

**‘FAIĀ MODEL’: INCLUDING PEOPLE WITH PHYSICAL  
DISABILITIES WITHIN THE ‘VAIMAUGA I SISIFO SUB-DISTRICT  
OF THE CONGREGATIONAL CHRISTIAN CHURCH SĀMOA’**

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by

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## ABSTRACT

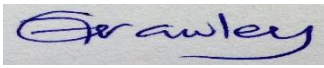
Disability is usually discussed in regards to an individual with impairments commonly known as people with disabilities or PWDs<sup>1</sup>. The ‘medical model of disability’ sees disability as a problem pertaining to an individual who needs medical assistance, but not a community problem (World Health Organisation 2002, 8). Alternatively, the ‘*faiā* model’ is the Samoan ‘traditional relationship’ where the community and the individual live and be responsible for one another. This is in line with Mike Oliver’s ‘social model of disability’ that defines disability as the failure of the community to harmonise the space and relationship between PWDs and the community (Oliver 2004, 18-31). Both the ‘*faiā* model’ and the ‘social model of disability’ point to the physical, social, cultural, political and theological barriers to PWDs as the responsibility of the community and PWDs to overcome. On the theological basis, Jesus miracles are mostly preached in light of Jesus power over sin and evil that portray disability as a result of sin and curse. The ‘*faiā* model’ with the ‘social model of disability’ extends the reading of Jesus’ healings. Jesus’ miracles is more than just healing the person with impairment, but it’s also about incorporating the PWDs who were rejected by the society back to normal life where they belong. This paper aims to navigate the Samoan culture and the theological and biblical interpretations through the lens of the *faiā* model, with the assistance of the social model of disability; thus finding positive alternatives for the inclusion of PWDs in Sunday worship.

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<sup>1</sup> This paper focus on people with physical disabilities that is discussed in the Introduction section of this paper. Therefore, PWDs refer to People with Physical Disabilities.

## DECLARATION

I declare that this work has not used without due acknowledgment of any material that has been previously submitted for a degree or diploma in another institution. I also declare that the work has not used any material, heard or read, without proper acknowledgment of the source.

Signed:  \_\_\_\_\_

Date: Monday, 5<sup>th</sup> September 2016

## DEDICATION

This work is dedicated to my beloved grandmother, the Late Aiga Ulu Crawley, whose dream keeps me going in times when I am down and tested.

To my Dearest mother whom I have never had the opportunity to meet, Mommy Sina Crawley, I hope you are happy and are with me always in my struggles in life.

To Tinā Tagiitumalii Leilua for her words of wisdom and prayers that keep me more determine to finish this task and glorify God.

To my wife, Alofa Viliamu Crawley, thank you for challenging me to complete this task. To my coffee mixers Varani Crawley, Geobra Crawley, Vilfred Crawley and time-watcher Tafatolu Crawley *faafetai lagolago ma le alolofa I le tou tamā*.

To all People with Disabilities in Samoa, this work is just the start of my dream to include PWDs in all dimensions of CCCS developments.

God bless.

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“Not to us, O Lord, not to us, but to your name give glory, for the sake of your steadfast love and your faithfulness” (Psalms 115:1) Glory be to God now and forever more. *Momoli le agaga faafetai tele I le Ekalesia Faapotopotoga Kerisiano I Samoa, faafetai I la outou tatalo faapea seleni ma soo se fesoasoani ua mafua ai ona faataunuuina lenei faamoemoe. Faafetai I le Susuga I le alii Pule o le Kolisi Faafaifeau I Malua, le Susuga I le Sui Pule, paia I le aiga Faiaoga faapea le laumua I le nofo-a-vasega; faamalo tatalo faafetai tapuai.*

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## LIST OF ABBREVIATIONS

VSD	Vaimauga I Sisifo Sub-District of the Congregational Christian Church of Sāmoa
CCCS	Congregational Christian Church of Sāmoa
MWCSD	Sāmoa Ministry of Women, Community and Social Development (sometimes known as the Ministry of Women)
UN	United Nations
UNICEF	The United Nations International Children's Emergency Fund
WHO	World Health Organisations
EFKS	Ekalesia Faapotopotoga Kerisiano i Sāmoa (Sāmoan translation of CCCS)
NOLA	Nuanua o le Alofa (Rainbow of Love Organisation)
PWDs	People with Disabilities or Persons with Disabilities (This paper refers to People with Physical Disabilities)
LMS	London Missionary Society
MTC	Malua Theological College
PTC	Pacific Theological College
Rev	Reverend
Dr	Doctorate (usually refer to as Doctor)
CEDAW	Convention on the Elimination of all forms of Discriminations Against Women
CRC	Convention on the Rights of the Child
CRPD	The Convention on the Rights of Persons with Disabilities
UPIAS	Union of the Physically Impaired Against Segregation
NRSV	New Revised Standard Version Bible
PDF	Pacific Disability Forum

## INTRODUCTION

My passion for people with disabilities (hereafter referred to as PWDs<sup>1</sup>) started when I was attending Sunday school where I was taught about Jesus' healing miracles and ministry. To my young understanding at that time, Jesus' ministry was all about healing and being with the PWDs. Sadly, there was a guy living next to our pastor's house<sup>2</sup> where we usually have our Sunday school at. He was born without legs and he never attended Sunday school and church service. To us then, it was a usual sight to see him every Sunday on his wheelchair waving at us during our Sunday school time. Some children make fun of him but it didn't stop him from waving from his wheelchair. I also remember that one day when our Sunday school teacher was telling a story about Jesus healing a lot of sick people, and points to the guy on the wheelchair as an example of the people Jesus healed. It made me think about why such a brother on the wheelchair is not part of our Sunday school, as such PWDs are Jesus' friends. After our Sunday school, we have to walk from the pastor's house to the church building, and all he would do is just to wave at us passing by his home. His family consisting of his parents and siblings attend worship, but they take turns on who to stay at home with the guy on the wheelchair during Sunday worship. Worst of all, the guy who has a real name, Sanele, is known to the so many people of our Lepea parish as *leo-fale* or 'house security'; something that hurts me. I believe these experiences faced by Sanele is one of the many struggles faced by PWDs in Sāmoa, both in the Sāmoan society and the Congregational Christian Church of Samoa (hereafter referred to as CCCS).

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<sup>1</sup> As mentioned in the 'Abstract' this paper focus on 'people with physical disabilities'. Therefore PWDs in this paper refer to 'people with physical disabilities.'

<sup>2</sup>Our pastor's house is at Lepea parish of the Congregational Christian Church of Sāmoa. It is located in the urban area near Apia the capital city of Sāmoa, in Upolu island the second largest island of Sāmoa. It is where I grew up before I moved to Tanoalei'a where I'm now still residing.

The above is evident in my experience as a member of the CCCS for more than thirty years. It is a rare sight to see someone on a wheel chair, someone blind with a walking stick, and those with hearing impairment in Sunday worship. It questions whether most of them are at home on Sundays during worship like Sanele due to their disability, or that the environment<sup>3</sup> at church is not helping their situations. Furthermore, I have never seen or heard of a CCCS parish or preacher that uses sign language to complement sermons during worship for those with hearing impairments. Crucial to this writing, as a graduate of the Malua Theological College (hereafter referred to as MTC) of the CCCS, I know that there are no courses or programs that specifically teach special skills to deal with PWDs and their needs. To see this in the largest and oldest denomination<sup>4</sup> in Sāmoa is a concern for me as a preacher, and a student studying ministry.

### **Research Question and Significance:**

This research looks at how the CCCS can strengthen its pastoral role, to cater and include PWDs in Sunday worships, in enabling worship environment for all (able body and those with disabilities) in the ‘Vaimauga i Sisifo Sub-District of the CCCS’ (hereafter referred to as VSD). Answering this ‘how’ question will open up the discussion on the existing barriers preventing PWDs from participating the Sunday worship and church activities. This pilot research framework can be used as a discussion paper in promoting disability awareness and integration in the CCCS policies and action plans formulation.

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<sup>3</sup> The environment points to the building designs that include ramps and other facilities and equipments needed by PWDs to move freely to worship and church activities. The environment also includes attitudes, policies, traditions and cultures that surrounds people with disabilities in society and church communities.

<sup>4</sup> CCCS was the first established church in Sāmoa in 1830 through the London Missionary Society missionaries led by John Williams. More will be explained in Chapter 3. CCCS is also the largest denomination in Sāmoa with 31.8% of the total population, followed by the Roman Catholic with 19.4% of the total population (Sāmoa Bureau of Statistics 2012, vii).

It is also a practical framework in the realisation of the CCCS ministry of “Betterment of life for all members of the church” (Komiti Faapitoa Iloiloina le Faavae EFKS<sup>5</sup> 2006, 9).

## Methodology

The approach used throughout this paper is the ‘social-analysis’ through the *faiā*’ or ‘relationship’ model. Social analysis according to Kevin J. Barr’s *Guidelines for Social Analysis*, looks at society we live in and the problems we faced in its social structure, political decision making and how we can improve the life of the vulnerable groups. It is a method of finding the causes and creating positive alternatives for the oppressed such as people with disabilities, by looking at ‘society’s behaviour’ and ‘historical background’ (Barr 2005, 1 – 3).

The *faiā* according to Amaama Tofaeono’s dissertation, “Eco-Theology: *Aiga* – The Household of Life a Perspective from Living Myths and Traditions of Sāmoa”, is the overarching connections and relationships where, “ The human being found his/her true identity, not in the essence of one’s own being, but in association with other selves, including the natural environment and the Gods” (2000, 171). Correspondingly, Tuiatua Tupua Tamasese Taisi Efi<sup>6</sup> used the term *va* in pointing to the ‘relationship’ and ‘space’ between a Sāmoan person and their indigenous god Tagaloa<sup>7</sup>, plus everything in the cosmos (2009, 175). *Va* however is generally a space or gap. G.B.Milner defines *va* as the “distance, space (between two places, things or people)” (1993, 307). The focus of this writing does not emphasise just a space or relationship that highlights connection of

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<sup>5</sup> Translated as the ‘Special Committee that Review the Constitution of the CCCS.’

