18. The Underprivileged

Back in the 1960s, an author from overseas wrote a book called *Where the Poor are Happy*. He recounted life in Fijian villages and tried to show that while the people had very little wealth or material possessions they were, nevertheless, happy.

While this thesis had some merit at the time, the Fijians have since lost much of their innocence as they have been caught up in the complexities of modern life. To live in a small thatched house in a remote village with your own piece of land and have the support of the community for the duration of your life is no longer enough. Urban life offers more, they believe. But that means getting an education, a job and somewhere to live. Happiness and contentment is replaced by greed, ambition and envy, and the spiral into a life of urban poverty or crime begins.

This proposition also ignores the fact that, at the time, over half of the population of Fiji was Indian. While there were wealthy Indians, the vast majority were extremely poor and far from happy. The motivation of most Indian people is to work hard, live a frugal lifestyle and commit as many resources as possible to the education of their children so that they can aspire to a better life.

A third group of people who are generally poor and far from happy are those caught in the cultural chasm, the so-called ‘Part-Europeans.’ During the colonial period, the rather disparaging term ‘half-caste’ was used. At that time, they found it to their advantage to align themselves with the Europeans. But after the coup of 1987, some tended to evoke their Fijian parentage.

In reality, there have never been many rich people in Fiji. While my family was generally regarded as wealthy and influential, the fact is we never had much cash in the bank. In the later part of the 20th century, as the economy grew and businesses flourished, a number of Indian families did become very rich, but they were a minority. Senior civil servants and heads of statutory bodies who commanded relatively high salaries acquired assets, so there has been a growing affluent middle class. But there has also been an ever-increasing number of people who are poor and unhappy.

The government has never had enough money to help the poor. Wages never increased much above the cost of living, which constantly rose, and the growth in the economy was never fast enough to absorb the annual influx of school leavers. It was left to a few charitable organisations and churches to help the needy. One of these was the Bayly Trust. J. P. Bayly was Fiji’s first philanthropist. He was born in Levuka in 1882 and after spending his early years in the customs
department he began buying land for cattle ventures. While he acquired a great deal of wealth, this was partly due to the fact that he never spent anything on himself. He lived an austere life, with boxes for furniture in his humble house. Before he died he set up a medical centre to benefit the poor, to which was added a welfare section, manned by volunteers and supported by business houses. The clinic provided cheap medical services to the poor and the welfare centre gave out food and clothing.

Church organisations played a vital role in helping the poor. Their motives may not have been entirely altruistic, for those they helped often became members of their flock. I had always visualised the Salvation Army as a low-key group of colourless people with brass bands who provided food kitchen and other means of support for the poor. They came to Fiji in the 1970s and quickly dispelled that image. Theirs was a smartly run, efficient organisation that gave all kinds of practical assistance. As the German Consul in Fiji, I operated the Small Scale Projects Scheme, which gave up to $15,000 to projects aimed at improving the quality of life of the less fortunate. I tried to work through organisations and soon realised that the Salvation Army was good to work with. We undertook a number of projects together, including a refuge for homeless mothers, kindergartens, and small farming and business endeavour aimed at giving poor families an income.

One of the Roman Catholic priests for whom I had a great admiration was Father Barr. He operated a home in Suva for homeless street boys. He would take them off the streets and give them food and a bed. He then set up a small training facility to give the boys some basic skills. I was able to help him with this project. He then organised a farm scheme where boys could learn to plant crops, tend pigs and learn basic mechanics. He was a man with a strong social conscience who wrote often to the newspapers, fearlessly criticising those who failed to fulfill their responsibilities to society. He worked with so many NGOs that I often wondered how he had time to attend to his pastoral duties. But I am sure that the work he did for the poor was far worthier than time spent before the altar.

I always had a great respect for the Red Cross, but it wasn’t until I became President of the Fiji Red Cross that I came to fully appreciate their vital role in the community. When I took over, I quickly realised that this was a lot more than a humble NGO. It was a moderate-sized organisation that needed to be run like a business. It needed a person with a strong commercial background to serve as director. We accordingly recruited John Scott, an executive with Shell Fiji. John’s father, Sir Maurice, was a distinguished lawyer and former Speaker of the House of Representatives. His grandfather, Sir Henry, was also a leading lawyer of his time. John’s credentials were impeccable. But he was gay, and some of my board thought that it would be inappropriate to have such a person as
head of the Fiji Red Cross. Fortunately, the majority view prevailed and John was to become a dynamic and progressive director. The Red Cross targeted social welfare, poverty alleviation in many forms, and assistance in times of disasters, such as floods and hurricanes. It taught children how to swim, attended sports meetings to help the injured, and gave traditional instructions in first aid.

In May 2000, when George Speight took over parliament and confined the parliamentarians within the complex, John Scott, as head of the Red Cross, became the only person allowed inside to visit and carry mail to the MPs. He was their only link with the outside world and as such was the target of the media and every other person wanting information about conditions inside. John realised that if he was to maintain Speight’s confidence and trust and continue to be allowed to go inside, he had to be extremely discreet. To his great credit, and at extreme personal risk and sacrifice, he continued his vital role until the hostages were released. John brought tremendous kudos to the Red Cross and was showered with greatly deserved local and international acclaim.

Tragically, his personal lifestyle was to be his undoing. A year later John and his partner were brutally murdered at his home.

