, and physical pain, among other complaints) and calor (an experience of intense heat running through the body). Norris, Murphy, et al. (2001) conducted a qualitative analysis of posttraumatic stress among Mexicans who had experienced major natural disasters. In assessing the extent to which the survivors’ symptoms corresponded with the criteria of PTSD, they found that 14 of the 17 criterion symptoms were mentioned by study participants. However, over 100 of the expressions given by participants did not fit within the DSM classification; further evidence that “Too much reliance on ‘Western’ definitions of posttraumatic stress may cause important expressions or idioms of distress to be missed” (Somasundaram, Norris, Asukai, & Murthy, 2003, p. 302).

Many questions about the interrelationships of culture and trauma remain unaddressed in the literature. Norris, Perilla, and Murphy (2001) describe the importance
of increasing our understanding of how contextual, social, and cultural factors influence posttraumatic stress outcomes. The literature calls for additional studies to increase our understanding of posttraumatic stress responses in non-western cultural settings (Norris, Perilla, et al., 2001; Wilson, 2007). Furthermore, while we may have identified similarities across cultures in terms of the experience of trauma, differences in the perception, expression, and treatment of trauma need to be understood if we hope to develop more appropriate and effective disaster response plans and interventions.

In keeping with previous studies on posttraumatic stress symptoms in non-western cultural contexts, I found both responses that were congruent with the criteria for PTSD and responses that were outside of the DSM designation. As I conducted my interviews 16 months after the tsunami struck American Samoa, the symptoms of posttraumatic stress that I observed must be labeled as chronic. According to the DSM-IV-TR (American Psychiatric Association, 2000), if symptoms of PTSD persist more than three months past the traumatic event, they are classified as chronic. Symptoms that appeared in the interviews are listed in the table below, along with examples of how each criterion was expressed.

Table 1 Observed Criteria for Posttraumatic Stress Disorder

<p>| Criterion A: The person has been exposed to a traumatic event in which both of the following have been present: (1) the person has experienced, witnessed, or been confronted with an event or events that involve actual or threatened death or serious injury, or a threat to the physical integrity of oneself or others, and (2) the person's response involved intense fear, helplessness, or horror. |
| Criterion B: The traumatic event is persistently re-experienced in one (or more) of the following ways: |
| B1: Recurrent and intrusive recollections of the event, including images, thoughts, or perceptions | Frequent reports of people “trying to forget” about the tsunami, but not being able to. Reports of people being unable to keep from recalling thoughts and images: “… sometimes when it’s go away, it’s going to come back. It’s just like a camera and a picture to us, you know…” |</p>
<table>
<thead>
<tr>
<th>Criterion</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>B2</td>
<td>Recurrent distressing dreams of the event</td>
</tr>
<tr>
<td>B4</td>
<td>Intense psychological distress at exposure to internal or external cues that symbolize an aspect of the event.</td>
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<tr>
<td>Criterion C: Persistent avoidance of stimuli associated with the trauma and numbing of general responsiveness, as indicated by 3 or more of the following</td>
<td></td>
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<tr>
<td>C1</td>
<td>Efforts to avoid thoughts, feelings, or conversations associated with the trauma</td>
</tr>
<tr>
<td>C2</td>
<td>Efforts to avoid activities, places, or people that arouse recollections of the trauma</td>
</tr>
<tr>
<td>C4</td>
<td>Markedly diminished interest or participation in significant activities</td>
</tr>
<tr>
<td>Criterion D: Persistent symptoms of increased arousal as indicated by two or more of the following:</td>
<td></td>
</tr>
<tr>
<td>D1</td>
<td>Difficulty falling or staying asleep</td>
</tr>
<tr>
<td>D2</td>
<td>Irritability or outbursts of anger</td>
</tr>
<tr>
<td>D4</td>
<td>Hypervigilance</td>
</tr>
</tbody>
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Source: Diagnostic and Statistical Manual of Mental Disorders Fourth Edition Text Revision

There was no evidence in the interviews of several criteria, including:

- B3: Acting or feeling as if the event was recurring.
- B5: Physiological reactivity or exposure to internal or external cues that symbolize or resemble an aspect of the event.
- C3: Inability to recall an important aspect of the trauma.
- C5: Feeling of detachment or estrangement from others.
• C6: Restricted range of affect.
• C7: Sense of a foreshortened future.
• D3: Difficulty concentrating.
• D5: Exaggerated startle response.

Two of the non-observed criteria are worth further discussion. First, it seems very possible that criterion C5 (feeling of attachment or estrangement from others) may have been present, but that those feelings simply were not expressed. This would be in keeping with the cultural constructs described above (reserving emotional expression for appropriate settings, not discussing one’s problems outside of the family, prioritizing family above personal needs, etc.). Secondly, criterion C6 (restricted range of affect) is a more accurate description of the norm in Samoan culture, rather than an indication of a psychological disorder.

Participants also expressed physical symptoms not accounted for in the DSM. For example, one woman I interviewed described how her elderly mother, in addition to having insomnia and being noticeably shorter-tempered with the children, had also had high blood pressure since the tsunami, and had spent time in the hospital as a result. Similar somatic responses were reported by elderly clients of the Counseling Program, and included blurry eyesight, loss of appetite, and loss of physical strength. There were also reports of babies whose mothers were caught in the wave and who were born shortly thereafter displaying medical problems that included shaking, shivering, and rapid heartbeat. While these physical symptoms are not considered diagnostic criteria for

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10 It is also possible that, given Samoans’ reluctance to seek medical care, this woman had high blood pressure before the tsunami, but had not undergone a medical exam through which it could be diagnosed.
PTSD, research has shown that the experience of traumatic events severe enough to cause psychiatric disturbance (i.e. PTSD) does lead to poor physical health outcomes (Schnurr, Green, & Kaltman, 2007). More specifically, PTSD has been shown to result in behavioral (e.g. excessive alcohol consumption), physiological (e.g. cardiovascular conditions), and attentional (e.g. increased negative health perception) changes that reduce an individual’s ability to cope with his environment in a way that fosters good physical health (Buckley, Green, & Schnurr, 2004; Schnurr, et al., 2007)

To my knowledge, no studies have been conducted that address the applicability of PTSD or that identify culturally embedded expressions or idioms of traumatic distress in Samoan culture. Furthermore, I am not aware of any idiom used by Samoans to refer to one’s response to a traumatic event. I heard the term PTSD used in only two circumstances: the first was by a US-trained therapist, and the second was by an Iraq War veteran who was being treated for PTSD by a military therapist. One study conducted with Western Samoan populations living in New Zealand did address views of mental illness and the appropriateness of mental health services with this population (Tamasese, Peteru, Waldegrave, & Bush, 2005). Participants in this study (primarily male and female Samoan elders who participated in focus groups) emphasized the Samoan belief in a holistic self, comprised of physical, mental, and spiritual components (other sources describe the natural, social, and spiritual selves). These components cannot be separated.

If I become mentally unwell, everything else is not well. If I become physically unwell, everything else is not well. I cannot say, “I will leave my spirituality while I go and get on with my physical function,” or “I will put aside my mental function while I undertake my spiritual duty. The whole person is all parts. The person cannot be divided by anyone. (Tamasese, et al., 2005, p. 303)
While PTSD is not considered a mental illness, this view of the self as a holistic entity offers an explanation for the somatic symptoms displayed, including high blood pressure, blurry eyesight, loss of strength, and the rapid heartbeat, shaking and shivering reported in newborns. This also helps to explain why the Counseling Program felt it was so important to adapt their counseling training to a Samoan model that could better meet the needs of the whole individual: physical, mental, and spiritual (and why the program was so successful).

The participants in the study by Tamasese, et al. (2005) also provided several explanations of what might cause a Samoan person to experience psychological distress or mental illness. The primary cause given was a breach of relationships that are considered sacred or forbidden. Possible causes that are more pertinent to this discussion included the presence of unresolved grief, isolation from collective support systems, and an inability to fulfill family responsibilities and roles.