<sup>6</sup> Tuiatua Tupua Tamasese Taisi Efi is the current Head of State of Sāmoa, and was a former Prime Minister.

<sup>7</sup> Tagaloa is Sāmoa’s indigenous god that Sāmoans believe created everything including the *tagata* or Sāmoan people. The Sāmoan creation story and more discussion on Tagaloa will be elaborated in Chapter 2.

location as above mentioned. *Va* as defined above is also limited to connections between people or two non-human subjects or objects (Efi 2009, 175).

This paper uses the term *faiā* as it is relationship that is full of responsibilities and actions that will be argued in chapter two and throughout this paper. The word *va* and *faiā* are two similar terms that point to relationship, but are not identical. The term *faiā* is made up of the root word *fai* and suffix *ā*. The word *fai* is generally ‘implementing or doing something’ that Milner defines as ‘do’ and ‘make’ (1993, 52). The suffix *ā* is defined by Milner as “...denoting an abundance or plentiful supply of person, animal, or thing denoted by the base” (1993, 1). The word *fai* as the etymology pointing to ‘do and make,’ and the suffix *ā* denoting ‘abundance and plentiful’, highlights the nature of the term *faiā* as ‘relationships that is full of duties and responsibilities needed to be implemented for the well-being of all parties’. Therefore, the ‘*faiā* model’ according to the above discussion will be used in this writing as ‘the traditional relationships between: a Samoan individual and community - the divine - and the environment (cosmos) that is not only relationship as identity, but comes with responsibilities for the well-being of all’. The detailed discussion of *faiā* will be in Chapter 2.

## Qualitative Information

The Vaimauga I Sisifo Sub-District of the CCCS (VSD) is made up of eight (8) parishes with eight pastors looking after each parish under the guidance of the VSD Elder<sup>8</sup>. The VSD is part of the ‘Apia I Sisifo District’ which is one of the 18 Districts that make up the CCCS. The methodology for this research is both ‘quantitative’ and ‘qualitative’ that is thoroughly discussed in Chapter 4. As mentioned above, there are

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<sup>8</sup> The Elder or Toeaina is responsible for each Sub-District known as Pulega. There is another superior Elder known as Toeaina Faatonu that looks after the whole District including Sub-Districts of the CCCS.

eight (8) pastors in VSD so that is also the total target group or population<sup>9</sup> of VSD pastors. Five (5) out of eight (8) pastors in the VSD were selected using the simple random sampling method. It is a representative sample of the population as  $5/8 \times 100\% = 62.5\%$ ; thus the sample is 62.7% of the population<sup>10</sup>. The eight pastors' names were listed and given a number from 1 – 8, and the Sāmoan Go-Mobile Telephone Booklet<sup>11</sup> page 100 was used to select five numbers using the last digit of the five digit telephone numbers<sup>12</sup>. The five pastors selected and interviewed are hereby named as Tasi, Lua, Tolu, Fa and Ono as they did not want their names to be acknowledged in this research, so I respect their decisions. However a consent letter (attached as Appendix A) was signed by all those interviewed for the information to be used in this paper<sup>13</sup>.

Other than the five (5) pastors selected, other key respondents were interviewed to get core quality information. Four (4) were selected from the leadership and decision making circle of the CCCS that include: the Chairman of the CCCS Elders Committee: Elder Kerisiano Soti, the General Secretary of the CCCS: Afereti Uili, Principal of MTC: Maafala Limā, and member of the MTC Board: Elder Siolo Tauati. The CCCS leaders' voices is very important as they are the CCCS decision and policy makers. Two (2) interviews were conducted with leaders of active Disabilities Organisations in Samoa: the President of the 'Nuanua o le Alofa Organisation' commonly known as NOLA, Faatino Utumapu; and the Disability Awareness Coordinator of 'Senese Inclusive Institution for

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<sup>9</sup> Population according to Keith F Punch is the total 'target group' or the total units of subject of the research where the sample is selected from.

<sup>10</sup> 5: Is the Sample size and 8: population size converted to  $100\% = 62.5\%$  which is more than 50% of the total population therefore above the representative mark or average.

<sup>11</sup> Sāmoa Gomobile is one of the largest telephone company in Sāmoa.

<sup>12</sup> If the phone number is 22033, then the last digit that is 3 will be used, if the second number is 24518 then the second sample unit will be number 8 which is the last digit of the phone number 24518..

<sup>13</sup> All consent letter with the author.



the Disabled’, Faaolo Uitaulesolo. Utumapu and Uitaulesolo are both PWDs<sup>14</sup>. These two Disabilities leaders represent the voice of PWDs and their opinions on the necessary role of the VSD for PWDs. One (1) interview was conducted with the Principal Officer<sup>15</sup>, Meritiana Tanuvasa, of the Disability Unit under the Sāmoan Ministry of Women, Community and Social Development. Therefore a total of twelve (12) interviews were conducted. The quantitative questionnaires<sup>16</sup> (attached as Appendix B and C) for ‘pastors and MTC graduates in VSD’ and ‘PWDs in VSD’<sup>17</sup> were used as a guide for all interviews, but the interviews were open using probing questions to get important points that the respondents were putting forward. Most arguments in this paper are from qualitative literatures from theologians, scholars, government reports, journals, articles, and other relevant publications.

### **Quantitative Sampling Method**

Quantitative information are from two separately designed but similar questionnaires that contain six (6) closed-ended questions and one open-ended question in each questionnaire<sup>18</sup>. The questionnaires were distributed to two (2) target groups:

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<sup>14</sup> They were both born blind but are very vocal on disability awareness. They are also computer literate using special modern technologies for the blind as they both attained degrees.

<sup>15</sup> Tanuvasa’s role is second ranked to the Head of the Division that looks after Disability under the Sāmoa Ministry of Women, Community and Social Development.

<sup>16</sup> The quantitative questionnaire attached (Appendix B and C) was also used for the qualitative process through interviews, as there is the need to use both quantitative and qualitative data analysis together in the discussion part in Chapter 4.

<sup>17</sup> The pastor’s questionnaire (Appendix B) was used for CCCS leaders’ interviews, and the PWDs questionnaire (Appendix C) was used for Disability Organisations and the Sāmoan government Disability Unit interviews.

<sup>18</sup> Please find the two attached questionnaires for ‘PWDs in the VSD’ and ‘pastors and Malua Theological College graduates in VSD’ at Appendix B and C, as well as statistical analysis in Appendix D and E.

fifteen (15) 'PWDs'<sup>19</sup> from VSD', and fifteen (15) 'ordained pastors'<sup>20</sup> and graduates<sup>21</sup> of MTC' who are assisting the pastoral roles in VSD. As PWDs are very rare to find in VSD, the help of one of my friend, Sa Seufale<sup>22</sup>, a PWD working at Nuanua o le Alofa was sought. We were able to identify seven (7) PWDs at VSD from PWDs working at the Nuanua o le Alofa and other Disability Organisations with the help of VSD pastors. The seven (7) PWDs we identified and their families helped us identify eight (8) other PWDs within the VSD. The fifteen (15) PWDs given questionnaire were assisted by family members, plus Seufale and my-self in filling-up the questionnaires. This sampling method is related to the 'snowball sampling method'<sup>23</sup> according to Catherine Dawson's sampling techniques (2009, 50). The other fifteen (15) questionnaires were given to fifteen (15) ordained pastors and MTC graduates who are assisting pastors in pastoral roles/activities. As some parishes do not have ordained pastors and/or MTC graduates, five (5) ordained pastors and ten (10) MTC graduates from VSD who were available were selected and given questionnaires. The method used is more related to the 'quota sampling method'<sup>24</sup>, as raised by Tim May (1993, 71). It is due to the availability nature of the ordained pastors and MTC graduates and their uneven distribution in VSD. However, the selection was

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<sup>19</sup> As clarified in the introduction and the topic of this thesis, PWDs targeted by this paper and research are those with physical disabilities only.

<sup>20</sup> These are the ordained pastors from VSD who are waiting for parishes, some are working in the CCCS offices, some as teachers in CCCS schools, they are the ones supporting the VSD pastors with the pastoral activities such as worship and Sunday schools to name a few.

<sup>21</sup> These Malua Theological College graduates are also the ones supporting pastors in worship and other pastoral roles/activities such as Sunday school and youth.

<sup>22</sup> Sa Seufale is working as a senior officer in the Nuanua o le Alofa Organisation. He has a very low vision but can still go around with his walking stick. He is from my village and is my good friend, he is a very powerful voice of PWDs in NOLA's awareness programs.

<sup>23</sup> The 'snow ball sampling method' is applied to target groups that is rare to find and need assistance in responding. The researcher uses the available/identified target group members to get the information on where to find other members of the target group. Approval is needed from guardians before any research is done in this method according to Dawson (2009, 50).

<sup>24</sup> The 'quota sampling method' is a 'purposive sampling method' that is used to select the right cluster of the target group that is available and relevant to the purpose of the research. A sample taken from this method is not representative, but the best ones available that is appropriate for the study are chosen and used by the survey (May 1993, 71).

distributed along six (6) parishes in VSD where the target group were found to ensure validity of information. Therefore, 30 questionnaires altogether were distributed and collected. The table below statistically summarises the sampling method employed.

