

Poverty in paradise?

Issues in poverty and development in Fijian fishing villages

Susan Zann¹ and Leon Zann

Introduction

Small Pacific Island countries (PICs) such as Fiji have long been considered “tropical paradises” by westerners. Extreme poverty and starvation are not considered critical issues in the region. The United Nations Pacific Human Development Report (1999) considered that PICs do not experience extreme poverty, or “it is not visible”. The Pacific Plan (PIFS 2006) emphasises national and regional economic development, governance and security, rather than more basic human development of Pacific Island people.

Development, however, is more than national economic growth. Development is about people, and expanding their choices, freedom and dignity. It involves their well-being, income, education, water, sanitation and other health-related issues that can impact on their standard of living, and cause deprivations that result in human poverty (Bello 2004).

Income has been used as the major indicator of poverty by the United Nations Development Program and the World Bank. The international benchmark for “extreme” poverty is set at under USD 1.00 per person per day, and “moderate” poverty under USD 2.00 per day (Sachs 2005).² Definitions of poverty by the World Bank are given below (Kegley and Wittkopf 2004).

Poverty is more than just a lack of money. United Nations Human Development Indicators of poverty include income and expenditure, diet, education, health care, water, sanitation and transport (UNDP 1999).

In the past, rural communities in Fiji could obtain a certain standard of living through traditional family networks and a subsistence economy that is based on marine and terrestrial resources. Fiji was a dynamic economic society whose culture was based on a subsistence existence. Fijian traditional values were based on beliefs and practices that focused on meeting the basic needs by maintaining social cohesion within the communal setting. The Fijian way of life was not individualistic; people depended on each other for survival and the accumulation of wealth was a foreign concept. The equitable distribution of goods and services was encouraged as a reciprocal practice. Land was the economic base and the source of well-being (Finau et al. 2003).

This is rapidly changing as traditional Fijian values such as subsistence and communalism are being eroded by modernisation, and replaced by commercialism and individualism. Development has resulted in a mass exodus of rural populations to the main towns and cities, resulting in large squatter settlements. Rural communities are also suffering from this exodus, with dwindling populations unable to provide for their families due to depleted marine and terrestrial resources, and an increasing cost of living and transport (UNDP 1999; Khan and Barr 2003).

Economic surveys in Fiji indicate that over 50% of the population lives on less than FJD 25.00 a week, and cannot meet their basic needs. However, in communities where subsistence activities are the major means of sustenance, it is difficult to measure the standard indicators. The Fiji Poverty Report (Gov-

Extreme poverty	Living on less than USD 1.00 a day. People in absolute poverty can not meet their basic needs and are chronically hungry, lack safe drinking water and sanitation, and have no access to basic health and education. It is estimated that over 1.1 billion people are living in extreme poverty and the majority of these are in Sub-Saharan Africa and Southeast Asia.
Moderate poverty	Living on USD 2.00 a day and just able to meet basic needs.
Relative poverty	Household income is below the national income level.

1. /4 Sunderland St, Evans Head, NSW 2473. Australia. Email: susanzann@hotmail.com; lpzann@hotmail.com

2. The rate of exchange at the time of writing was USD 1.00 = FJD 1.69.

ernment of Fiji and UNDP 1997) noted the need to measure poverty more appropriately, to include factors such as poverty of opportunity, access to health, education and a higher standard of living.

This study was undertaken to assess the extent of poverty in Fijian villages using the more appropriate UNDP indicators. The following discussion summarises the major findings of a survey undertaken in three villages near the urban centres of Nausori and Suva to examine issues of poverty and human development, and consider interactions between subsistence and cash economies.

Methods

Household member and informant questionnaires were developed to specifically address the United Nations Human Development Indicators on poverty (Table 1). The questionnaires included background details on demography, household budgets, diet and foodstuffs, fishing and house construction. The households' own values and perceptions of poverty and development were also assessed through a self-rated question on their standard of living.

Key informants such as village elders, leaders, *turaga-ni koro* (village "mayors"), chiefs, school teachers, church leaders and others who might have access to

general information were asked more open-ended questions on income, expenditure, diet, education, health care, water, sanitation and transport.

Other sources of information came from the UNDP Human Development Reports, the Asian Development Bank (ADB), Fiji Bureau of Statistics and the national census of Fiji in 1996. The questionnaires and discussions were conducted orally in Fijian (Bauan) by the authors and research assistants who came from that area.

Study sites

Three villages in the districts of Bau and Nakelo in the Province of Tailevu on the island of Viti Levu were selected: Dravo, Naisogovau and Namuka. These lie on the Waidamudamu River on the fertile lower Rewa River delta. They are around 5–10 km by road from the major town of Nasouri, and 20–25 km from Suva, where employment, health and education facilities are available.