Clearly, more research is needed on the manifestation of posttraumatic stress in the Samoan cultural context. However, my data indicate that symptoms of posttraumatic stress are fairly widespread in American Samoa, and they are making the process of recovery significantly more difficult for those who are suffering from them. In addition to the experience of the symptoms themselves, individuals are faced with the challenge of a cultural system that does not recognize their condition, and does not provide social support systems for acknowledging and talking about their experiences.
Applying the Social Support Deterioration Deterrence Model as an analytical framework

In this section I will develop an analytical framework for the case study of the tsunami in American Samoa, using two related models: the social support deterioration (SSD) model and the social support deterioration deterrence (SSDD) Model. Taken together these models, which are described in detail in the literature review, provide a useful platform for analyzing disaster response and recovery by tracking the influence of social supports.

The social support deterioration model asserts that post-disaster psychological distress is related to decreases in social support, with social support being defined as having three components: received support (support actually received by victims), perceived support (the support a victim expects to receive or assumes to be available), and social embeddedness (a measure of an individual’s relationships within a community). Social support typically surges immediately after a disaster, and then rapidly declines. Norris, et al. (2005) articulate a number of possible explanations for this decline in social support, including: (a) needs may exceed the level of support available, such that people do not have access to the support they expected, (b) major life changes caused by the disaster, such as relocation, job changes, and death cause significant disruptions in social networks, (c) social activities are often disrupted or abandoned, further isolating victims, and (d) physical and emotional fatigue, or a scarcity of resources may increase the potential for interpersonal conflict. In time, “the mobilization of support yields to deterioration of support” (Norris, et al., 2005, p. 16). The social
support deterioration deterrence model expands on the SSD model by theorizing that sufficient levels of received support can counteract this decrease in social support.

Applying the social support deterioration deterrence model to American Samoa provides insight into the events that followed the tsunami. Let’s begin with the issue of received support. The literature has suggested that received social support can be categorized into three types: acceptance and comfort (emotional support), information, and material or physical support (Norris, Murphy, et al., 2001). According to my data, an adequate level of physical and material support (cleaning up, rebuilding, sharing food, etc.) was mobilized and received by the majority of victims in American Samoa (the main exception being people whose homes were destroyed and who were still waiting for payments from FEMA), such that received physical support followed Path E of the SSDD model (see Figure 2). This is not surprising, given that physical support is an outgrowth of Samoan culture.

The same cannot be said of emotional support. Not only was the level of emotional support received highly inadequate, it was never mobilized, nor even expected by residents of American Samoa. How does this relate to our model? We know that emotional support is not commonly provided through social networks in the American Samoan context, except during highly ritualized grieving events. So rather than being mobilized (Path B) and then deteriorating (Path C), it was simply never mobilized at all. A new need developed for intense and ongoing emotional support for which the culture provided no coping mechanisms, nor any cultural script. While there may have been little or no expectation of emotional support, its absence was acutely felt by many survivors. Interesting, this need was recognized and identified by some (including the groups who
began addressing their emotional needs directly and collectively) but not by others (many continue to ignore this need, or appear to not recognize it at all).

At the same time, social embeddedness, a critical component of perceived support, deteriorated markedly. I have discussed many examples of this from my data. In fact, if we look at the possible causes for reduced social support articulated by Norris and colleagues (Norris, et al., 2005), and noted above, we see that many are present in American Samoa:

• Major life changes caused by the disaster, such as relocation, job changes, and death cause significant disruptions in social networks: The tsunami in American Samoa, while it did not directly impact everyone, was a community-scale event in the truest sense. Many people were forced, or felt it necessary, to relocate their families after the event. Those who were not directly impacted had close family members and/or village members who were (nearly everyone I spoke with had lost someone to the tsunami). In this way, the tsunami decimated social resources that are normally available through the extensive family and village social networks.

• Social activities are often disrupted or abandoned, further isolating victims: Social activities were significantly impacted at the village level, especially for women’s groups. Other common recreational activities, such as swimming or picnicking at the beach, were also curtailed.

• Physical and emotional fatigue, and a scarcity of resources may increase the potential for interpersonal conflict: There was evidence of interpersonal conflicts
developing among family members and within villages, often related to the
scarcity of resources or the perception that others were received more aid.

Social embeddedness was particularly impacted by the changes in village and
community organizations. These organizations, including the men’s and women’s groups
and churches, are absolutely central to daily life in American Samoa. While participation
in these groups has been diminishing in recent years, they are still the fibers of the social
fabric. In my research I observed two primary drivers of this suspension of critical social
activities. The first was logistics. As I discussed previously, the village women’s groups
stopped meeting because their normal activities were not seen as necessary for the
recovery process: when everyone was busy cleaning and rebuilding, these groups no
longer had a clear role. While this decision was very understandable, it seemed to have a
number of unintended consequences with regard to social support. The second driver was
the influence of outside aid, as it disrupted social networks and local response systems,
and, in turn, fostered feelings of jealousy.

So we have three primary factors at play: (1) a sufficient level of received
physical and material support (expectations of physical support were met); (2) an absence
of emotional support, with the exception of a few counter-cultural groups (no expectation
of emotional support to be violated, but the absence of these resources felt acutely); and
(3) a marked decrease in embeddedness, fueled by logistical considerations and the
influence of outside aid (perceived support violated). Applying the SSDD model, we see
that, while physical support was received, the overall level of social support was not
sufficient to maintain the perception that adequate support was available. The lack of
emotional support and declines in social embeddedness led to the deterioration of social
supp

support, in spite of the physical support provided. That said, even if social embeddedness had not declined, emotional support would have been deficient. Finally, the lack of sufficient social support meant that there were no protective mechanisms in place to shield survivors from psychological distress (Path F). In American Samoa this psychological distress manifested in chronic symptoms of posttraumatic stress.

Is there anything that could have prevented or reduced the deterioration of social support in this situation? Obviously I cannot give a clear answer to this question, by my research suggests a few points of intervention that may have had an impact. First, if the village women’s groups had continued to meet, their regular social interaction may have had a positive impact. Secondly, outside aid organizations could have reoriented their efforts to more directly support local organizations, including village organizations and churches. For this to be effective, however, there would also need to be a strengthening of local organizations, including ASVOAD and the local chapter of the Red Cross. Finally, and more generally, this decline in social support may have been facilitated by a general weakening of the social fabrics in American Samoa. Specifically, there is some evidence that participation in village organizations is decreasing in American Samoa (Fitzgerald & Howard, 1990), which may negatively impact resilience in the face of a traumatic event.

Lastly, it is important to assess whether and how this process differed for the special populations included in this study. While the elderly and immigrants in American Samoa do, in many ways, have very different social standings, both groups did suffer from particular vulnerabilities. Support mobilization in the aftermath of the tsunami was, as is most often the case, governed by preexisting rules of inclusion and exclusion (Kaniasty & Norris, 1999). For the elderly, this primarily affected their access to physical

99
and material support, especially for those who also faced mobility challenges. For immigrants, the impacts were much more far-reaching. While my data on the experience of immigrants is limited, it is quite clear that they faced a number of significant hurdles directly related to their status as immigrants, and their status as outsiders in a culturally cohesive context. The situation of immigrants in American may be best portrayed by the rule of relative need and relative advantage:

Whereas the rule of relative need means that the most help should go to those who need it most, the rule of relative advantage acknowledges that one’s position in the social structure also influences who gets helped in the aftermath of disasters. That is, one’s embeddedness in the community, political connections, and social class can also determine the availability and accessibility of resources. (Norris, Murphy, et al., 2001, p. 472)

**Activity settings theory**

We have seen from the SSDD model that social networks were disrupted due to the tsunami, and while some social support was available, the overall level was not sufficient to deter an overall decline in perceived support. The outcome of this decline was psychological distress. This link has been demonstrated in the literature (Kaniasty & Norris, 1993; Norris & Kaniasty, 1996). In a recent study, Jones, Gupta, Murphy, and Norris (2011) assessed the link between social support and depression in two disaster affected cities in Mexico, Villahermosa and Tezitulán. Both cities suffered from devastating floods and landslides in 1999, though the damage in Tezitulán was more severe. Residents of Villahermosa, where damage was from flooding, were able to rebuild and remain in their original neighborhoods within the city. Tezitulán, in contrast, suffered devastating landslides in addition to flooding, which meant that many surviving residents of Tezitulán were forced to permanently relocate to an area outside of town. As
part of the relocation process, families from various neighborhoods from across the city were intermixed in a new, distant neighborhood, resulting in significant disruptions in social activities and networks (Norris, et al., 2005). Two years later, levels of social support in Villahermosa had recovered to pre-disaster levels, and incidence of depression was comparable to that of control cities. Tezitulán, however, had the lowest rates of social support and the highest rate of depression of all cities included in the study (Jones, et al., 2011).