**Chart 1: Summary of Sampling Methods**

<b>QUALITATIVE TARGET GROUP (Interviews)</b>	<b>SAMPLE</b>	<b>QUANTITATIVE TARGET GROUP (Questionnaires)</b>	<b>SAMPLE</b>
Pastors in VSD (simple random sampling method)	5	PWDs in the VSD of the CCCS (Snowball sampling method)	15
Leaders of CCCS (relevant stakeholders)	4	Ordained Pastors and Malua Theological College graduates in VSD (quota sampling method)	15
Disability Organisations Leaders (relevant stakeholders)	2		
Government Disability Unit (relevant stakeholders)	1		
<b>Total Sample</b>	<b>12</b>		<b>30</b>

### **Limitations and Scope**

This paper does have limitations, as clear on the topic of this writing, the focus is on ‘people with physical disabilities’ that this paper refers to as PWDs. People with mental disabilities are not covered by this paper due to the scope of this writing and the diverse nature and differences of ‘mental disabilities’ and ‘physical disabilities’ that

include medicine applications<sup>25</sup> to name a few. The study will also focus on two models of disability that will be discussed in chapter 1, which is the ‘social model of disability’ and ‘medical model of disability’ that is relevant to the task of this paper. The study also focused only on members who are at the VSD at the time of the research analysis that is from November 2015 – February 2016. There are also a lot of changes expected in regards to government legislations in Samoa addressing disabilities issues in the future; therefore there is a need to review and upgrade information of this thesis paper in the future to ensure validity of information and data. There is also a review of the CCCS constitution in 2016 that might raise relevant amendments that could affect the discussions of this paper. My background as a former Sāmoan chief title holder, statistician and a current theological student could influence the analysis and outcome of the research analysis and discussions. However, I am trying my best to base the argument on evidences and responses provided, with the support of key relevant literatures from scholars and theologian to ensure neutrality of the arguments. There are always sampling errors in the methodology, both the quantitative and qualitative methods; but I have explain the sampling process in detail to justify the reasons for using such sampling method; given the nature of the target groups.

## **Chapter Outline**

Chapter 1 presents the background information on Sāmoan government legislations, policies and initiatives that governs the life of PWDs. The major part is the literature review that presents models by scholars that provide definition of ‘disability’ in

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<sup>25</sup> Most people with mental disabilities takes special medication to control their mental impairments or instability, people with permanent physical disabilities such as the blind could not be treated by medications as their impairments are for life or permanent. This paper’s scope focuses on people with physical disabilities only.

this paper. The ‘social model of disability’ and the ‘medical model of disability’ are the two models used in this paper’s discussion to assist the *faiā* model<sup>26</sup>. The last section are theological arguments by theologians who are PWDs as well as scholars working with PWDs.

Chapter 2 discuss the origin of *faiā* that goes back to the Sāmoan indigenous creation story by Tagaloa. The discussion also includes Sāmoan indigenous cultural guiding values and principles that maintain relational living and *faiā*. The chapter also discuss how community and individuals were perceived in the Sāmoan indigenous society and way of living that was more communal. The final part focuses on how PWDs are viewed by the Sāmoan indigenous culture through both negatives and positives cultural practices.

Chapter 3 outline the influences of the arrival of Christianity in 1830s and the missionaries’ ways of living on the Sāmoan indigenous culture. The main discussion is on the theological discussion of the *faiā* between the church community including the pastor, PWDs and God. The emphases focus on the role of the church, positive theology and interpretations that promotes inclusion of PWDs in worship and church activities.

Chapter 4 is the analysis and discussions of the qualitative and quantitative information collected from the research conducted in the VSD from November 2015 to February 2016. The disability models from Chapter 1, the Sāmoan indigenous guiding values and inclusive way of living in Chapter 2, together with inclusive interpretations and roles of the church in Chapter 3 will justify and support the analysis and discussion of the responses and data collected from the VSD.

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<sup>26</sup> These two models of disability (social model and medical model) with reference are discussed in Chapter 1 together with the reason why they are used in this writing, their different meanings and applications.

## CHAPTER 1

### BACKGROUND INFORMATION AND LITERATURE REVIEW ON DISABILITY IN SĀMOA

The aim of this chapter is to present background information on the status of PWDs<sup>1</sup> in Sāmoa, and the existing initiatives put in place by both the Sāmoan government and stakeholders for disability issues. These initiatives include international and regional conventions already ratified by Sāmoa's government, as well as national legislations and policies established to enhance the lives of people with disability in Sāmoa. Exploring these initiatives will portray the existing reality and the status of PWDs in the perspectives and policies of the Sāmoan government, as well as civil organisations that govern the everyday life of PWDs in Sāmoa.

The majority of this chapter will consist of the literature review on the diverse definitions of the term 'disability' and the definition that will be emphasised throughout in this thesis. In doing so, the review will firstly explore two models of disability. Namely, the 'medical model' and the 'social model'<sup>2</sup> that provides a unique description of 'disability' and will provide the basis for this research. These two models will be examined and reviewed in their specific Sāmoan context as mentioned above, in order to clarify and modify the existing status and reality faced by PWDs in Sāmoan society. Other arguments by theologians and scholars with disabilities, will also be part of the

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<sup>1</sup>PWDs is short form for 'people with disabilities', other writers use it as 'persons with disabilities'. As stated before, PWDs in this paper refers to people with physical disability.

<sup>2</sup>The medical model is the traditional model that defines disability as an impairment problem pertaining to an individual, the social model points to disability as a problem faced by people with an impairment due to the society not providing a friendly environment that cater their needs. The social model was pioneered by Mike Oliver in 1983 (Oliver 2013, 1024).

literature review to shed light on some of the common problems and the reality faced by PWDs in worship, and other theological dimensions.

### **1.1 Statistics and Existing Initiatives for PWDs in Sāmoa**

The ‘2011 Sāmoan Population and Housing Census’ identified 4,061 PWDs out of a population of 187,820; that is 2.2% of the total population (Sāmoa Bureau of Statistics 2012, 6). While this number may seem insignificant to some, the constitution of Sāmoa guarantees equality of all people before the law, as pointed out in Section 15 which declares that, “All persons are equal before the law and entitled to equal protection under the law” (Sāmoa Ministry of Women Community and Social Development 2009, 5-6). Therefore, PWDs like any other citizen of Sāmoa should enjoy quality life under the protection of the national constitution, which is the supreme legislation in Sāmoa.

At the international level, the Sāmoan government ratified the United Nation’s ‘Conventions on the Rights of the Child’ in 1992, and the Convention on the Elimination of all forms of Discrimination Against Women known as ‘CEDAW’ in 1994 (Sāmoa Ministry of Women, Community and Social Development 2009, 6). These two conventions also highlight the importance of empowering women and children with disabilities within societies. According to Faatino Utumapu<sup>3</sup>, the President of the Nuanua o le Alofa Organisation, women and children are regarded as vulnerable groups as they are usually victims of violence and discrimination, and if they are also disabled; they are not only marginalised by disabilities but also through violence and discriminations (2016, Interview by author).

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<sup>3</sup> Faatino Utumapu was born totally blind, she is a well-respected figure in regional and international debates and commitments in regards to disability. She is computer literate and is the voice of PWDs in most of the programs and initiatives in Samoa. She is the President of the Nuanua o le Alofa Organisation as mentioned in the Introduction section of this paper.

More interestingly, in 2014, Sāmoa's government through the strong voice of its disabilities organisation, signed the 'Convention on the Rights of Persons with Disabilities', commonly known as CRPD under the United Nation (Sāmoa Ministry of Women Community and Social Development 2015b, 7). These commitments by the Sāmoan government show that PWDs and the issues that surround and concern them are becoming a serious priority for government. The acceptance of the international conventions not only opens the door of opportunities through funding for PWDs projects from international partners, but also recognises the rights of PWDs. It also initiates collaboration between relevant<sup>4</sup> Sāmoan government ministries, Disability Organisation in Sāmoa and both regional and international partners<sup>5</sup> through policies formulations, frameworks and action plans.

On a national level, a more specific connection to the international commitments by Sāmoa regarding the disability issues is the Sāmoa National Policy for People with Disability 2011 – 2016 under the Ministry of Women Community and Social Development; which is the focal point for disability issues in the Sāmoan government (Sāmoa Ministry of Women Community and Social Development 2009). The 'Sāmoa National Disability Policy 2011 – 2016' in its introduction states that according to research and consultations carried out by the ministry<sup>6</sup> and its stakeholders, disability in Sāmoa is seen by the community and families of PWDs as a 'welfare issue'. It means that

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<sup>4</sup>Relevant ministries are stakeholders in government whose role involve enhancement of PWDs. For instance the Ministry of Women and Community Development who is the focal point of disability issue, the Ministry of Education, Ministry of Health and Ministry of Work and Infrastructure to name a few. They perform different roles in addressing the needs of PWDs such as inclusive education and health assistance to name a few.

<sup>5</sup>Regional and international partners include the United Nation, World Health Organisation, Pacific Forum Secretariat and others.

<sup>6</sup>Ministry of Women, Community and Social Development which is the focal point of disability issues in Sāmoa known as MWCSO. The MWCSO is the focal point of disability issues and development in Sāmoa, it is where the Disability Unit is located and are also responsible for coordinating Sāmoa's disabilities program.



PWDs are those who should be subject to charity and welfare treatment through medical, shelter, food, clothing and care givers. On the negative side, the community sees PWDs as a problem pertaining to the person themselves or a problem for the *āiga*<sup>7</sup> or family of the PWD; it is simply not a communal problem (Sāmoa Ministry of Women, Community and Social Development 2009, 2).

The above discussion spells out the current situation of PWDs in Sāmoa. It is commonly suggested that they should be protected and taken care of within the circle of the *āiga*. These expectations often leading them to a dependent life that is burdening to the members of said *āiga*. It is through the isolation of PWDs from the normal activities of the society and also the church activities and worship, which I have personally experienced, that has motivated me to write this paper. Their lives are confined within the comfort of the family, hidden away from the church and society. The above mentioned ‘Sāmoa National Disability Policy 2011-2016’ looks at the issue of inclusive strategies to integrate PWDs into the everyday life activities.

