advanced ethnobotanic inquiry to a higher level by revealing how the phytochemistry and physiological effects of kava influence its interpretation in the cultural or sociopolitical domains, and how those domains in turn mediate human–kava interactions in ways that have biologically transformed this important species throughout the Pacific.

*Kava* makes important contributions to the literatures of ethnobotany, ethnopharmacology, anthropology, and Pacific Islands studies. Scholars in those and related disciplines will want a copy for their personal libraries. The text is liberally illustrated with photographs, and the quality of production is high.

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*Migration and Health in a Small Society* is the final report of a unique sociomedical research project, the Tokelau Island Migrant Study, which ran for eighteen years between 1968 and 1986 and sought to document the consequences of social change on the health of a small Polynesian population.

The original design sought to compare the health of a group living on the atolls of Nukunono, Fakaofo, and Atafu in a relatively stable, tropical, rural, communal form of social organization in which they were the dominant group and ate a “traditional” diet, with that of genetically and socially similar migrants who were living in a modern, temperate, urban, monetized, and more individualistic form of social organization in New Zealand, where they were a sociocultural minority and ate a different diet.

The study as originally conceived presumed that the control population, isolated as it was on three atolls, would remain relatively stable in most crucial social and epidemiological respects and would provide a stable baseline against which changes in the migrant population, exposed to a complex and fluid set of social and environmental influences, could be readily identified and compared.

At the center of the study is the deceptively simple proposition that migration exposes people to new sets of risk factors and to new sets of sociocultural experiences and that these two sets of factors lead to deterioration in the health of the population. The study provided an opportunity to establish the relative importance of recognized epidemiological risk factors and sociocultural changes, respectively, in changing patterns of illness.

The design of the Tokelau Island Migrant Study was elegant in its simplicity and unique inasmuch as it was to capture data from the entire living Tokelauan population from a series of parallel sociological and medical surveys of both the nonmigrant “control”
and the migrant “experimental” groups. This comprehensive, longitudinal approach was intended to permit a high degree of confidence in the analysis and interpretation of the findings.

However, the study soon became more complex than was originally anticipated. First, shortly after it started a series of external forces produced some dramatic changes in the atoll “control population,” which were “extensive enough to threaten the very foundations of the Tokelauan social order” in the atoll population (379–380). These changes included the creation of a public service, which led to changes in the sources and distribution of income, and changes in the nature and sources of authority in the Tokelauan society. They were followed by a series of natural disasters in the form of hurricanes that devastated the atolls and transformed, at least temporarily, their social and economic organization. To make the situation still more complicated, the social and economic impact of these changes differed from one atoll to another. Second, the migrant community did not depart and remain away from the atolls as had been expected. Larger than expected numbers of migrants returned and introduced further external influences to the atoll population. Third, the migration population started to disperse, within New Zealand initially, and later outside New Zealand, making the tracking and monitoring of the entire population more difficult. These significant changes could not have been anticipated by those who designed and initiated the study, but they made it increasingly complex.

Despite these changes and their consequences for the original design, the study is remarkable and unique. It drew on and integrated theories and skills of a number of disciplines including sociology, social anthropology, epidemiology, biostatistics, dietetics, and pediatrics to set up and test a number of hypotheses about the effects of “Westernisation” or “modernisation.”

The material is presented in four parts. The first, entitled “The Homeland,” provides a concise summary of the prehistory and history of Tokelau and concludes with an account of the neotraditional social order of Tokelau. The second, entitled “The Way to New Zealand,” deals with the political and social forces that led to Tokelau migration, and profiles the nine migrant communities established in New Zealand. The third section, entitled “The Comparative Study of Tokelauan Communities,” outlines the demographics and social organization of the migrant and nonmigrant communities. The final part, entitled “The Health of a Changing Population,” examines the relationship between migration and health. It consists of a summary of the history of health problems in Polynesia, an account of the health and health behavior of migrant and nonmigrant populations, and the physiological consequences of life-style changes that follow migration, specifically on blood pressure and chronic disease patterns.

The first three sections contain the best collection of social and historical data on the Tokelaus anywhere, and this alone makes this an invaluable text on Tokelau. The third section, which is, for social scientists, arguably
the most interesting in the book is, however, disappointing in places. The full significance of excellent data is often obscured by an unfortunate style of presentation and unnecessary repetition of findings. Chapters 8 and 9 are virtually inaccessible to the interested lay reader and unnecessarily cumbersome even to the specialist reader, which is unfortunate because the material is interesting in its own right and crucial to the analysis that follows.

A key theoretical proposition considered in this section is that individuals will be more or less committed to central, publicly held values of Tokelauan social organization: the importance of extended family, the importance of collective action, and respect for age. The degree of dissonance between individuals’ private culture and Tokelauan public culture produces stresses that influence a range of things, including the likelihood of migration and patterns of physiological responses to the various stresses to which migrants are exposed. The concept is central because it provides a key to understanding variations in health and disease patterns that cannot be explained by epidemiological risk factors alone.

The way in which it is operationalized is therefore also clearly central. In this case, individuals’ orientations to these key values are established by individuals’ reactions to three pairs of statements (174–178), which are then converted into an index of dissonance. This index becomes the basis for the categorization of the population and the discussion of social orientation over time, and serves as the basis for discussions of interactions with other sociodemographic and epidemiological variables. While a relatively simple, compact index of orientation is valuable for the purposes of multivariate analyses, some readers will decide that the reduction of a relatively complex orientation to such an index carries some risk.

The fourth section, in which the consequences of migration on health are outlined, is a model of clarity. Although the conclusions on the relative importance of genetic or biological and psychosocial factors in changes in blood pressure are tentative, the process of analysis is extremely interesting. The relationship between migration and changing chronic disease patterns is also interesting and a model of systematic analysis.

In the end, the report arrives at what might be considered predictable and somewhat tentative findings about the relationships between migration and health, but the data introduced and the analysis performed on the way to these conclusions are extremely interesting, both as a model of research design and practice and of the possibilities of interdisciplinary research.

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