By analyzing the data on disruption to social activity from the present study through the lens of activity settings theory, we can look more closely at the mechanisms by which social support may have mediated psychological distress in American Samoa. Activity settings can be understood as “the who, what, when, where, and whys of everyday life in school, home, community, and workplace” (O'Donnell & Tharp, 1990, p. 253). As people participate in shared activities they develop shared meanings, or intersubjectivity (O'Donnell, Tharp, & Wilson, 1993). These shared meanings develop from and contribute to a shared culture:

When we engage in activities with others in common settings, we share our understandings of our context and these shared experiences become intersubjective. These intersubjectivities are the shared meanings of culture. They bind people and context within shared settings and social networks. (O’Donnell, 2006, p. 5)

It is through these shared meanings that an individual’s culture and psychological self become integrated (O'Donnell & Tharp, 2012). As intersubjectivity changes, so does culture. As a result, the psychological sense of self is also impacted.

In American Samoa, social networks were strong and active before the tsunami. This was evident in the men and women’s organizations in the villages, in churches, and
in community associations such as the elderly women’s group that was meeting each day to work on handicrafts. The meetings and activities of these groups are examples of activity settings, and these activity settings were a crucial component of daily life in the villages. It was through these activities that intersubjectivity - shared meaning of a shared experience – developed. Reflected in the high levels of intersubjectivity were the strong and deeply held traditions that characterize Fa’a Samoa, the Samoan way.

The tsunami, as we have seen, significantly disrupted many of these activities. Consequently, the shared meanings that had developed over time were also impacted. Looking at the men and women’s organizations in the villages, we have seen that the men’s organizations continued to meet after the tsunami, and their original purpose remained unchanged. The village women’s groups, however, stopped meeting. Before the tsunami, the women’s groups had a clear purpose and a clear role within the village, and their value was widely understood. After the tsunami, the activities of the women’s groups were not seen as critical, and so the meetings were discontinued. This meant that group participants lost access to a regular source of social support and experienced a decrease in intersubjectivity.

The elderly women’s group continued to meet. Importantly, though, this activity setting was modified to provide for the changing needs of the elderly, particularly the need for emotional support. This adjustment would have brought a change in intersubjectivity, as meanings changed within the group, particularly related to what was considered appropriate behavior when discussing one’s family business. The two new groups that formed after the tsunami, the Counseling Program and the Leone Tsunami Club, fostered new activity settings with the purpose of meeting newly emerging
emotional needs. By design, these groups forged new shared meanings that built on previous ones. Collectively, we can see that the elderly, the Counseling Program, and the Leone Tsunami Club served to adjust or create new joint activities intended to be responsive to social and emotional needs that arose in the wake of the tsunami. In so doing, they created an intersubjectivity of disaster survival, and began a process of broader cultural change on this front.

Figure 4 The tsunami's impact on activity settings

It appears, then, that groups followed one of three paths in post-disaster American Samoa: maintenance of preexisting activity settings (e.g. village men’s organizations), loss of preexisting activity settings (i.e. village women’s groups), or the modification or
creation of new activity settings (e.g. elderly women’s group, Counseling Program, Leone Tsunami Club). These three paths, illustrated in Figure 4, would have resulted in differing impacts on intersubjectivity and, ultimately, culture.

Certainly the social context is more complicated than I have presented it here. There is, for example, significant overlap between many of these groups, such that support could potentially be provided from multiple sources in multiple forms. The church, for example, provides venues for other sources of support through common activities including choirs and youth groups, and these groups continued to function after the tsunami. Still, activity settings theory does help to illuminate the path through which the social consequences of disaster contributes to the psychological consequences of disaster, as a decrease in shared activities leads to decreased intersubjectivity and the potential for increased stress post-trauma. Taken further, activity settings theory provides valuable insight into why disruptions in social networks and activities caused by disasters are particularly impactful for immigrants, as the process of immigrating to a new country necessitates severe changes in culture and meaning, and those changes are compounded by additional interruptions. Follow-up studies could indicate which of these changes was a temporary adjustment to a stressor, and which become more permanently embedded in the culture. Additionally, studies could analyze whether the psychological well-being of survivors is influenced by the type of groups in which they participated.

Limitations

There were a number of cultural differences that impacted this study. In particular, while I was often interested in learning specific details about the tsunami, my
participants, in general, did not seem to remember events in terms of specific details and facts. For example, people often did not remember exactly how much time had passed between events, or who (which organization) had delivered what type of aid. These details simply seemed unimportant in my participants’ recollections. As a result, I heard conflicting information with regard to these kinds of details. When possible, I have confirmed details through multiple sources.

While many residents of American Samoa speak English, language proved to be more of a barrier in conducting this study than I had expected. Most of my participants spoke conversational English, though some interviews were conducted with the help of a translator. For those who did speak English, I felt that at times the respondents simply ran out of words to describe their experience. One woman, after a lengthy and informative interview, recognized this issue; she apologized for her English, and expressed some frustration that she could not describe things the way she would like to. This is a challenge for people not being able to describe the events as richly in English as they could in their native language.

For a variety of reasons I was unable to conduct follow-up interviews with any of my participants. This was at times the result of busy schedules or the weather (near the end of my trip, American Samoa was hit by a hurricane, followed by a monsoon). More often, however, it was the result of my living situation while on the island. I was the guest of a Samoan family, and as such, I had limited control over where I went or whom I saw. I am extremely grateful for the hospitality and generosity provided by my host family, for without them I would not have even met most of my participants. Still, they seemed to
feel that one meeting with each person was sufficient. My study certainly would have benefited from follow-up interviews, but it was not to be.

One of my stated goals for this study was to document the experience of immigrants (particularly individuals from Independent Samoa) in American Samoa during and after the tsunami. I knew that this would be a difficult task, as immigrants have many reasons to be leery of strangers who ask too many questions. However, two issues made this task even more challenging than expected. First, I learned upon arriving in American Samoa that one of the members of my host family worked for the Immigration Service for over a decade. His job was, essentially, to drive around the island and check the papers of individuals he believed might have been on the island illegally. American Samoa is a small place where everyone knows everyone (or at least every family knows every other family). My close affiliation with this person would certainly have raised suspicions among the immigrant communities I was hoping to interview. Secondly, the process for immigration into American Samoa is more complicated than I realized. I was able to interview three immigrants, though with each of those interviews I felt that the participant was hesitant to speak with me. One woman made it very clear that she was happy to talk with me, but not about the tsunami:

She went on to explain that she didn’t want to be recorded (the consent form says I will record the interview), because she might forget what she said, and then someone would come back to her and say “Why did you say this?” I explained very carefully why I wanted to use the recorder (that I would delete the recording as soon as I could, and no one else would hear it), but still was visibly upset at the idea, and said that she was “too scared” to talk to me. (Field notes, January 7, 2011)

I learned over the course of my study that, in order to enter and work in American Samoa, one must have a sponsor. This creates a significant power dynamic in which the
sponsor has tremendous sway over the immigrant, including, I was told, the right to withdraw sponsorship at any time, without cause. My host family (or the extended family) sponsored two of the three immigrants I interviewed. When I learned this, I decided to stop pursuing interviews with immigrants, as I could not be sure that they were agreeing to participate on their own volition, rather than feeling compelled to participate based on the request of their sponsor.