In aid of the above aim of the national policy, the Sāmoan government provides policies and legislations to accommodate and address the needs of PWDs in Sāmoa in general (Sāmoa Ministry of Women, Community and Social Development 2009, 3). A more cooperative approach by the Sāmoan government, non-government organisations, disability stakeholders and disability institutions, was the official commemoration of the International Disability Day starting in November 2011. This commemoration saw eighteen teachers trained accordingly to care for children with disabilities and has become an ongoing program under the Australian Aid, in the provision of education support for those with disabilities in inclusive education (Sāmoa Ministry of Women, Community

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<sup>7</sup>*Aiga* is family in Samoa, there are two forms of *aiga*, the extended family and the immediate or nucleus family. The term *aiga* will be discussed in detail in Chapter 2.

and Social Development 2014, 6). The 1992 Sāmoa's Building Code law was reviewed in 2013 to ensure the environment is accessible by PWDs, however this is still in progress. Sāmoa also has the 'Education for All Policy' that requires all children to be educated. The 'Education for All Policy' has been documented but is still yet to be enforced. This is evident with the many child vendors in the city of Apia. The 'inclusive education program' faced a lot of challenges due to limited resources and skills of teachers to carry out the necessary operation. As a result, inclusive education is still in its infant stage in Sāmoa, and will take a while to have the necessary resources and trained personnel to carry out and fulfil the needs of this program (Sāmoa Ministry of Women, Community and Social Development 2014, 15 – 30).

The Sāmoan government through its many initiatives as mentioned above, and in particular the 'National Policy for People with Disability 2011 – 2016' paved the way in addressing the needs of those with disabilities. However, there is no clear role of the churches including the CCCS as a service provider in the policy implementation action plan (Sāmoa Ministry of Women, Community and Social Development 2009, 18 - 29). Consequently, going through the CCCS's website archive at <http://www.cccs.org.ws>, there are no publications, awareness programs or policies for PWDs. Therefore, there is no clear document or framework that guides the pastoral work of the CCCS and its role in mainstreaming PWDs in the church's activities and worship. Let us now turn to the world of scholars to explore the existing models of disabilities that define disability and offer alternatives on how community can best deal with PWDs.

## **1.2 Literature Review**

Disability is a topic which has been analysed, written about and studied by many secular and theologian scholars. Presented herein are some works on disability that were used to present and produce this study. Most of these models and arguments influence the

work of many international, regional organisations as well as programs for the mainstreaming of PWDs worldwide that will be discussed throughout this literature exploration. For any discussion on disability issues, the seminar work of Mike Oliver where he redefines the traditional ‘medical model of disability’ to ‘social model of disability’, thus shifting focus from the medical sphere to the social arena must be used and included (Hughes and Paterson 1997, 328).

Oliver’s previously mentioned work of ‘social model’ is claimed by many researchers on the disability topic as one of the foundational literature in the disability movement since its inception in the 1980s<sup>8</sup>. The two models of disability (medical and social) have distinctive emphasis and perception of the term disability. They cause barriers and resolutions although they are still related. There are other models of disability developed by scholars and organisations, but given the scope and purpose of this thesis, the focus will be on the ‘medical and social model of disability’ as above mentioned. Each model is reviewed in light of its many dimensions and claim to society’s perspective which shapes their actions and attitude towards PWDs.

### **1.2.1 Medical Model**

According to Oliver, the traditional understanding of disability was through the medical model. This focuses on the person and his/her impairments in which he refers to as ‘personal tragedy’<sup>9</sup> (2004, 18-22). The World Health Organisation commonly known as WHO (2002, 10) defines ‘impairment’ in the following key words:

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<sup>8</sup>Most literatures refer to the 1980s, but the exact year when the ‘social model of disability’ was developed according to Mike Oliver is 1983 (Oliver 2013, 1024).

<sup>9</sup>Others such as Grant Carson refers to the medical model as the personal tragedy model (2009). However the term ‘personal tragedy’ is used by Mike Oliver to refer to impairment. Therefore the two words, ‘personal tragedy’ and ‘impairment’ are used interchangeably in this writing.

1. **Impairments** are problems in ‘body function’ or ‘structure’ such as a significant deviation or loss
2. **Body Functions** are physiological functions of body systems (including psychological functions).
3. **Body Structures** are anatomical parts of the body such as organs, limbs and their components

The union of PWDs known as the UPIAS<sup>10</sup> summed up the aforementioned definition by WHO by defining impairment as the “...lacking part or all of a limb, or having a defective limb, organism or mechanism of the body” (Hughes and Paterson 1997, 328). The problem is always an individual responsibility in the medical model perspective, as the reason for their inability is their ‘personal tragedy’. According to a reflective article by Oliver, it was in 1983 that he named the medical model the ‘individual model’ given its individualistic attitude towards PWDs. Therefore these two names (individual and medical model) will be used interchangeably throughout this paper (Oliver 2013, 1024).

Grant Carson refers to the medical model as an approach that focuses on the physical appearance of the person with an impairment and the history of the tragedy the body went through as the problem (2009, 7). The World Health Organisation understands the medical model as the consequences of health conditions and diseases humans suffer, and must be diagnosed and consulted by medical expertise for treatment of pain and discomforts (2002, 8). Therefore the medical model as outlined above points to the impairment that an individual suffers which limits their mobility and accessibility, as the disability or problem that needs intervention.

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<sup>10</sup>UPIAS stands for “Union of the Physically Impaired Against Segregations”.

Given the above definition, the medical model for a instance points to the eyes of a blind person or the feet of a cripple person as the problem or disability. If the blind wants to read a book but cannot do so, the problem is the blind person's eye or eyes which is his or her personal tragedy. The blind been not being able to read is the blind-person's individual problem, it is not the responsibility of the community according to the medical model. The blind should seek medical assistance in order to treat her vision in order to overcome his/her desire to read. What about if the person was born blind and has a permanent impairment that cannot be cured through medicine and treatment? According to Utumapu, where medical expertise cannot help or treat those with disabilities, these impairments are 'given' for life (2016, Interview by author). She refers to those with permanent impairments. It is through these kinds of questions that lead to the shift of interest and thinking for an approach that can give hope to individuals whose impairment is a 'given' and permanent.

### **1.2.2 Social Model**

The Social Model redefines the medical model by shifting the discussion on the social space between a person with an impairment and their society. Oliver who pioneers this model points to the mid-1970s 'Fundamental Principles of Disability' of the 'Union of the Physically Impaired Against Segregation', UPIAS, as the trigger for initiation the social model (Oliver 2013, 1024). The UPIAS principles focus on the society attitudes of ignoring them from being part of society, the principles state,

In our view it is society which disables physically impaired people. Disability is something imposed on top of our impairments by the way we are unnecessarily isolated and excluded from full participation in society (Oliver 2004, 18-19).

Oliver turns this idea into a practical approach and focuses on the society rather than the impairment, for any holistic resolution for disability. Oliver turns the medical

traditional approach in defining disability upside down, by moving away from impairment as the problem to the society who are not providing an environment<sup>11</sup> that is friendly and cater to the needs of PWDs (2004, 19-20). He trialled this when he taught postgraduate disability courses in the University of Kent but only officially launched his model through his publication of “Social work with disabled people” in 1983 (Oliver 2004, 19-20).

The social model was welcomed by many advocates of the disability movements, due to its simple and specific focus. It further brings people with different disabilities and/or impairment together under one umbrella, and fight the inequalities they all face as one. This solves the old problem of different groups of different impairments trying to solve their own barriers in their own ways and approaches; which makes the disability scope too vast to explore (Oliver 2004, 20-31). Instead of the blind solving their own issues separately from the deaf groups using different approaches, they now stand as one under the umbrella of the social model and point to the community as the one not playing their role in integrating them into societies.

Oliver in creating the social model laid out three important pillars that govern the practicality of his model. Firstly, perspective should move away from focusing on the body which is where the impairment is located to the environmental barriers, cultures and attitudes where inequality and discrimination exists. Secondly, the intention is not to look at the barriers in the environment and try to fix it in a unique way isolated from the ordinary developments, but to include it in the holistic picture of environment planning and development for all people. In this, PWD issues are not isolated but part of the whole population developments. Finally, the model operates in way not to abandon the medical

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<sup>11</sup> Environment here refers to the design and accessibility of buildings, transportation, communication, cultures and attitudes. These are the areas where the barriers for PWDs exist within society.

model, it still respects areas where ‘individual based intervention’ is needed. Especially special cases where medical and rehabilitative treatment is needed for an impaired person’s health and status to advance and treat (Oliver 2004, 18 – 31). These three pillars according to Oliver must be followed in order to successfully implement the social model. Therefore, the above discussed three pillars will be the essential-criteria in discussing the social model throughout this thesis.

### 1.2.3 Medical Model of Disability versus Social Model of Disability

In comparing the medical model and social model discussed above, Hughes and Paterson summarise the flow and key component of each model in the following way:

**Chart 2: Medical Model vs. Social Model**

<b>MEDICAL MODEL</b>	<b>SOCIAL MODEL</b>
The biological	The social
Impairment	Disability
the body	Society
Medicine	Politics
Therapy	Emancipation
Pain	Oppression

(Hughes and Paterson 1997, 330).

The above comparison shows the different focuses and emphases of the two models. The medical model focuses on the body, while the social model points to society as the problem by not providing the necessary avenues that cater to the needs of PWDs. The medical model looks at medicine to treat, but the social model deals with politics and policies formulations that remove the barriers which hinder the participation of PWDs in

society's activities. The medical model resorts to therapy to improve the health and strength of the impaired individual, while the social model looks at emancipation or freeing PWDs from discriminations and negative attitudes in societies. Lastly, the medical model focuses on minimizing suffering through pain and how to fix it, but the social model looks at releasing those with disabilities from oppression, discrimination, inequalities and inequities (Hughes and Paterson 1997, 330). The above table not only outlines the different approaches between the medical and social models, but also sums up how each model defines disability in a dialectic manner.

There are scholars who criticise Oliver's social model and how it operates, especially the shifting of focus from the person with an impairment to the failure of society to provide an enabling environment. Adam Samaha in his legal theory working paper titled, *What good is the Social Model of Disability?* criticises Oliver's social model for blaming the community's failure to provide a friendly environment for PWDs as the problem, but not the individual with impairments (2007). According to Samaha other factors such as gender, race and technological initiatives and inventions do have an effect on the way impaired people are either advantaged or disadvantaged. One example is the technology that now gives the sense of hearing to a deaf child is something that was not available in the past, but is now available thanks to technological developments and initiatives. Therefore technological advancement and the timing of these initiatives could also be blamed for improving the accessibility of PWDs, but not society. It is also an initiative of the medical profession through a lot of medical experiment and research, which aims at fixing or treating the impaired person (Samaha 2007, 21 – 22). However these technological advancements are a part of the society's developments for the wellbeing of PWDs, like other technological advancements made for the wellbeing of the able bodied. Oliver however argued in the three pillars of the social model as explained



above, that medical intervention is always intact with the social model, not totally isolated or eliminated.