Dravo

(population 203, 32 households, 37% surveyed)

Dravo is a small rural village about 5 km inland from Bau Waters. It is reached by a dirt road off the main road to Bau Landing. Nausori is 10 km away

Table 1. Household questionnaire.

Questions	Content
1.	Total number of dependents in household
2.	Number of families in household
3.	Sources of income
4.	Source of income from someone who lives elsewhere
5.	Household expenditure of items such as food, electricity and transport
6.	If household expenditure covers cost of living
7.	Daily diet (breakfast, lunch and dinner)
8.	Consumption of fish and meat, fishing activity
9.	Was fish caught, bought, given and by whom
10.	Number of people attending school, university and vocational
11.	Household expenditure on school fees
12.	Do school fees impact on access
13.	Health problems and deaths in last five years
14.	Type of health service in village
15.	Distance to nearest healthcare service/hospital
16.	Cost of transport to access healthcare service
17.	Does cost of transport affect access to health care service?
18.	Access to water
19.	Access to flushed toilet
20.	Self rating of standard of living
21.	Type of house structure/dwelling
22.	Number of rooms, appliances and power source
23.	Does household own a boat or car?

and is accessible by bus, taxi, carrier and boat. The village has a village church, meeting hall, piped water, flush toilets, telephones and grid electricity. There are no services such as cooperatives, healthcare centres or schools.

Naisogovau

(population 125, 21 households, 57% surveyed)

Naisogovau is a rural village, about 4 km inland from the coast and about 1 km from Dravo. It is accessible by bus, taxi, carrier and boat. It has a church, cooperative, grid electricity, piped water and flush toilets. There is no healthcare centre or school.

Namuka

(population 312, 45 households, 26% surveyed)

Namuka is a larger village, about 5 km from the coast. It is close to Nausori airport and the larger river settlement of Wainibokasi. It has a church, healthcare centre, primary school and cooperative.

Results and discussion

Population and demographics

A total of 36 households were surveyed out of a total household population of 98 in the three study sites. The average number of families per household was 1.3, with a mean household size of 6.5 people, and a maximum of 15. The demographics of the villages varied. For example, Dravo had a larger number of

people aged 0–5 and 70+ years than Naisogovau and Namuka. No males in Naisogovau were over the age of 70, and no females in Namuka were over the age of 70.

Cash economy

The average daily income per person per day was FJD 1.49, or FJD 550 per year. Broken down by village, this comes to Dravo FJD 2.27 per day, Naisogovau FJD 0.43 per day, and Namuka FJD 1.76 per day (Table 2). Naisogovau had the highest number of people working, yet the lowest average income. A possible reason for this is that the average wage for people is low. For example, a security guard with a family of 7 had an income of FJD 40.00 a week. Major items of household expenditure were by order: foodstuffs and water, school fees, church tithes and transport. Church tithes were high, from FJD 50.00 to FJD 250.00 per household per year. Village fees and functions (*solu*) averaged FJD 60.00 per year.

Subsistence economy

Even though the villages were relatively close to urban centres, a majority of households (55%) retained a primarily subsistence existence, relying on fishing and gardening (Dravo 83%, Naisogovau 50% and Namuka 33%). However, a varying proportion of their production was sold at the local urban markets for cash for manufactured foods, clothes and other necessities. Some households sold almost all their fish catch for cash and consumed little fish in their diets.

Table 2. Summary of household income and expenditure

Village	Average daily income per person	Main source of income in village	Main expenditure	% people who felt income did not cover living costs	Income from household activities	Level of poverty based on UN scale
Dravo	FJD 2.27 USD 1.35	16.6% employed; 83.4% have subsistence income	food, water, school fees, church tithe and <i>solu</i>	91.6%	<i>sasa</i> brooms, fishing coconuts, crops	moderate poverty
Naisogovau	FJD 0.73 USD 0.43	50% employed elsewhere; 50% have subsistence income	food, water, school fees, church tithe and <i>solu</i>	100%	fishing, <i>sasa</i> brooms, coconuts, crops	extreme poverty
Namuka	FJD 1.76 USD 1.04	33.3% work elsewhere; 66.7% have a subsistence income	food, water, electricity, school fees, church tithe, and <i>solu</i>	100%	<i>sasa</i> brooms coconuts, crops	moderate poverty

Diet

The main foodstuffs consumed were polished rice, *dahl* (split pea soup), cassava and fish (Table 3). An average of 44% of households consumed fish each day (Dravo 58%, Naisogovau 41% and Namuka 33%).

This study found the diet of most households to be poor and lacking nutritional value. Cassava, sugary tea, flour, biscuits and rice — the main food items — are the major cause of diabetes and malnutrition.