I intentionally avoided speaking with government representatives, the Red Cross or FEMA representatives during my stay. I was advised prior to my trip that if I became associated with the government or large organizations (most of whom do not have a good reputation in the villages) that I would have a harder time finding people in the villages who were willing to speak with me. This means that the perspectives and experiences of these groups are not reflected in my study. However, I feel that if I had allowed myself to become associated with representatives from the government or large outside organizations my participants would not have been nearly as honest with me about their experiences and perspectives on the situation. As my primary goal was to document the lives experiences of the tsunami survivors, I believe this was the most appropriate approach.

Finally, I feel that it’s important to note that the tsunami in American Samoa coincided with another major disruption, namely the return from Iraq of many Army reservists. Many American Samoans enlist in the military or reserves (the military is one of the major options for work on the island), and I learned through conversations with my host family and other community members that many of the men had served in Iraq, with some serving in multiple tours. These men had returned to American Samoa just before
the tsunami struck, many with posttraumatic stress symptoms or diagnoses of PTSD. Many people (my participants and other community members with whom I interacted less formally) described to me social changes that occurred after the tsunami, such as increases in domestic violence, crime, and drug and alcohol use. Certainly these changes could be related to the tsunami, but I think that it’s also important to consider the potential impact of the war.

**Recommendations for Future Research**

It is clear from my research that outside aid played a pivotal, though not entirely positive, role in the post-disaster recovery of American Samoa. The findings of this case study could be improved upon by further study of this process. Specifically, I feel that an application of Hawe, Shiell, & Riley’s (2009) evaluative framework would be beneficial. In their paper entitled “Theorizing Interventions as Events in Systems,” the authors outline an evaluation strategy grounded in ecological systems theory that focuses on the impact of interventions on the context to which they are introduced, rather than being restricted to the specific components of the intervention. They state, “An intervention may then be seen as a critical event in the history of a system, leading to the evolution of new structures of interaction and new shared meanings” (p. 267). Specifically, the authors offer a four-part scheme for assessing the impacts of an intervention on the receiving system, summarized below:

- **Uncovering how the intervention couples with the context (p. 270):** The first point of inquiry assesses how deeply an intervention becomes embedded in its context.
• **Tracking changes in relationships (p. 270):** The second point of inquiry assesses the impact of the intervention on social networks and relationships within the receiving context.

• **Focusing on the distribution and transformation of resources (p. 271):** The third point of inquiry tracks the influence of the intervention on resources, including people, events, and places, and also includes changes in people’s roles in a given context.

• **Accessing activities displaced (p. 271):** The fourth point of inquiry takes into consideration activities that are displaced or significantly altered by the intervention.

An assessment of the disaster response and recovery process in American Samoa using this model, and looking at the introduction of outside aid as the critical event, could more clearly identify specific strategies for how outside aid organizations could best support existing local capacities and reduce the level of disruption of existing systems. As I stated previously, effective aid and recovery strategies will be reflective of the existing local context, respectful of cultural practices and norms, supportive of local capacities, and sensitive to the expressed needs and recovery goals of the community in which they are operating. The role of outside organizations in this process must be reassessed. Should disaster responders be in the business of cultural change and postdisaster development, or are they most useful in providing temporary support of basic needs? Based on my study, I am inclined to agree with Norris and her colleagues (2001), who state, “providing indigenous networks with the resources they need to help one another is
(or should be) the primary objective of a humane emergency management policy. (p. 493)

In reviewing this case study, we can see that some components of the story are quite familiar, while others are quite novel. Further research may indicate that the novel components (such as the imbalance between physical and emotional resilience) are unique to American Samoa, or that they are also reflected in other cultural contexts, in other Pacific island nations or globally. In any case, it is clear that members of different cultures experience and respond to disasters in ways that are reflective of their respective cultural views and norms. Therefore, we must increase our understanding of these varied contexts if we are to provide meaningful and beneficial support to victims of disasters.

Conclusion

In the preceding pages I have done my best to present the experiences of American Samoa as they were presented and recounted to me. This is the story of a community that faced a devastating natural disaster, and in response, exhibited their strengths as a model of physical resilience. At the same time, it is clear that, as a culture, American Samoa was emotionally unprepared to deal with an event of this magnitude. In the aftermath of the tsunami, social embeddedness declined significantly. I have suggested that this decline was related to disruptions in social networks and social activities caused by the logistics of recovery, the influence of outside aid, and a more general decline in the functioning of important social networks, especially a decrease in participation in the village women’s organizations and changes in village networks caused by compulsory or elective relocation. The psychological consequences of this disruption and decline in support were
lasting and severe. Still, there are some groups in American Samoa who are setting an example of culturally-grounded responses to these events. In the case of the Counseling Program, they have developed a response that is grounded in cultural norms (e.g. providing emotional assistance only in the context of physical help). The elderly are also playing a pivotal role in this process, though the approach they have deemed appropriate (i.e. sharing personal feelings openly and outside of the family) is quite counter-cultural.

Interestingly, it appears that the main challenge in American Samoa may not have been a lack of resources, as I had expected, but may have been an excess of (outside) resources that served to disrupt local mechanisms of mutual aid and resource distribution. This, combined with the unequal distribution of aid, resulted in some individuals receiving an excess of aid, while others did not receive enough. In any event, I was able to observe several local response mechanisms at work, and to see the dynamic interplay between local systems and outside aid.

Norris et al. (2001) posed the question, do “culture and context influence the structure or meaning of social support?” (p. 472). Though I did not look specifically at the role of informational support, my findings indicate that the three-part division of received support does, indeed, provide a useful and important distinction. In analyzing the events in American Samoa through the lens of the social support deterioration deterrence model we were able to distinguish among the roles played by each level of support (or lack thereof).

In the end, we see the value of analyzing the events surrounding the 2009 tsunami at the community scale. As Kaniasty and Norris (1999) have articulated:
Individual suffering unveils itself within the parameters of other people’s suffering. Loss and gain, breakdown and recovery, are individual and collective struggles. The reality of individual victimization cannot be understood without consideration of the collective reality at all levels: environmental, psychological, social, political, and cultural. This interactional character of disaster experience should not be ignored or taken for granted, as coping efforts of individuals and their communities are interwoven. One can dominate at times, yet the other never ceases its presence or influence. Community reactions better or worsen individual reactions; individual reactions become shared reactions and define the collective identity of a coping community. (p. 26)
References


and culturally appropriate services. *Australian and New Zealand Journal of Psychiatry, 39*, 300-309.


Tsunami in Samoa, one year later. (2010, September 28). *Samoa News*.


123


Appendix A: Map of the Samoan Islands

Source: http://www.samoa.maps-pacific.com/
Appendix B: Interview questions

<table>
<thead>
<tr>
<th>Interview questions for all participants</th>
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</thead>
<tbody>
<tr>
<td><strong>Experience of the Tsunami</strong></td>
</tr>
</tbody>
</table>
| 1. Had you heard that the tsunami was coming?  
   a. Where/from whom did you hear the news? |
| 2. Where were you and what were you doing when the tsunami hit?  
   a. Who were you with? |
| 3. Tell me about the first few hours after the tsunami hit. |
| 4. What was the first thing you did after the tsunami? (Look for family, inspect property) |
| 5. What were you thinking/feeling? |
| 6. Were you or your family members injured?  
   a. If yes, do you mind telling me what happened? |
| 7. Did you lose any possessions? (Home? Sentimental objects?)  
   a. What did you lose?  
   b. What have you replaced? |
| 8. After the tsunami, were you worried?  
   a. About what was going to happen next?  
   b. About how life would return to normal?  
   c. About being able to get the things you needed? |