The above examples and many other critics of the social model are outweighed by the many scholars who support and build on Oliver's foundational social model in discussing disability. A study conducted under the auspice of the European Union titled, *Definition of Disability*, clearly states that there is no legal definition of disability worldwide, thus including the definition by the World Health Organisation (Degener 2004, 4). PWD including Arnold Fritzon and Samuel Kabue in their book "*Interpreting Disability: A Church for All*" points to the term disability as a socially constructed term by the modern societies (2004, viii). It was a term raised out of the individual approach when care givers were organised and recognised by families and others to look after people with impairments. It led to people with impairments becoming targets of charity, protection and guidance. Furthermore, they became a silent group as their livelihood were looked after and controlled by the caregivers, families and others. The emergence of the social model was a ray of hope for PWDs organisations and movements (Fritzon and Kabue 2004, viii –ix). Therefore, this paper will be using the social model of disability with its dimensions as discussed above to assess and provide alternatives for PWDs in both communities and the church. The medical model will also be utilised as a basis of comparing the existing reality of PWDs as discussed above in Sāmoa, where disability is seen as an individual problem, and how social model can pave the way forward. The *faiā* model as discussed in the introduction provides the overarching social approach from the Sāmoan context that will frame the whole thesis. The *faiā* model will be assisted by Oliver's social model to analyse and contextualise PWDs status, with the aim of putting together possible recommendations on how to mainstream PWDs in society and church. To include PWDs in the church activities and especially worship, we must explore the

gaps in the theological arena from the perspectives of theologians and scholars with disabilities and those working for PWDs.

#### **1.2.4 Theological Dimensions**

Aside from the above discussion of the two models, theologians and laypersons with disabilities and others who work with PWDs argue specifically for disability issues within the circle of the church. They emphasise the many gaps that exist within the sphere of the church and its ministry that act as barriers for PWDs in the church community. Such writings include the discussion by Fritzson and Kabue, who are both persons with disabilities; one is a layperson and the other an ordained minister and theologian (2004). They reinterpreted disability hand in hand with the context of the World Council of Churches (commonly known as WCC) interim statement in 2003 of 'A Church of All and for All', with emphasis on understanding 'difference' and 'commonalities' of contexts, interpretations and persons (Fritzson and Kabue 2004).

More specifically, Fritzson in the first part of the book, *Interpreting Disability: A Church of All and for All*, directs his discussion of disability from his perspective as a person with speech deficiencies and an ordained minister of the church in Sweden. His emphasis was that no two persons can fully understand and have the same interpretation of an object due to different personal backgrounds and experience. In doing so, he discusses the terms 'likeness and differences' as themes that shape how people perceive PWDs. People who approach PWDs through the 'likeness' perspective see all humans as those with similar backgrounds, interpretations and so forth. In the extreme application of the 'likeness' view, negative effects erupted in the 19<sup>th</sup> century as PWDs were seen as those who should be shaped up in a tough way to become like members of the normal societies. In doing so, PWDs faced oppression and even violence as they were seen as the vulnerable minority that needed empowerment and difficult trainings to become like

normal people of societies. This resulted in PWDs being seen as a different minority from the normal community. Fritzon, stated that it was very dangerous to see all people as similar to one another with how we interpret different things as well as the specific language used to deliver a specific meaning, because people have different backgrounds and interpretations (Fritzon and Kabue 2004, 1 - 23).

On the positive side of the two themes, 'likeness' led to the many inclusive policies that view PWDs like the rest whilst being part of the community. These led to a lot of PWDs being involved in worship and the church activities, and challenged the need to build an enabling environment for PWDs. On the positive side of the 'difference' view, it led to the need to use a more inclusive language that takes away negative metaphors that pointed out PWDs as 'weak' and 'sinful' symbols or objects. It also emphasised that the world we live in was prepared by God for different people. People with different cultures, language and ethnicity; thus there are PWDs in the same world. Although all are different, but God gifted us with the same world to share. It is these theological themes that Fritzon vigorously utilised to construct a meaning that recognised the perspective of PWDs. Fritzon overtly discusses the integration of all people in the world, both the able bodies and those with disability in the church (Fritzon and Kabue 2004, 1 - 23).

In the last section of Fritzon's argument he proposes four dimensions that will help make the church worship and gatherings inclusive for all. The first dimension is the 'physical' environment that includes communication and transportation as well as technologies. The second dimension is 'social interaction', which consist of families who feel ashamed of their relatives with disabilities, and the negative behaviour of society towards PWDs. The social dimension needs a lot of understanding of PWDs and their world by the society through awareness. The third dimension is 'ethical decisions', it involves living independently and making decisions for yourself or be told by others on

how one should live his/her life. It questions the person's entitlement to life, and how one could contribute to society and vice versa. The final dimension is 'theological', it questions the theological understanding of a PWD's life in the world created by God. It is the theological dimension that theologises the responsibility and relationship of PWDs to the society and the church; thus including God. It looks at the theology of togetherness as a community and church, as well as the individual and society relationship with God. This dimension looks at how the individual and society connect to God and live life harmoniously (Fritzson and Kabue 2004, 19 - 23). These four dimension will be used throughout this writing as the pillars that should be dealt with in creating a barrier-free worship, and an inclusive church of Christ.

The above discussion by Fritzson expanded the discussion of the 'social model' of disability to include the theological aspects of the church in constructing an enabling interpretation and worship for all. It highlights the need for policies that promote the likeness of all, but utilise language and an approach that is sensitive to our differences as humans. This is very much in line with the Sāmoan concept of 'relational being' or *ola feso'ota'i*<sup>12</sup>, that every Sāmoan is related and all are descendants of the land and ocean from their god Tagaloa. The Sāmoan creation story of Tagaloa will be discussed in Chapter 2. This Sāmoan concept of relational being breaks down all barriers between all people and the environment, and at the same time; one looks after the other in a 'harmonious fashion' (Efi 2009, 106-108). Therefore all must enjoy the cosmos through emphasising the significance of our relational being and connectedness with each other. All have the responsibility of looking after, respecting, including, listening to and accepting the concerns of others, thus including PWDs.

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<sup>12</sup>The cultural discussion of 'relational being' and 'harmonious living' in the Samoan culture and community will be discussed in detail in Chapter 2.

Janet Lees in chapter 11 of the edited collection titled, “This Abled Body: Rethinking Disabilities in Biblical Studies”, explores ways that ordinary people, scholars and PWDs approach and interpret the Bible (2007, 191 – 172). Lees used her experience as a speech therapist, a minister, biblical scholar and contact with PWDs through her work as an avenue to smartly provide critique and re-construction of selected texts. Lees’ analysis outlines the usual reading of scriptures and identifies the indirect discriminations that it presents for PWDs (Lees 2007, 191 – 172). Lees employed a contrast and compare analysis of the ‘abled body’<sup>13</sup> and PWDs reading of scriptures, as an initial point of reconstructing the stories to reflect the realities faced by PWDs. Lees’ strategy is relevant to Fritzson’s method as of defining disabilities. Fritzson focuses on re-interpreting theological principles of the church, while Lees emphasises the reconstruction of the ordinary approach in reading texts. Yet, both highlight the silent discrimination faced by PWDs in their lives, thus requiring re-interpreting and re-constructions of text to give a more relevant meaning for PWDs and others. The two emphases reshape direction and the focus of how we read the texts, and the practical theology of the church. It also raises critical questions, are PWDs included in our readings, are we performing our calling as the church of Jesus Christ? It is a question of being more inclusive in our approach as a church and preachers of the word.

This is backed by Cathy Black, a Professor in homiletics and liturgics, and an instructor for people with hearing impairments; who encourages effective healing preaching in aid of those with disabilities (1996). Black voices her concerns on the clarifications and relaying of gospel messages in sermons, which in fact have great impacts on the lives of the normal people and that of the ‘persons with disabilities’ as she calls it (Black 1996, 17). The loophole however, is trying to bridge the context of Jesus’

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<sup>13</sup> ‘Abled body’ refers to people of congregations who are not PWDs.

healing ministry in the Bible, and our present context through appropriate understanding and interpretation of Gospel narratives. Jesus' healing ministry targets those who are marginalised and left out by the community, and in healing takes them back in to the social life and religious fellowship where they belong. Therefore, such healing narratives highlight Jesus' desire and intention to include the marginalised persons back into the community circle. Sadly, sermons on Jesus' healing seem to do the opposite, by emphasising only the power of Jesus over the sinful, evil-possessed, unfaithful, the cursed and those whose relationship with God needs reconciliation (Black 1996, 12-15). These are some of the results of focusing on the impairments that is emphasised by the medical model, it leads to the labelling of the impairment as objects that need medical intervention and healing. Jesus' approach is more a social integration of the marginalised back into society where they belong. Jesus' approach as viewed by Black as in accordance with the social model of disability, where the community is responsible of creating a friendly environment for PWDs to be included in society's normal life. Jesus heals those with impairments to integrate them back to society. It is the approach that the social model encourages the community to take part and also be a healing community.

Sadly for Black, she experienced a lot of sermons where people with impairments are treated as objects, who have no voice and their sinful status was used to justify the power of Jesus. The Gospels writers' message of incorporating the oppressed back into society was overridden by the emphasis on disability as a sin and curse versus Jesus. Black emphasised the significance of including and integrating PWDs to take part in our community's faith events. In doing so, it is essential to transform our preaching into a more healing instrument, through effective homiletics on healings and miracles narratives and/or stories in the Bible. Black highlighted theological interpretations that support

inclusion and participation of those with disabilities, and at the same time make known the church's attitude towards PWDs (1996).