Importance of fishing

The three villages lie on the banks of the Waidamudamu River. They are varying distances from the ocean, and the importance of fishing and the major types of fish varied. Fish was the major source of protein, and a major source of income. Fishing was important in downstream Naisogovau (58% of households fished regularly) and Dravo (25% fishing regularly), and was least important in upstream Namuka (1% fishing).

The fishers of Naisogovau sold the majority of their fish in order to supplement their cash incomes, whereas fishers in Dravo consumed most of the fish they caught. The main source of income at Naisogovau was from small shrimps (*moci*). The main method for catching fish was by net, and hook and line. The main fish caught in Dravo was tilapia. The river had been dammed near the village, and tilapia were introduced in recent years.

Education

Only Namuka had a primary school. Children from the other villages must walk several kilometres to the nearest schools each day. Secondary school stu-

dents have to travel by bus to Nausori. Around 25% of the population in Naisogovau attend primary schools compared with 10.5% in Dravo.

While all younger children regularly attended a free primary school, attendance levels in secondary schools was much lower. Some 16% of older children at Namuka, and 25% each at Dravo and Naisogovau, did not attend any secondary school.

Education is a basic human development indicator. The main reason given for non-attendance at secondary schools and higher education was the cost of school fees and transport. While UNDP identifies a number of constraints to education in PICs (e.g. need for more teachers, promotion of national and cultural identities, and vocational training to bolster economic growth in tourism and fisheries), it does not present a strategy to address the low attendance at secondary schools because of school fees and transport costs in subsistence communities.

Health care

Around 30% of households had members suffering from a serious illness (e.g. diabetes, heart disease, cancer, stroke). Traditional or herbal medicines were more commonly used than western medicines in all villages.

Access to healthcare services varied. Dravo has a resident nurse. The nearest healthcare centre is at Mokani, about 5 km away. This has a dispensary and free medication, if available. Namuka has a dispensary and clinic.

Health and access to mainstream healthcare services are also important UN human development in-

Table 3. Diet and fish consumption.

Village	Main diet the day before survey	% who ate seafood day before survey	Type of seafood eaten (and where caught)	% fishers in the village	Origin of seafood	Fishing method
Dravo	fish, cassava, sugar tea, dhal, rice	58.3%	tilapia; <i>Lethrinus mahsena (sabutu)</i> (river and sea)	25%	caught, bought, given	hook and line, nets
Naisogovau	fish, cassava, tea, rice, taro leaves	41%	<i>Hemirhamphus far (busa)</i> ; <i>Leiognathus equulus (cebe)</i> ; shrimps (<i>moci</i>) (river and sea)	58%	caught, given	hook and line, nets
Namuka	fish, cassava, tea, dhal, rice, roti, sausages	33%	mangrove crab <i>Scylla serrata</i> (river)	1%	bought	

dicators. Although relatively good medical services are available in nearby Nausori or Suva, most people (95%) said that the high cost of transport was the main reason they could not access hospitals for serious complaints.

Other services: Transport, water, electricity and sanitation

The villages were well connected by gravel and sealed roads to Nausori and Suva. All had bus services to Nausori and Suva, as well as taxis and local carriers. The cost of bus fare was around FJD 0.75 one-way to Nausori, and FJD 2.00 one-way to Suva. Despite the good connections and relatively inexpensive services, one of the biggest issues was cost of transport, which affected access to health and education services for subsistence and low income households.

Access to electricity, water and sanitation are important development indicators. All villages had grid electricity, piped and reticulated water from the main water supply of the Public Works Department. In more developed Namuka, 83% of households were connected to water, and 33% had flush toilets. In Dravo, 67% of households were connected to water, but only 8% had flush toilets. Those without running water or electricity had been disconnected due to unpaid bills. Thus, while all villages had access to a Public Works Department supply, many households were not connected because they could not afford the services.

Housing

Traditional, single room huts (*bures*) made from bush materials were present only in Dravo (16% of dwellings). These did not have electricity or water connections. Other dwellings were constructed with walls of galvanised iron, timber or concrete block, with iron roofs. Many of the iron and timber houses/huts comprised a single room and limited furniture. Cement-block houses were larger and generally had three rooms. Material possessions varied with the level of income of each household. Most of the cement houses had some furniture and TV, DVD, radio, washing machine and other appliances. None of the surveyed households owned a car or motorboat.

Well-being and standard of living

The indicators above suggest that the general standard of living in the villages was low. When asked to rate their own living standards, an average of 52% of those surveyed rated theirs as “poor” or “very poor” (Dravo 42%, Naisogovau 75% and Namuka 41%). The remainder rated themselves as “good/very good”. While the basic indicators of human

development of “wellbeing” and standard of living are rather relative criteria, the above results indicate that these are limited — by western standards — in the villages investigated.