<table>
<thead>
<tr>
<th><strong>Aid &amp; post-tsunami assistance</strong></th>
</tr>
</thead>
</table>
| 1. In the first few days after the tsunami, what did you feel like you needed most?  
   a. A week or two after? A month after? Now? (How have your needs changed?) |
| 2. In the first few days after the tsunami, where did you turn for help?  
| 3. Please tell me about the kind of help you received.  
   a. From family (local and off-island)?  
   b. From the church (local and off-island)? |
| 4. What kind of help did you receive from external government or outside organizations (shelter, etc)?  
   a. Were they able to help you with the things that you needed? |
| 5. What kind of aid/help would have been most helpful for you and your family? |
| 6. Now that it’s been over a year since the tsunami, tell me what the process of putting your life back together has looked like for you.  
   a. Emotionally? Socially? Physically?  
   b. How did you start?  
   c. Where are you now?  
   d. Are you in a place that’s comfortable to you? |
<p>| 7. When you think about the restoring the life of your community and family after the tsunami, what things are most important? What are the goals you are working toward? |
| 8. When will you feel like this process of dealing with the effects of the tsunami is complete? |</p>
<table>
<thead>
<tr>
<th>Question</th>
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<tbody>
<tr>
<td>1. During and after the tsunami, who did you help?</td>
</tr>
<tr>
<td>a. How did you help them?</td>
</tr>
<tr>
<td>2. How did you balance providing help to others with taking care of your own/your family’s needs?</td>
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<tr>
<td>3. What kind of things made you feel more hopeful in the first few weeks after the tsunami?</td>
</tr>
<tr>
<td>a. Activities?</td>
</tr>
<tr>
<td>b. Talking to other people about what happened?</td>
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<tr>
<td>4. How often do you think about the tsunami and what it did here? (Daily, weekly, once in a while)</td>
</tr>
<tr>
<td>5. With whom do you talk about the tsunami and how you are feeling?</td>
</tr>
<tr>
<td>6. How have your social activities/interactions changed since the tsunami?</td>
</tr>
<tr>
<td>7. Has any good come as a result of the tsunami?</td>
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<tr>
<td>8. When you think about your life since the tsunami, what has been the hardest thing for you?</td>
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<tr>
<td>Has life been more difficult for you in any way?</td>
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<tr>
<td>9. When did it begin to feel like life was returning to normal?</td>
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<tr>
<td>10. How have relationships within the village changed?</td>
</tr>
<tr>
<td>11. Are people in the village worried about another tsunami coming?</td>
</tr>
<tr>
<td>12. What do you want the world to understand about what has happened here?</td>
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</tbody>
</table>

**Interview questions specific to immigrant participants**

1. Tell me about when you first came to American Samoa.
2. What was life like for you before the tsunami came?
3. How has life changed since the tsunami?
4. For your family members who were living in Independent Samoa:
   a. How were they affected by the tsunami?
   b. How were you able to contact them after the tsunami?
   c. How were you able to help them?

**Interview questions specific to elderly participants**

1. What was life like for you before the tsunami came?
2. How has life changed since the tsunami?
3. Were you here during any disasters in the past?
4. How was this tsunami the same or different?
5. What advice do you have for your children and grandchildren about future disasters?
# Appendix C: Focus group questions

<table>
<thead>
<tr>
<th>General focus group questions</th>
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<tbody>
<tr>
<td>1. What kinds of things made you feel more hopeful in the weeks after the tsunami?</td>
<td></td>
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<tr>
<td>a. Activities?</td>
<td></td>
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<tr>
<td>b. Talking to others about what happened?</td>
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<tr>
<td>2. Has any good come as a result of the tsunami?</td>
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<tr>
<td>3. When you think about the recovery and restoration process for your family and village, what things are most important?</td>
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<tr>
<td>a. What are the goals you are working toward?</td>
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<tr>
<td>b. When will you feel like the process of dealing with the tsunami is complete?</td>
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<td>4. How was this disaster (<em>fa’alavelave</em>) different from those that have come in the past (<em>Hurricane Ofa, Hurricane Val</em>)?</td>
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<tr>
<td>5. What would you like to see happen differently if there is another <em>fa’alavelave</em>?</td>
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<thead>
<tr>
<th>Focus group questions for the elderly</th>
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<tbody>
<tr>
<td>1. What was life like for seniors before the tsunami came?</td>
<td></td>
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<tr>
<td>2. What needs did seniors have in the first few days after the tsunami?</td>
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<tr>
<td>a. How have those needs changed over time?</td>
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<tr>
<td>b. How have their needs been met?</td>
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</tr>
<tr>
<td>c. What needs haven’t been met?</td>
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<tr>
<td>3. How was the experience of the tsunami different for seniors than for other people?</td>
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<tr>
<td>a. Particular challenges, or things that were particularly difficult?</td>
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<tr>
<td>4. Before the tsunami, what groups or activities were seniors typically involved in?</td>
<td></td>
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<tr>
<td>a. After the tsunami, how did these change?</td>
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<tr>
<td>i. Has the purpose of the groups changed?</td>
<td></td>
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<tr>
<td>ii. Have there been changes in who is involved?</td>
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<tr>
<td>5. What kind of help did seniors receive?</td>
<td></td>
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<tr>
<td>a. Where did the help come from?</td>
<td></td>
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<tr>
<td>6. What else has changed for seniors since the tsunami? Has life changed in any other ways?</td>
<td></td>
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<tr>
<td>7. How did seniors participate in the recovery process?</td>
<td></td>
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<tr>
<td>a. What roles did they play?</td>
<td></td>
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<tr>
<td>b. Who did they help, and how?</td>
<td></td>
</tr>
<tr>
<td>8. What do you think has been the hardest thing for seniors since the tsunami? Has it made life more difficult in any way?</td>
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<tr>
<td>9. What does the recovery/restoration process look like for seniors?</td>
<td></td>
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<tr>
<td>a. Physically? socially? emotionally?</td>
<td></td>
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<tr>
<td>b. What’s still left to do?</td>
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<tr>
<td>10. Other than seniors, do you think there were any other groups who had a particularly hard time with the tsunami?</td>
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<tr>
<td>11. What advice to the seniors have for their children or grandchildren about future <em>fa’alavelaves</em>?</td>
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Appendix D: Oral consent form

Informed Consent

You are invited to participate in a study of disaster recovery in American Samoa. Participation in this study will consist of one interview or a series of interviews with the investigator. You have been asked to participate in this study to describe your experiences during and after the tsunami of September 2009. You may refuse to answer any questions you wish, without explanation.

The interview is confidential and your anonymity will be maintained throughout the project. All research records will be stored in a locked file in the investigator’s office for the duration of the research project.

Your participation in this interview is completely voluntary and you will not receive any compensation for your time. You may refuse to participate in this interview or discontinue participation at any time without penalty.

During the interviews, I would like to tape record your responses to my questions so I can listen carefully to what you have to say and not have to take notes. I will destroy the audio tape recording immediately following transcription.

If you have any questions about this project, you may contact me at brokopp@hawaii.edu or 808-450-2839, or my advisor, Dr. Charlene Baker, at 808-956-5669 or bakercha@hawaii.edu. If you have any questions about your rights as a research participant, please contact the UH Mānoa Committee on Human Studies at (808) 956-5007. You will receive a copy of this form.
Appendix E: Personal stories of the tsunami

In this section I present the personal stories of tsunami survivors who participated in my study. I have tried to present them in the most readable format, only including pertinent questions and statements from the interviewer. I have also removed an information that may indicate the identity of the participant. Even with the necessary adjustments, I feel that documenting these stories is an important step in sharing my participants’ experiences outside of American Samoa, as many of them have asked me to do.

In all of the following stories, “I” indicates a statement by the interviewer, and “P” represents a statement by the participant.

**Story One**

I: Okay, so can you just tell me a little bit about where, where you were and what you were doing when the tsunami came?

P: No, uh, on that time, that time…I’m, I’m on my bed.

I: You’re at home?