Following the confusion effects of preaching, Black explains that when people are possessed with diversified emotions they would come up with different assumptions as to why people have disabilities. Black identified eight opposite analysis that are often becoming the assumptions of communities, on the causes and effect of being a PWD. Such include, PWDs on the contrary that they are either: angels or devils, cursed or blessed, it is the will of God that caused their disability, it is a punishment for some wrong doings, it is a way of testing PWDs' faith, and an opportunity for character development, a sort of manifestation of God's power, a representation of redemptive suffering, and lastly as a consequence of God's omnipotence (Black 1996, 20-31). These analyses of the PWDs are common within communities and we often hear them when we comment and try to have reasons on why people have disability. They are even left or placed somewhere, isolated in homes for the sake of everyone else to live normally. Black's aim is for preachers of the word to provide an inclusive healing homiletic, rather than an exclusive discriminative sermon that only serves the interest of others and oppress some. This sends a powerful message for not only the church, but also theologians and all individuals who take part in preaching the word of God.

A good example is illustrated by Lees in her article about how a PWD reads Jesus' entrance in Jerusalem on Palm Sunday. Lees used the 'crippled' person's perception and labelled them as 'people on the ground' (Lees 2007, 163). An ordinary reading of this story is the triumphant entry of Jesus to his passion and salvation mission for the world. People were shouting Hosanna and throwing palm leaves and cloths on the road for Jesus to ride on. To Lees, a crippled on the ground tries to see the event, but sadly he could only see the feet of the crowd and the donkey, but not Jesus as the crowd blocked his view.

The crippled tries to shout Hosanna, but sadly his voice was dominated by the crowd who didn't want Jesus to hear the cripple's voice (Lees 2007, 163).

The above analysis and re-reading of the events of Palm Sunday gives us a clear picture of what and how PWDs position themselves in the story. To apply the story to our modern world, PWDs still see themselves as the 'ground people'. They only view the feet of the community, it is where they belong, and it is their status and class in societies. Even in the church, they want to be involved, and see Jesus' triumphant entry, but are blocked by the crowd; and their voices are dominated by the shouts and voice of the crowd. This story and many other narratives, or all narratives in the Bible gives the reality and hope for PWDs, if it is read from their point of view. It also opens our eyes to the reality they face in their everyday struggle in life. As stated, it is through understanding one's situation that change the way we perceive and approach others.

### **1.3 Summary**

All in all, although PWDs are just a portion of the population as explained above, they are still part of the society and the church in Sāmoa. They also have feelings and needs like everybody else which should be considered very carefully especially through environmental accessibility, language, behaviour and attitude. They are also the very people who understand their situation, and have the perceptions of how they can be effectively be included and recognised in society and the church. Theologians with disabilities as discussed above open up some of the possible areas that should be emphasised; and the importance of understanding one another's situations and feelings. The social model paved the way in defining disability as the incompetence of the society to act favourably upon PWDs accessibilities; thus shifting away the issue from the impairment and the individual to the complementary space between society and PWDs.



The governing pillars of the social model will help guide the application of the social model of disabilities into different contexts.

Theologians and scholars with disabilities added on the theological perspectives that could help PWDs be included in worship and the church by focusing on interpretations, language, attitude and ethical decisions. A view that stresses the need to be sensitive of the 'likeness' and the 'difference' of humans as discussed above. There is also emphasis on homiletics that is healing and promote social integration of PWDs, rather than focusing on PWDs impairments as symbols of sin and curse used to illustrate Jesus' power. All of these must be contextualised to the culture, background and way of life where PWDs live in. Therefore, let us now look at the Sāmoan cultural context and setting which shaped the way of living of the Sāmoan people or *fa'a-Sāmoa*, and explore the Sāmoan perspective of a *tagata* or a person in the Sāmoan indigenous culture that was 'communal' and 'relational'.

## CHAPTER 2

### SĀMOAN INDIGENOUS WORLDVIEW OF ‘RELATIONAL BEING OF A SĀMOAN’ (*TAGATA O FAIĀ*)

The previous chapter discussed the ‘social model of disability’ and theological discussion that highlights the importance of community and PWDs being responsible for each other. This chapter navigates what Fanaafi Aiono – Le Tagaloa calls the ‘Sāmoan worldview’<sup>14</sup> of a *tagata* or ‘person’ in the Sāmoan indigenous culture and way of life (2003, 7). The word ‘worldview’ however is a complex term, and Albert M. Wolters suggested a simple definition parallel to the aim of this chapter, which is a “...comprehensive framework of one’s basic belief about things” (Wolters 2005, 2). Correspondingly, Le Tagaloa defines the ‘Sāmoan worldview’ as how the Sāmoans see their context’s sets of beliefs and ways of living through the lens of their identity as Sāmoans. It answers questions like, “...Where do I come from? Why am I here? Who am I?”<sup>15</sup> (Le Tagaloa 2003, 7). These above mentioned questions will be the basis of discussion in this chapter. The chapter (2) explores the ‘relational being’ of the Sāmoan *tagata* that originates from the Sāmoan indigenous creation story of the god Tagaloa and the *tagata*. Discussion will then focus on traditional values such as *alofa* or ‘love’ and *fa’aaloalo* or ‘respect’; which is channelled by *tofā* or the Sāmoan ‘traditional wisdom’ that harmonise *fāia* in Sāmoan societies. The aim of this chapter is to look at the origin and application of *faiā* in the Sāmoan indigenous worldview, and how it shapes the

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<sup>14</sup> Albert M. Wolters indicated that the term ‘worldview’ is the English translation of the German word ‘*weltanschauung*’ (2005, 2).

<sup>15</sup> Terrance R. Anderson suggested four similar questions for the purpose of retrieving one’s worldview and the forces that influenced it. “Who are we? Where are we? What is wrong? What is the remedy?” (1993, 154).

Sāmoan indigenous perspective of PWDs as individuals and members of the community.

Let us start with the Sāmoan indigenous culture and religion.

## 2.1 Sāmoan Indigenous Culture and Religion

The Samoan way of life is centered on culture or *faa-Sāmoa* that is defined by Malama Meleisea as, “In the manner of the Sāmoans; according to Sāmoan customs and tradition” (1987, vii). To avoid any confusion on the terms ‘culture’ and ‘religion’. I refer to the work of Emile Durkheim according to Malcolm Hamilton, Durkheim highlights the interrelatedness of individuals, society and the divine in relation to religion and/or social way of living (2001, 109-121). Religion to Durkheim is more communal not individual, and is actively practiced in society life such as the Australian Aboriginal tribes in which he researched. Simplifying Durkheim’s argument, religion plays a practical role in shaping the moral life and accepts way of life for the community’s wellbeing and harmonious living. (Hamilton 2001, 109-121). In the context of Sāmoan society, Meleisea according to Grace Wildermuth points to religion as the “...system of beliefs, the ceremonial and ritual activities that are associated with it...” (2012, 1). In the same manner, Tofaeono emphasised that there is no private worship in Samoa but only communal worship. The term *tapuaiga* which means worship and/or religion is made up of two words. *Tapu* means ‘sacred’ and *āiga* means ‘family, therefore *tapuaiga* is community religion (Tofaeono 2000, 25). Furthermore, Faalepo A. Tuisuga-le-taua wrote that,

However, Sāmoa has its own peculiar religious characteristics, which have been neatly interwoven with its traditions and culture. Such blending of religion and culture in the existential living of Samoans sometimes make them very difficult to separate. Thus for Sāmoans, it is traditionally believed that religion and culture are inseparable (2009, 102).

Considering the above discussion, the *faa- Sāmoa* is also the religious principle and way of living. It is shaped by how Sāmoans perceive themselves and the origin of their existence. The *faa- Sāmoa* is not only a way of life but also a Sāmoan religious life that involves honouring the divine, cosmos and community. Therefore, the Sāmoan culture and religion are never separated but one reflecting the other, hence shaping the way of life in indigenous society.

Practically, the above perspectives of religion remind me of what my father used to do when we worked in our plantation in Sāmoa. When he cuts down a tree, he would always ensure that the branches and leaves are gathered back at the root of the tree as a sign of respect for the forest and land. He said that the traditional Sāmoan way of living or *faa- Sāmoa* is grounded on *fa'aaloalo*<sup>16</sup> or respect, and these traditional principles apply not only to people but also to the sea, land and forest. He also explained that respecting the land and forest is one of the many rituals<sup>17</sup> of showing respect that applies also to the ocean, animals and other fellow *tagata*. So, in order for us to continue to grow good crops and fruits from the land and forest, we must in coexistence consider them with great care and respect. This is the Sāmoan traditional wisdom of honouring the land and the forest with care and caution, as they are a part of our lives and existence.

This concept of complementary living as alluded to above was referred to by Efi<sup>18</sup> as Sāmoan's way of keeping the environment and *tagata* united in 'peace' and 'harmony' (2009, 104). Efi explained that the Sāmoan traditional perspective of the world in

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<sup>16</sup> The term *fa'aaloalo* will be discussed in the later part of this Chapter (2) as it is a term with a practical meaning that is more than respecting the other individual.

<sup>17</sup> Other traditional rituals I learnt from my father include: replanting any time I cut down a tree, singing our village (Lepea in the Island of Upolu) thanksgiving song known as '*pese mo le sami*' or 'song for my dear ocean' to the sea after fishing at our fishing place known as '*puniloa*'. These rituals are signs of respect and saying thank you to the divine gods for the provision of food. It is also a sign of respecting the cosmos.

<sup>18</sup> Efi is the current Head of State of Sāmoa, and former Prime Minister, who has published a number of literatures on Sāmoan culture.