General discussion

Although the United Nations Pacific Human Development Report (1999) considered that PICs are not subject to extreme poverty, “or it is not visible”, it is apparent that extreme poverty does exist in communities in Fiji, and is visible. Two of the three villages surveyed in this study had average household incomes in the “extreme poverty” category (i.e. USD 1.0 per person a day), and one village was marginally better (“moderate poverty” category).

Extreme poverty also exists in Fiji’s urban areas despite greater employment opportunities and better services. For example, in a squatter settlement at Jittu Estate in Suva most families live on less than FJD 25.00 per week (Skjolseth 2003). The number of people living in poverty could be as high as 60% in some urban areas in Fiji (Khan and Barr in Skjolseth 2003).

Surveys in more isolated Fijian fishing villages also found that incomes were low. For example, in Macuata in Vanua Levu, Veitayaki et al. (2002) found the average monthly income per household was FJD 650.00, or FJD 3.60 per person a day (“moderate” poverty). The living standard of most households surveyed was considered low, and many households had large debts for fishing equipment, which provided their main source of income. Education levels were low and most household members did not proceed past primary school. Employment opportunities were very scarce and fishing, which requires no formal education, was the only means of earning an income.

Although there was no evidence of starvation, diets were considered poor because of excessive starch. Easily grown, starchy cassava and copious amounts of sugary tea have largely replaced more nutritious taro and yams in everyday village diets. Diabetes, one of the most serious health issues in Fiji and other PICs, is largely a consequence of development. Diabetes and hypertension can considerably restrict a person’s activities, and reduce their longevity, quality of life, productivity and even their ability to work (UNDP 1999).

In the past, the accumulation of income and wealth were foreign concepts in Fijian society and the equitable distribution of goods and services was a customary and reciprocal practice. The land was the economic base, the source of well-being, and identified who people were and their history (Finau et. al 2003).

These times are changing as Fiji and other PICs strive to meet demands of economic development. This often places an untenable burden on Fijian traditional values and practices that focused on meeting the basic needs by maintaining social cohesion within a communal setting. As UNDP notes “Pacific Island societies are not as equitable as they sometimes are portrayed to be, and in some ways these inequities are deepening... for individual poverty exists in the region and some people and households are singularly disadvantaged and impoverished” (UNDP 1999:5).

Acknowledgements

VAKADIDIKE ENA BULA NI MATAVUVALE TU VAKANAKORO

Ni Sa Bula Vinaka.

E levu sara vei ira era tu ena veikoro vakaviti ka vaka talega kina vei ira era tu ena veisaqata ni koro levu vakavavalagi e vakaiyalayala tu ga na nodra rawata na nodra wai, veitosoyaki, na nodra tabana ni bula ka vakauasivi na nodra rawa i lavo. Na vakadidike oqo e vakaraitaka sara ga na veileqa ka tara tu na bula ni so na veimatavuvale ka vaka talega kina na veileqa e tara tu na veikorokoro. Keirau vakavinavinaka vei kemuni kece sara ka a vakaitavi ena vakadidike oqo. Vinaka vakalevu na nomuni veivuke.



Figure 1. Fishing for tilapia.

References

- Bello W. (2004) “Deglobalization”, ideas for a New World economy. London. University Press. ZED Books.
- Finau S.A., Wainiqolo I.L. and Cubani G.G. Health transition and globalization in the Pacific: Vestiges of colonialisms. Fiji Times 2003.
- Government of Fiji and UNDP. 1997. Fiji Poverty Report 1997. UNDP. Suva, Fiji.
- Kegleley C. and Wittkopf E. 2004. “World politics” trends and transformations. Ninth Edition: Thompson and Wadsworth Inc.
- Khan C.A. and Barr K.J. 2003. Christianity, poverty and wealth at the starting of the 21st Century: Fiji Country Case Study. ECREA. Suva, Fiji.
- PIFS 2006. The Pacific Plan for strengthening regional cooperation and integration. Pacific Islands Forum Secretariat. <http://www.pacific-plan.org>
- Sachs J. 2005. The poor. Time Magazine. April ed.
- Skjolseth H. 2003. Globalisation and poverty in the Fiji Islands. University of the South Pacific, Suva, Fiji.
- UNDP Human Development Report 1999. General Human Development Report. FIJI, UNDP, Suva, Fiji.
- Veitayaki J., Nandal S., Kumar L. and Rajan J. 2002. Report on the socio economic survey of north-east Macuata Province. Institute of Marine Resources, University of the South Pacific.



Figure 2. Local house being renovated in Dravo.