P: Yeah, I’m on my, I’m at home. I sit on my bed at the time when the shaking, shaking, the, the, the…earthquake comes. I sit on my bed. Then after that, I, when I feel the shaking, I hear the voice of the, my two housemate that, my co-workers over there. They, they shout loud that, that, uh, they call the, “Oh, my God, oh, my God,” like that. “Stop this, stop that, stop that,” like that. So, I’m not, I’m not satisfied because I’m in my bed. I want to see them. I went, I go out. Then when I’m, go out, the earthquake stop. Then they feel that, because after the, after that day, I feel, I think, for the last two months, I feel the earthquake two times. Or, I don’t…I, I don’t remember if I’m mistake, I think two times.
or three times, like that. It happened, the big one, the last, the September, September 29. Because I think that it’s not…the same, the same for the first one. It, nothing can happen. So, we go for the food. Then because our house is, uh, near the ocean, near by the seaside…near the seaside, in front of the, you know the church in [name of town]?
I: Yes.
P: There’s a fale over there, then in front over there. You see the wash out…Then the, the place over there, the wash out one? When, when, at that time, we sit and eat a, eat a bit. When they, uh…I hear the sound, the wave coming in. The one time, bad like that, and the sound, the big one. Oh, I think I, I’m not…I, when I’m not, I feel this is the tsunami, then we run out. Run out and go to the back side of the church with the children over there, with the kids and the school over there that, we go up. So, that, we go to the mountain, then…we wait. But that day is scary day. Yeah, it’s a scary. Yeah. Too much. Because, um, I think that the, the tsunami’s very big. We never going down on the, from the mountain. We wait out, that, the time that somebody coming, somebody go look, “Okay, it’s, you can go down.” Like that. Oh, then….maybe a hour, an hour over there in the, in the mountain, then going down. When I going back by my place, all gone. Nothing left. Just a floor. Just the floor.
I: The whole house, the whole house is gone?
I: When you heard the sound, did you know it was a tsunami coming? Or did you not know until the water…?
P: Maybe, uh, instinct?
I: Yeah.
P: Maybe instinct that this is the, the, the instinct. People have instinct. You know, the danger?

I: So, as soon as you heard the sound, you knew it was something bad.

P: Yeah. Because that is different. The sound is different, the sound of the, the waves, different. Not, not the same the other day. On the, the, the, day by day, you…you can hear the sound of the wave, but that day is, uh, big. Big sound.

I: What did it sound like?

P: Uh…know the water, if you throw water, big waters like that, bad like that. Because this, uh, shop, the house of the back, they keep the, the house of the back. When I, when I run out, the water coming already. We just, we just pass by the, when we pass the, the, the highway, we see already the water. They follow us, the waters. You see the water maybe up on the, up on the…up on the roof. Just like that. We never, we never look back. So, just run. I just run.

I: So then, what did you do when you came back off the mountain and you saw that the house…?

P: Oh, it’s all gone.

I: What did you do then?

P: Oh, I feel, oh, if I’m in there, I’m feel that I’m very lucky on that day, you know? I’m very lucky because I can run. If I’m not run, and also, because that day also, I remember that, because I work late night.

I: Mm-hmm.

P: I use my cell phone to be, uh, make, uh, alarm clock. I alarm, my alarm clock is nine. I want to wake up early because I, I work late night. If I not wake up, I already die on that
day. Yeah. You can, they changed a lot.

I: They changed a lot?

P: Uh, they changed, they changed the…they changed. I know one minute took, uh, a minute just changed.

I: One minute just changed everything.

P: Just changed all, everything. That is, uh, the disaster.

**Story Two**

I was here that day. I was here. Early morning, ‘kay? So I just got off my car and walk inside the room. So I just sat on my desk and opened up my computer. And then a lady called me. My name is [name]. “[Name], come, let’s go! The wave is coming!” I never know nothing! So I open my window and I saw the wave was over here. So I just opened the door, we ran all the way over here, up to the mountain. I was crying, yelling to God to help us, you know, especially them. There’s nothing, ‘cause the wave was coming that fast. Even, I was thinking of my kids, too. ‘Cause we’re all separated. They, the kids go to school, we went, my husband go to work, I go to work, so I don’t know how God know…God’s will that would bring us all together. Even though there’s few of us, you know, but we will still all survive. But, you know, I thank God for that. I really do thank God. I was kneeling that day and pray to God to help everybody… So I even know nothing, and then I, finally, I heard one of… ladies was pass away over here…Was swept by the ocean over there. And I stood up the mountain and looked down here. I was crying, crying, there’s nothing that I can do. No. So, we came down that day. I don’t, I don’t want look, I don’t want to…I just want, just want to get away, get away from here, go look for my kids. So, finally, a car show up, and then he told us, if we need a lift
please. I really want to go home and see my kids. So, we went over to the high school. That’s where my kids goes to. So, I jump out the car, and then I ran to the high school. It was all damaged by the wave. So, I call, I call my kids, you know. I call their names.

“God, please bring them to me! Bring them to me! I don’t care if they… just bring it to me.” My husband came up to me and he hold me. My, just, just knee down and pray to God. One of the teacher came down from the mountain. Say, “What’s your son, your daughter’s name?” And I told them [children’s names]. “Okay, let me go and call them, if they were here.” “But please, please, just bring it to me.” So finally, the teacher call and they ran up to me and say, “Mom, Mom, Mom!” So, by that time, I was holding them in my hand, I was feel warm by God’s, no, I was crying, my husband, “Okay, let’s go home.” I have one more son, my seven-year-old son. My son used to go over there, that’s elementary school. So, we were looking for a car. My car was damaged over here by the tsunami. We were looking for the car. There’s no car, no car was passing by that day. So, I told my husband if we can walk. So, we walk, walk, about a mile. Finally, a truck show up, so they give us a lift. [But I couldn’t get to my home]. I just look and say, “God, please help my son.” There’s nobody home, you know, nobody home for him to hold his hand when he, we, things like this. By 4:00 in evening, or afternoon, we go over, across. By the time I stood up, I look. I was crying. There’s nothing damaged by the tsunami. So, I pray to God that, “God, there’s nothing wrong.” Everything was calm. Nothing happened by the tsunami. So, I walk and then I told my, everybody, all the people went up to the mountain. I don’t know where to find my son, seven-year-old son. So, then I, I tell my husband, “Go on the other side. I’ll go on the other side.” The village was all calm, no people died with the village. It was all went up to the mountain. So, I walk. All
during that time, “God, help me. God, please help me.” I took my kids with me. So, we walk up the mountain, and a lady call my name. “[Your child] is over here.” “Oh, but thank you, thank you.” So, everything was, you know, all my kids was with me. So, I, under that tree, I sat down with my husband and my kids, we pray to God, “Thank you, God, all my family was all together right now.” You know, that’s the only thing we do that day, pray, pray to God. Pray, pray to God, you know, to thank for his kindness and lovingness for his people and also the Territory of American Samoa, even though few know peoples that was, all the people who survive by now. So, by that time, when it, times come like this, I’ll never forget it, never forget it. I’ll swear to God. I don’t want anything happen to, like this, to me and my family. You know, when it’s, when it’s, sometimes when the ocean got no waves, no, I stay, I stay home. I don’t want to come to work. I stay home. I want, I tell my kids, “Nobody go to school. Nobody go work. No, let’s all stay home.” I don’t want to bring back the memories of what happened before.

**Story Three**

Only our hearts are still a little bit scared. And some men went over there, upstairs, and they stood on the back, uh, back part of the building and they looked down. And some, I remember the other man said, “Wow! I can see a container floating like a boat.” “What?” He saw a container. “Really?” “Yeah, a container! Floating like a boat, or like this on the field down there.” So, the man said, “Mama, came over! Oh, come over! Come over! Come look.” I didn’t, I didn’t want to go up there. I was so afraid. Yeah. So…it’s a, yeah, it’s a sad day, a sad day. And then some other people, some other people came with different names. But I said, he said he walked up and he saw dead woman on the side of the road. Yeah. So, I opened my eyes like this and I go, “Maybe, maybe down there
something, something bigger. Maybe it’s getting worse down there.” So, at 3:00, my husband said, “We better go down there and have a, just have a look.” So, we went down. And when we saw the houses, the big trees on, uh, big trees on the, spreading on the road, the rocks, other, different things on the road. So, I thought, “How the wave came over?” That’s what I said to my, “How the wave came over?” And then the other women said, because their houses on the other side of the mountain, up there, it’s easy for them to look down, and the women, women said, when, when the earthquake, um, came, uh, when the earthquake shake and they look down, suddenly after that, they look down the sea, maybe the sea going like this, uh, the water…

I: It came together.