‘harmony’ is based on the shared responsibility of humans, divine and the environment to look after and provide for each other as mutual parties (2009, 104 -105). Therefore the *tagata*, land and environment live a complementary life of taking care of one another’s space in order for a sustainable relationship that benefits all parties of the cosmos. Efi’s harmonious relationship among members of the cosmic parties is equivalent to the *faiā* ‘responsibilities’ and ‘identity’ that this paper highlights through ‘communal being’ and ‘relational living’. *Faiā* is the *tagata*’s identity that comes with responsibilities. The *tagata*’s identity carries the image of the community, the community is also the identity of the *tagata*. The *tagata* is not seen as an individual but as a co-carrier of the community’s identity and vice versa. The essence of the discussion is that the *faiā* between *tagata* and the community is not autonomous. The community live for and with the *tagata*, and the *tagata* live with and for the community. The *tagata* and community also live with and for the divine and cosmos and vice versa. The core *faiā* in the beginning through the god Tagaloa laid the foundation of mutual relationship for the *tagata*.

## 2.2 Sāmoan Creation Story and Origin of *Faiā*

The Sāmoan indigenous communal being traces its origin to the Sāmoan well known oral tradition myth of creation through the god Tagaloa. The god Tagaloa is usually associated with the heavens and was widely known as the god that lived on the tenth heaven. Thus, some Sāmoan literatures refer to Tagaloa as Tagaloa - a- lagi or ‘Tagaloa –of –the - heavens’. Many Sāmoan writers applaud Efi’s account of Tagaloa as the Sāmoan god who created all things in the cosmos including the *tagata* through his marriage to the earth, “...God married and gave birth to man and so man is a genealogical child of God” (2009, 156). Therefore, the *tagata* and everything in the cosmos including earth and heavens trace their *faiā* to their god Tagaloa “...the paternal progenitor of all things”; (Efi 2009, 105). To Efi,

The origin of Sāmoa begin with the union and separation of the gods Lagi and Papa. Both were issues of Tagaloa. It is at the separation of this union between Lagi (a female god) and Papa (a male god) that heaven and earth were formed...Their separation was marked by storms, earthquakes and floods – what are referred to today as ‘natural disasters’...According to Sāmoan mythology Tagaloa, who issued Papa and Lagi, also issued man...The residence and residency of Samoan peoples on the lands of Sāmoa was therefore as a consequences of their genealogical links with Tagaloa, Lagi and Papa. The connection between humankind, the animal world, the cosmos and the environment is one of genealogy, a genealogy that is at once divine and temporal (Efi 2009, 105).

Genealogy or *gafa* as is translated in Sāmoan is similar to family trees nowadays. It is the family lineage from the old to the current generations, and it is something that was told and passed down by word of mouth and are now documented. Alessandro Duranti ‘linguistic anthropology’ that studied Sāmoa highlighted genealogy as a very important aspect of a Sāmoan orator’s speech (1994, 98). Genealogy illustrates the *faiā* between individuals, families, village, district as well as Samoa as a whole. Therefore, the Sāmoan traditional orators must be well versed with the genealogy between families and villages, so as to identify the *faiā* or their identity and responsibilities in taking care of each other. With particular reference to the Sāmoan indigenous origin of *faiā*, it is a bond that stretches beyond the family tree to the holistic view of the *tagata*-divine and cosmos.

Upolu Lumā Vaai simplifies the above discussion by calling the *tagata* (Sāmoan) the child, and god Tagaloa-a-lagi and earth as parents (2009, 5). The *tagata* therefore is not only a communal being but is also a communal-living-being. The *tagata*’s communal being is his/her identity, and honouring that identity is being responsibly living it daily with respect and love. According to Vaai, the *tagata* carries the ‘face’ or the identity of the earth and heaven (including the divine) as they are his/her parents, and the *tagata* is also reflected in the face of the earth and heaven (2009, 6). Hence, the *tagata* is a

communal and relational being whose *faiā* is not only his/her identity, but also his/her responsibility and way of living as aforementioned. The above discussion also demonstrates that the origin of the *tagata*, is also the starting point of *faiā* or the traditional relationship and connections of the *tagata* that shape the *fa'a-Sāmoa*. This is also the model that applies between village and individuals. Individuals and families carry the image of the village community and vice versa. Community and an individual are never separated, one outlives and reflects the other in the Sāmoan context.

In this regard, a *tagata* is not an individual person but a communal or a relational being that should live communally, and carry out the responsibilities of honouring his/her *faiā* as a *tagata*. It is why individuality and individual living is not part of the Sāmoan way of life, as all Sāmoans are related through the genealogy of their god Tagaloa as discussed. Additionally, traditional genealogy is very important in the Sāmoan culture, and it is rooted within families, then to villages, districts and Sāmoa as a whole. It shows that the cultural identity of a *tagata* as a relational being connects to other fellow *tagata* (Sāmoans) and the community. A *tagata* lives a complementary life with and for others, a social and shared life instead of an independent being. It is *faiā* that fills up the space between: *tagata* and other fellow *tagata*, *tagata* and the cosmos, as well as *tagata* and their gods. Efi used the term 'relations' instead of *faiā* in discussing the connections between *tagata* – cosmos – and the divine as mentioned earlier (2009, 104-114). David Lui a Mental Health Practitioner used the term 'gap' to discuss *faiā* in the Sāmoan community and individual context (2003, 3). Le Tagaloa used the term 'space' (2003, 8). Accordingly, the gap or space between *tagata* and environment and other fellow *tagata* of the community is not void or empty. It is a space and gap of *faiā* or traditional relationships and inter-connections that carry the heritage and identity of a Sāmoan *tagata*. It is also a gap and space that the *tagata* is responsible to harmonise as it is his/her

story of existence. Hence, it answers the questions asked by Le Tagaloa with regards to worldview posed at the introductory part of this chapter, "...Where do I come from? Why am I here? Who am I?" and our being as a Sāmoa *tagata* (2003, 7).

### **2.3 Relational Being and Communal Living: *tagata*'s identity and responsibility**

Confirmation of the *faiā* is reflected through the Sāmoan linguistic and some of the rituals used in families and community life. The Sāmoan word *palapala* is translated as soil, earth or dirt, but can also mean blood that signifies life. Mose Mailo according to Wildermuth also discussed a similar term that is *fanua*, which is translated as land but "...is also the word given to the placenta, the placenta of a woman...Here, the idea of new life represented by the placenta is equated with land and the environment" (2012, 8). The two examples above clearly illustrate the *faiā* between *tagata* and the cosmos through the environment and earth. Consequently, blood and placenta also represent life of not only the *tagata* but also the cosmos; the union of the cosmic family. The *tagata* and earth with the guidance of their god Tagaloa are never separated. Their *faiā*'s history and origin intertwine with each other through genealogy as reiterated in the Sāmoan's creation story previously discussed.

The aforementioned union of the *tagata* and the cosmos, is the basis for which the *pute* or 'umbilical cord and placenta' of a child is important when he/she is born. When a boy is born, the family buries his *pute* in the plantation so that he grows up to be a good farmer. When it is a girl, her *pute* is buried at where they grow the *laufala* which is a plant for weaving, so that she becomes a good weaver. It is also an act of thanksgiving to the



gods/god for the new life (Tofaeono 2000, 181). In addition, there is the *nunu fanau*<sup>19</sup> which is where traditional gifts and food are presented to the village and district by the parents and their families in appreciation of the new additional life for not only the family, but also the village and district (Tamasese 2006, 1 – 3). These practices solidify the *faiā* of societal life starting from the circle of the family and into the village, the district and Sāmoa as a whole. *Tagata* is connected to the cosmos, divine and other fellow *tagata* and community.

The origin of the *tagata* discussed above also highlights the practical meaning as well as the origin of *faiā*. The *tagata*'s traditional connections and relationships define a *tagata*'s 'identity' as part of the divine and cosmos. His or her responsibility as a Sāmoan (*tagata*) is to honour these *faiā* in order to maintain peace and stability. This is in line with Elizabeth Johnson's idea according to Vaai that a person's understanding of God shapes how she/he socialises, and behaves in society and life (2009, 4-5). Vaai clarified that the Sāmoan indigenous god Tagaloa is a communal god, a father and mother that is in-dwelling among the *tagata* and the cosmos, not separated. It is why *faiā* is a communal relationship between the *tagata*, divine and the cosmos; and the *tagata* for that reason is a communal and relational being (Vaai 2009, 4-5). Hence, *faia* is both an 'identity' and 'responsibility' of the *tagata*; thus making *tagata* a 'communal being' through 'relational living'.

## 2.4 *Faiā* and the Social Model of Disability

The communal being of a *tagata* is in line with the governing dimensions of the social model of disability as discussed in Chapter 1. The social model does not recognise

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<sup>19</sup>*Nunu* means to chew slowly without opening the mouth, and *fanau* is children. Therefore, its food for those praying for the wellbeing of the mother and the baby. It is to thank the prayers of the village which enables the birth of the *tagata-fou*.

‘disability’ as an individual problem, but a communal issue that requires positive intervention by the community. The Sāmoan traditional perspective has no place for individual living, and therefore rejects the focus of the medical model where disability is seen as an individual problem isolated from society. The *tagata* as discussed above is never separated from the divine and cosmos. Their *faiā* keeps them intact and holds them responsible for each other. The social model purports that there should be a strong bond between the community and the individual with impairment. It further maintains that there is a relational arena where shared identity and responsibilities is practiced, and carried out to avoid any space between them.

Efi discussed the communal being of the Sāmoan as a ‘collective’ effort that involves understanding the space between one *tagata* and the other as well as families and the village as a community (2009, 109). Efi’s point is affirmed by Durkheim’s idea according to Hamilton that the community is harmonised by the collective values and moral ways of life upheld by the community, not the individual (2001, 113). As aforementioned, *faiā* from the origin of the *tagata* points to the space between *tagata* and the community as the identity and responsibility of the community of *tagata* and the *tagata* as an individual. It is the responsibility and duty of *tagata* to honour, cherish and/or nurture his/her *faiā* with the divine, land and other fellow *tagata*. In like manner, the social model of disability supports the relationship between the community and the person with impairment as a complementary and restorative space or gap that promotes a friendly and barrier-free environment for all.