One of the groups in society that is severely disadvantaged is people with physical or mental disabilities. They would be a lot worse off if it wasn’t for one of the most outstanding men who has ever served Fiji. Frank Hilton came to Fiji from Australia in the 1960s. He was a frail, unassuming man with no manifestations of greatness. But as his commitment, dedication, boundless energy and love for the crippled children in Fiji became glaringly apparent, he grew in stature and won the respect of the nation. He has been honoured by the Government of Fiji and by Her Majesty the Queen for the establishment and management of a school for the deaf, a school for the blind, ‘a self supporting sheltered workshop,’ a physiotherapy department, and a hostel, which bears his name. It was my honour to read his citation when, in the presence of the President of Rotary International, the Governor General, the Prime Minister of Fiji and the Lord Mayor of Suva, he was awarded Rotary’s highest honour for his work.

It’s not easy running these kinds of operations in a poor country like Fiji. The government can provide few funds and much has to be raised from the community and donor countries. Not everyone likes working with physically handicapped people, so there is a shortage of trained people. Furthermore, there is often a cultural resistance among Fijians and Indians to admitting they have crippled children. Many children are kept confined in homes and not allowed to go to special schools. Even the children themselves often do not admit to having sight or hearing deficiencies. If they sat at the back of the class and couldn’t see the blackboard clearly or were a little deaf and didn’t hear what the teacher
said, they were chastised and sometimes sent home. I became involved with an organisation called Project Heaven, which aimed at testing the hearing and sight of school children. If they were found to have problems they were given glasses or hearing aids. Sometimes all that was needed was to clear the wax out of their ears. Needless to say, Frank Hilton was one of the organisers of this very successful endeavour. We tested and helped over 150,000 children.

During the colonial era, the hospitals in Fiji were called the vale ni mate, which means ‘the house of death’ in Fijian. Local people only went to hospital when there was nothing more that the traditional healers could do and they were so close to death that the end was inevitable. Hospitals were only found in the main centres and it wasn’t until the latter part of the 20th century that the government set up health and nursing centres throughout the islands so that there was widespread medical care available. Even so, there was a great deal of criticism about the quality of treatment and care.

Medical treatment was virtually free. Our house lady, Litia, a Fijian of 40, was once crossing the main road near our home at night and was hit by a car. Her leg was seriously injured and there was some debate as to whether it should be amputated. Fortunately for her, the doctors decided to try and save it, and she was in hospital for over three months. The treatment was a success and she was able to walk out on both legs. It cost her nothing. One of the features of local hospitals is that relatives are allowed to visit and care for patients and even bring food. It may not be good medical policy, but it has the benefit of comfort for the patient and saves on food. I am sure that Litia’s family was a big help in seeing her through that ordeal.

There is very little cardiac treatment or plastic surgery done in Fiji. The worst cases have to be sent overseas at great cost, and, if the family can’t afford this, the patient dies or remains disfigured for life. Fortunately, the disadvantaged in Fiji have benefitted for many years from the incredibly generous work of volunteer surgeons who visit Fiji from Australia, New Zealand, India and the United States to carry out free treatment. It’s not hard to imagine the joy that a destitute family experiences when their child’s disfigurement is miraculously repaired for free by some of the world’s best doctors, when sight is restored, or when a malfunctioning heart is repaired.

For most of the 1990s, I worked with a group trying to set up a private hospital in Suva. Our aim was to have a facility that was on par with any hospital in Australia or New Zealand. What was required was not only money, but also a link with a reputable private hospital operator overseas. We had many false starts, but finally in 2000 I had the great pleasure, as Chairman of the group, to invite Prime Minister Chaudhry to lay the foundation stone. Our investors were the giant insurance firm of Colonial, the large Fijian investment company.
Fijian Holdings, Unit Trust, an investment organisation for the people of Fiji, and Maine Health, the largest operator of private hospitals in Australia. While this facility was not much help to the poor, it did give a choice for those with insurance or funds to get treatment in Fiji.

As the standards of public hospitals deteriorated throughout the 20th century, more and more people turned to traditional healers. Fijians have a bark or leaf or juice for just about any complaint known to man. In a publication, *The Secrets of Fijian Medicine*, 240 medicinal plants are identified. Chinese acupuncture is also widely practiced and there is little doubt about its healing capabilities, though today, with the fear of AIDS, fewer people want to take the risk of contaminated needles.

For most of the 20th century, the aged were cared for by their family. This was natural in a Fijian village communal environment. The old helped out with village chores or in the food gardens till they were too feeble to do anything. Their family fed and housed them till they died. Indian people also had a strong family culture that provided for loving care and attention for the aged. But as economic pressures mounted in the last quarter of the century, the burden of feeding an extra mouth or two often became too great for a family who earned only a few dollars a week. Beggars started to appear on the streets of the towns and cities. A number of old people’s homes were established, but they were sad places that were under-resourced and under-staffed.

One of the most positive developments was the establishment of the Fiji National Provident Fund in 1967. Under the scheme, each employee contributed seven cents in the dollar from his pay, while the employer contributed the same. At the age of 55, the employee could retire and either draw out all of the funds or take an annual pension, set at 25 per cent of the sum in the account. In other words, if a person ended his working life with $100,000 in his account, he could take that as a lump sum, or receive an annual pension of $25,000. It was one of the most generous schemes in the world. Indeed, it proved to be too generous and 40 years later it was reviewed and the pension rate reduced to 10 per cent.

One weakness of the fund was that it benefitted only employed people. The self-employed, including farmers and shopkeepers had to provide for their own old age or depend upon their family. Another fault was that, as the fund grew and finding suitable investment opportunities became difficult, the Board decided to make it easier for members to withdraw funds for school fees, housing loans, sickness and other humanitarian reasons. This resulted in member’s pension entitlements being depleted. When a member reached the age of 55, he or she had the option of withdrawing all their funds or converting to a pension. Most people decided to take their money and, of course, in a few years it was gone and there was nothing left for old age.
According to reliable data, a great many Fiji people are living below the poverty line. However, most of those do have a reasonable roof over their heads and few are starving to the same extent as millions in other parts of the world.