P: …the water, it came together like this and go down maybe a big hole, like, you know, it just look down…and there was a hole…And they looked, they stood and looked out, “What’s, what’s happen next?” And then suddenly, the, the, the woman said, “Then suddenly, I go, ‘Oh! The wave, the water comes up like this, maybe it comes up like this, maybe it’s higher than before.’” So, bigger, but the house is on the, maybe this side of the mountain. So, their family, this family run, maybe, they try to run on the top of the mountain, but it’s hard for them. So, they saw the wave, big wave came over. Big, big wave came over. So, children cried. They were so scared. They just wait there and wait. They say, the women say they wait until, “What’s happened next? Maybe that’s the end of the world.” Yup. So, that’s how we know how the wave came over. And some people explain the, the wave came over and cover the houses, cover the houses, the cars, and take, took all those things to the sea. So…it’s hard. And sometimes, when you talk after that, we said, “I wish, I wish I can see that again.” Because we want to see how the wave
came and took people. You know, it’s a sad day. I believe it, but, uh, my own thinking, I need to see with my own two eyes how, how happened. “Oh.” But, uh, yeah, some other people explained. There is another man… He said when he arrived to where he worked, suddenly he looked out at the wall. There’s no water, all the boats there stood on the, on the ground, no water at all. But the boats there are still on the ground. Something happened. Then he shouted. He shouted to other people, “Hey! Go back home! Go back home! Something going to happen!” Because, uh, he said they had, uh, they had a seminar about that when they saw things like that, it’s gonna, something strange happen. So the man said he lucky. The man said, so he get back in his car, turn the car, and he suddenly, and he hurried to his home. And he cried and explained he looked at the mirror of the car, he saw the wave came. He said he cried. He cried but he drove the car. And he, he said he use the other hand, drove the car. And use the other hand like this to the people to come back, come back. Sometimes he said he, he told the people to go on the mountain. But, uh, suddenly, he said the other cars in front of him blocked him, his way. But he saw the, the, the wave is nearly on us, nearly touch his car. So, he turned the car on the other side because he reached the other way up to the mountain. And he goes up, yeah, so he let his car stop there, and then the sea covered his face and come down again, the sea covered him. And he tried to swim, swim back home. Yeah. He cried and swim because he want to see his family. But lucky he’s safe. “Eh, you’re lucky you’re still alive.” And he said, he said he can, he saw another, another car, um…took by the wave. And there was a man inside. And the man like this, wave his hand like this. So, he cried and explained that. He cried. So, he said he want to help, but, uh, he don’t know how. So,
he cried and swim again, he cried and swim again. The man said, “Oh, I don’t know how long I remember this, how long so I can forget this. I always remember this.”

**Story Four**

It was like early in the morning. We didn’t know… But, but the day before Tuesday morning, it was just Monday afternoon. We were experience a lot of, um, whales out there in the ocean. There were a lot of them. Like around 4 o clock in the evening. They were having practice for the, the kids were having practice for White Sunday, because that was September and then October is White Sunday the first, second week. So we were having that, and we were experience that’s what we’ve been experiencing - a lot of whales.

I: And you don’t see them normally, or not that many of them?

P: Not that many. But actually, that, that month, it was the month of, we’ve seen a lot of whales, even after the tsunami, they were still there. But, the night, Monday night, after that, we were all set to go to sleep. Then Tuesday morning was like 6 o clock everyone has to get up and get the kids ready for school because that bus stop that’s where they should be. I have grandkids. And um, I would say like 6:30 or quarter to 7, that’s when we experienced the earthquake. I didn’t even know there was a earthquake. I was on the bed, one of my grandsons was I thought he was the one that was jumping on the bed and doing all that shaking, but then when I turn around and look, no, it’s not him, he was standing on the window facing that side in our bedroom. But then I said wow, and it was still shaking, for the longest period of time I ever experienced anything like this. I just grab him and you know we’re trying to lay down on the floor and I was screaming at my other kids, please don’t go outside, just go under something inside the house, maybe
under a table or under, you know, something, that way you can be safe. And after that I can hear the cracks of the building and I know it was a, it was a very strong earthquake. And after that, I just got up, and ran outside. You know just to see, I have a daughter that was waiting for the bus under the tree right behind out house, and she was yelling to me from there, said “Mom! Mom! Mom, please, please, there’s a big wave coming in already!” And I said, “What?!” I, I was scared when she’s mention that, because we’ve never experience anything like this before. So I just ran in the house, grabbed my kids, I ran in… I was trying to get into something comfortable, because it’s early in the morning, so I got into something comfortable, I just grabbed, and I told my kids, you know, come on, let’s run. Out of the house! So when I was on the stairs of my, the first steps of my house, because it’s a three story building, I was trying to get the others up on the third floor, so all I did was yell at them, yell at them, yell at them. So what happened? I just ran downstairs and they were half downstairs and the second, the strongest wave was right half of the building, half of the church, coming right half of the church. And our neighbors, I have a neighbor over here, she was just shutting the door of her house, and boom. But we were running! We were running all the way up to that, I can see it from here, to that, um…where the, the plantation is at. That’s how high we went. That’s how high we went. That’s how high we went. Knowing, we didn’t even look back. All we hear was, oh, great sounds, real loud sounds, mighty sounds. And I was just trying to - always yelling at the neighbors over there too, I was just saying, “Please leave everything! Leave now and please let’s go!” You know, because I know the waves are running after us. Real big ones, strong ones, ah. But then, as we got to the plantation, when we settled down there, that’s when we looked down here, it was like, the, the water
was all over the place, ah. All we see was they were taking all the stuff up there, we
didn’t even know the houses are gone, the buildings are gone, and everything from inside
the house are gone. So we sat up there at the plantation for, I would say about 3 or 4
hours, we were up there, up there on the plantation, all of us. So we were trying, I had a
phone with me, a cell phone, and my kids from off-island, they saw, they saw these on
the TV and then they started calling us. They’re… so they, as soon as they saw that, they
called. And then, that was the first call that I received here on the island.
I: So your phone was still working?
P: The cell phone was still working. So I just say, I just tell them, you know, uh, we’re
okay, we’re up on the plantation, everyone’s fine, but we don’t know about the building
down here. But when we came back down, like late, late, late in the afternoon, everything
was gone. It was like we’re almost walking around with tears in their eyes, even us, uh,
looking around, ‘cause we had… we never seen anything like this before, never seen
anything like this before. And then, everything was gone, we didn’t know what to do. We
were just standing there. All we did was we thank God for sparing our lives, especially
the whole village, too. No one from this village died or was, you know, washed away in
the ocean. So that’s why we thank God for that, ah. Even the little kids. That morning,
everyone was delayed. They were delayed to go to the bus stop. But only the few of them
were at the bus at 6 o clock in the morning. The bus took them to school. One of my
granddaughter was in that, ah. But we thank the school, too, because they were able to
save the kids, take the kids up to where that location where they’re always supposed to
take them. So none of them was hurt or you know, or was touched by the water. No, they
were all safe. They have a special location up on the mountains - that’s where all the kids
were safe. So after like late, late in the afternoon, they were walking down, down from
the other village, they were walking, they thought there was nothing happened to
Amanave.

I: And could you see it when, when the water came in? Could you see that happening?
P: We were already up there, but we had witnesses from, from the ones that were running
up the, there’s a road going up there, so they’re the ones who saw everything, and they
said “wow, no wonder!” because when we came down, the whole, the water was already
in the house! And it took out everybody—every place of the building. We have facilities
downstairs, there was rap out like someone was just, you know, fixing, I mean, beating it
out, pulling it out, even the toilets and everything, excuse the language I’m using, but you
know, the, the toilet bowls and all the sink, they were wrecked into pieces! More like
pulling out of the building and throwing them outside. They were all over the place. Even
under, you know, downstairs, we have a lot of supplies for the church. They were all
outside. Refrigerator, you name it. The sink inside the kitchen, it was like somebody just
came and pull it out, throw it outside. That’s what, that’s how strong, even the, the, the
pews of the church. The chairs, the pews, we have, we build those from strongest wood
from Apia, and they were under the water, under, you know these strange right next to
the house. Some of them were all over, all over the beach, out wherever. Yeah, it, it was
very strong. Very strong, I don’t know, but you know from the experiencing and the
witnessing of those that were up there on that hillside, the road going up to it, that’s how
they saw the, I would say, they would say, they said 40 foot. It went over the church, up
the, the third, uh, floor building. But then when we came and we went up to the house,
the water, this is the floor and this is the water and the sand were all over the place. So that’s what happened.

Not the whole island. Just some of the villages like over here, and then go to Leone, he said Pago is okay, wasn’t, was just the water rising up on land and going back out, but the real big ones came to this village. Uh, you know, and, um, some of the, the things we saw from up there, it was like standing up there like this, they were like getting ready to attack. The waves. They were just standing up there, like that. Like two forks.

I: So you could see them at a distance coming in.

P: Yeah. From up there. But we had a real nice guest fale Samoa out there on the beach that was the first thing they took. But then when they came, it’s like a fork. It’s sticking down, it’s wiping everything up. So that’s when first saw, there was dry land, and it was so ugly. I mean, you see the, there’s no more water. And so, I mean, the tsunami is really, but, you know, we, we thank God, we thank God for sparing our lives. It’s terrible, but we have nothing to say if God wasn’t, you know, sufficient enough and lovable enough to save our lives here in the village.

*Story Five*

Um, but as, as we explained to people that if you were here on that day…that everyone who was here was affected in one way or another, even if you were on the mountain or on high ground, you felt the earthquake. You were afraid for your life. You evacuated with no prior warning …um, and you assisted with, um, recovery… Some warnings were the children themselves going to school in the morning. They saw the wave coming and they screamed and ran back, you know, to wake up elders and all that other stuff to run for the mountains. That’s why I guess we lost some, we lost a handful of our children that
day because they were sent home right after the earthquake happened or something like that. So, they were caught on their way home and then they saw it. Some people didn’t even know about it, just, I mean, just…We had, we had bus drivers tell all the kids to get off the bus. And got off the bus and drove home to go tend to their own families. And some just say, “Jump in! Jump in! Let’s just go to the mountains! Let’s just go to the mountains!”

*Story Six (speaking through an interpreter)*

She won’t ever forget what, what happened that day. She was… By the time the tsunami, the waves came in…she thought that she was going to be gone for that day. And for God’s will, he will, she will survive by that time. She saw the wave coming, she was sit inside the [building]…with the other… and she saw people running. She…she look at…another lady was involved, too. She was dead by that… and a lady called her. She stood up. She walk outside. By the time she stood up, the waves swept them inside the [building]. She cannot even walk - the wave was, swept her away. She thank God for what happened. Yeah. That, she just calling God to help her. She was shoved up inside the [building] over here, holding up the door tight for her. She was by herself inside, floating up. By the time the wave go back this way, she came down, she stood up her legs, on the, the floor. She look around. Soon the wave came back, she goes up and float up by herself, but she’s gone. She, she was not in sight. The wave swept her away. Three times she floated and down. She was yelling, “Help! Help! Help!” She was tired. A man call to wait, sit down. One of her employees call her and make her stand up. She was tired. And they took her up the mountain by that time. She, no…clothes on her. Just her bra and her shorts. One of her employees gave her a *lavalava* to wrap her around. And a
towels. And a blanket. Oh. They gave her food, but she don’t want to eat. She was worried, think about it, what happened to her. Finally her son show up. She…okay, no phone, no car, everything was destroyed by the tsunami. She’s lay herself over there, up the mountain, ‘til her son came. Okay, finally the road was clear up, they took her to the hospital at 2:00 that day. But it was happening in the morning. So, they took her to the hospital. Okay, they took her and then the nurse was clean her up, no, give her shots. So she was laying in the hospital and she was thinking of her kids and grandchildren. She think about God, that day only. The kids, all her kids show up, they were crying. They treat and do her test. She didn’t drink a water that whole day. So, she thank God…that she survived from the tsunami. Amen! She think that God was helping her that day, that she survived from the tsunami. Yeah. Yeah. That’s all she can say about what happened to her that day.

Story Seven (speaking through an interpreter)

I: She won’t even forget what happened that day, the tsunami. She won’t even, it’s really, it’s a hard time for her. First time of her life…it happened. They were four of them inside the house.

She used to see the car passing by. They thought it was fight or something. But they never knew…Then they came outside. Just a minute. And then a wave came. That’s the time she just was worried, when it…the wave swept her up inside the… She was holding her hand inside while they were floating up. She was yelling to God to help them…by that time. The wave was still inside.They look at the lady named [name]. She was float, she was dead. It’s like…She was trying to, they were trying to help [the woman], but there’s nothing they can do. She was floating up and was dead. She went up three times,
up and down, up and down. So she swept away, aside to over there. Amen! Yeah. She knows that God was with her that day. She really love the people. Where are they going to go? On that day. She saw cars, containers, swept over here by the wave. She was, she was thinking that day, that’s her last day. So she grabbed the tree over there, she was holding on it. So the wave was swept back to the ocean. She was kneeling to God, kneeling down to, to pray God, raise her head up…She was thinking that God was with her all that day. Yup. That’s all she can say.

**Story Eight (speaking through an interpreter)**

She was stuck and she was thinking what happened in the village, too. You know, in the morning, they going to come and work, and they heard the earthquake, and she was telling her supervisor, you know, “Just think, what happened? Let’s all go home. Not supposed to work ‘cause it’s really close where the ocean is at.” So, but at that time, they saw, you know, the ocean, just rocks and sand. The waters go all the way in the deep ocean, no? But not even five minutes, they just saw the waves coming up, high, and they ran up where the plantation at, but it’s all, it’s no, it’s not that high mountain. It’s all level with the houses at. So, she saw that bedridden lady, woman, she’s just lying there, and her son was calling for help, so she ran and help her, and some other lady. So, they ran up the plantation, a car came, they just put her up in the truck, and they, it’s, they not going to go to the road, but they went back to the plantation road. For them, no final way to go up the mountain. So, she was holding the pole, over there the house. She was holding it…And then she, the waves comes and it swept her back, so the wave come back, go back to the ocean. She ran by herself, and everybody was up on the high mountain, in [name of village]. While they were, you know, just, that day, everybody was thinking
about God, for his kindness and lovingness for everybody, you know, territory of
American Samoa.

*Story Nine (speaking through an interpreter)*

She was talking about that day. In the morning, they were, when they came to work to
drop her off over here with her daughter, and they stopped at a store. So, her daughter
went inside and she was shopping for her, and she was sitting inside the car with her
grandkids. So then, finally, a man outside yelled, “Go find somewhere to go! A wave’s
coming!” And so she look at this, there’s a big wave coming, so she yell at her daughter.
So, her daughter jump in the car, they turn back home, the other car came, is almost hit
them on the road ‘cause they, they know the water was up here. So, she keep, you know,
keep her daughter strong to drove the car, don’t panic or anything like that. But her
daughter was panicked that day. “Keep going! Keep going! Turn the car!” So the car,
they turn up the car way to [name of village] where she’s staying at. So, by that time, the
kids was calling to help, “Grandma, Grandma, Grandma, Grandma!” And then she told
them, “Just lay down. Just lay down. Don’t move.” She’s trying to make her daughter
strong to drove the car up the mountain. So, when they reached the mountain, so, the
same thing they do. They just pray to God. No, none of them forgot what happened that
day.