## 2.5 Sāmoan Traditional Guiding Values of *faiā*

### 2.5.1 *Fa'aaloalo* or Respect

In order to maintain and sustain the *faiā* (*tagata*, divine and the cosmos) there are traditional principles and values in place. At the core of the Sāmoan culture there is the principle of *fa'aaloalo* or respect. *Fa'aaloalo* is made up of the prefix *fa'a* and the root word *aloalo*. *Fa'a* simply means 'to action something or implement an action', which is parallel to George Pratt's definition of "...causative prefix..." that points to doing something (1977, 106). The word *aloalo* is made up of two words *alo* and *alo*, which according to Tofaeono basically means 'front of the face and front of the other's face' (2000, 295). Therefore, *fa'aaloalo* where the definitions are incorporated and applied literally, would mean to implement respect through honouring the face of the other. Faafetai Aiavā<sup>20</sup> in discussing *fa'aaloalo* with respect to image explained that "...*fa'aaloalo* can only take place when there is a face-to-face or *alo-to-alo* acknowledgement of the other (2013, 11). Aiava's definition is similar to Efi's definition of *aloalo* as two mutual but distinct words that is *alo atu* or facing to, and *alo mai* or facing from (2009, 71). *Fa'aaloalo* therefore, in simple terms are two faces encountering each other with dignity and reverence. These two faces however are not two individual faces. Feleterika Nokise<sup>21</sup> according to Efi clarified that the face of the Sāmoan individual is not his/hers. The face of a *tagata* represents the "...collective face of family, village and ancestors", thus including *faiā* to the alive ancestors and the dead (Efi 2009, 72). Vaai however extended the same definition by looking at the face and the *faiā* behind the face

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<sup>20</sup> This reference refers to Faafetai Aiava's Master Thesis in 2013, *Jesus and Identity: Towards a Samoan Systematic Theology of the Imago Dei*, available at the Pacific Theological College Library. Aiava is a current PHD candidate at the Pacific Theological College.

<sup>21</sup> Professor Dr. Rev. Feleterika Nokise is the current Principal of the Pacific Theological College.

of the *tagata* that includes not only *tagata* and ancestors as mentioned above, but also the cosmos. Vaai named the *faiā* behind the *tagata* as '*tuātagata*' that when translated means 'behind the person' (Vaai 2014, 105). Hence, the responsibility of the *tagata* is to carry his face or identity with honour and dignity, and also respect the other face as it's also a communal face.

In reference to my father's understanding, respecting the earth, environment, ocean, birds, animals and humans, are all part of one cosmic family. Effectively, *fa'aaloalo* controls how the human face approach the face of the cosmos, divine and other *tagata*. Vaai in his dissertation of, *Fa'aaloalo: A Theological Reinterpretation of the Doctrine of Trinity from a Sāmoan Perspective*, traced the traditional meaning of *fa'aaloalo* to the original 'relational being' of the cosmic family as discussed above (2006, 162-163). He even compared *fa'aaloalo* to 'relationship' which is also the basic definition of *faiā* as outlined in this writing (2006, 163).

*Fa'aaloalo* therefore is practically about honouring the relationships. A similar argument by Patrick Nullens and Ronald T. Michener regarding the individual and community life state that:

The self is not an island, but is part of a matrix of interconnecting relationships. The human being must be understood from the perspective of the social web, not as a detached self. We will not learn more of our selves by introspection but by self-interpretation within our community (2010, 41).

The difference between Nullens and Michener's argument and the Samoan *faiā*'s perspective is that *fa'aaloalo* goes beyond the human relationship to the cosmos and divine. This is the reason why the Sāmoan indigenous creation story is very important in this discussion as it is the origin of the Sāmoan culture. *Faiā* and *fa'aaloalo* are extensions of that original relationship. However, it is still important to consider Nullens and

Michener's argument as this paper will move towards the social connections between the individual and community and vice versa.

Focusing on the social relationships between an individual and community, one is never separated from the other. Vaai highlighted that the 'individual' carries the face of the 'community', and the community is the extension of the individual (2006, 169 – 170). Inclusiveness is core to the relational being of a Sāmoan. The face of the individual is the face of the *āiga*, paramount chief, village council as well as the whole village. That is why the face of the individual is very important, it is never held to be an independent or individual face. It carries a lot of responsibilities and the identity of the *āiga* and the community. Therefore the individual needs to uphold and exercise *fa'aaloalo* or respect in facing other faces as he/she is carrying the face of the entire community. Negative behaviour by an individual gives a negative image and reputation of the *āiga potopoto* and the village. Positive attitudes on the other hand, give the community a good name. It is never an individual reflection by itself. Contextualizing the above discussion to an individual with disability is that an individual problem is also a communal problem. The social model of disability is in line with this relational living aspect of the Sāmoan indigenous society. *Tagata* with disabilities are never separated from the community they belong to.

*Fa'aaloalo* is always an outwards social approach that puts others first. It corresponds with Emanuel Levinas ethical idea of being responsible for 'others' according to Nullens and Michener (2010, 41). Levinas perspective requires honouring and respecting the other's face, "The face of the other is before me, prompting me to act morally. It is not "I" that is central, but the irreducible value of my fellow human being" (Nullens and Michener 2010, 56). It also matches the Sāmoan linguistic rule of thumb that is practiced in the everyday life. For instance, saying *tūlou* or excuse me, can only be

said with lowering the head and the upper body in respect to others, and not to your own self nor could it be done by an individual alone. The Sāmoan language also has general words and respectful terms. Respectful terms are only for others, not for “I” or one’s self. For example, the English word ‘name’ is generally translated as *igoa*, but the polite and formal term is *suafa*. A speaker whether or not he is a pastor can never introduce his name using the term *suafa*, it is considered as both rude, funny and most times frowned upon. The speaker has to use the term *igoa* to refer for himself. The term *suafa* is only used to introduce another person. Likewise, the word eat generally means *ai* in Sāmoan, and its respectful term is *tausami*. A chief can never refer to himself eating using the term *tausami*, he must use the word *ai* for himself. *Tausami* is used when referring to the other face when eating, regardless of status or age.

The above simple examples of *fa’aaloalo* in language clarify some of the misinterpretations presented by some foreign observation on Sāmoan culture and people. Such as this is the ‘linguistic anthropological’ observation by Duranti that *fa’aaloalo* is an occasional language for special ceremony and for people of high standards only (1994, 88). Duranti discussed *fa’aaloalo* as something from below that serves the interest and status of the elites such as chiefs and special guests. The above evaluation is asserted by Vaai as irrelevant to the reality of *fa’aaloalo* in the Sāmoan societies. Vaai pointed out that *fa’aaloalo* is a way of life that is inspired from understanding the inclusiveness of the community and the individual, and the cultural origin as previously discussed. It is not a one way approach that serves people of status and abuse the lower class. *Fa’aaloalo* is honouring who you are and where you belong. It is a way of harmonising relationships and/or *faiā* whose history shapes who we are as Sāmoan and how we live and approach the cosmos (Vaai 2006, 161 – 179). *Fa’aaloalo* is a service that “...upholds the family unit, endorses its cultural values, acknowledge its spiritual faith, providing pathways for

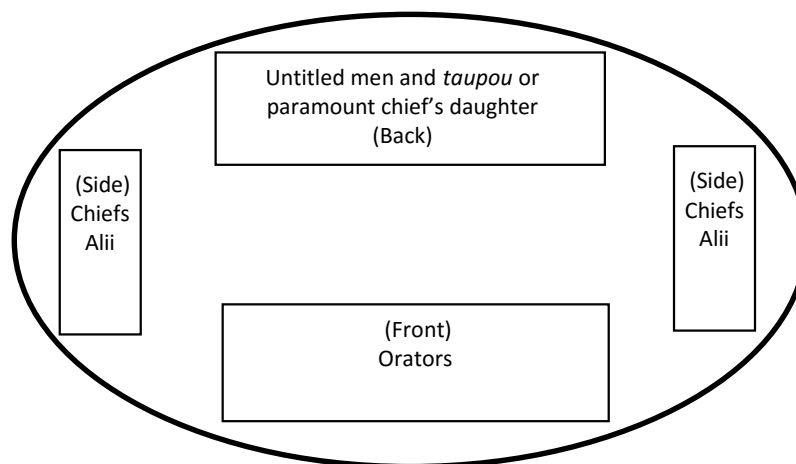
customs, beliefs, and identity to be supported, elevated and preserved” (Seiuli 2013, 52). *Fa’aaloalo* is dealing with the face of the other with love and humility as suggested by Levinas. It is also the formal way of speaking as illustrated above that gives honour to the other face not the face of “I”. *Fa’aaloalo* illustrates a *tagata*’s identity and outlines his and her responsibilities as a Sāmoan. Thus, *fa’aaloalo* in a communal sense is honouring the face of the other as your own no matter what their circumstances are, thus including PWDs.

### 2.5.2 Alofa or Love

Building on the same meaning of *alo* discussed above, *alofa* or love is from the same etymology. *Alofa* is made up of two words, *alo* which means face that is explained by Milner as ‘be engaged in’ or ‘facing’, and *fa* is ‘number four’ (1993, 15). Therefore, *alofa* or love is commonly applied to where-ever the *tagata* faces in the community, which symbolises the four directions of north or *matū*, south or *toga*, east or *sasa’e* and west or *sisifo*. The common symbolic of number four is the structuring of the Sāmoan meeting house or *fale-fono*, big house or *fale-tele* and guest house or *fale-talimālo*. These houses are usually built in front of the family’s land and is used for family and village meetings. Although these houses are usually built in a round-shaped structure, the sitting arrangement of the *fale* is usually rectangular with the front, the back and the two opposite sides. Please refer to diagram 1 below for reference. *Alofa* therefore, can be seen as an interrelated principle that is shared by all in the house through respect and honouring one another. *Alofa* is a holistic term that requires the consensus and the oneness of the whole *fale*. *Alofa* is a relational and communal principle that is for all of the community. It shows the flow of love or *alofa* from the front to the back and vice versa and from one side to the other; the flow of love is communal. Love is serving others and it requires loving people from different directions, different ages and including those with impairments in

societies. Love is not subject to a single direction or specific set of elite people like chiefs, it is inclusive and encircles PWDs.

**Chart 3: Sāmoan House Cultural Sitting Arrangement**



### 2.5.3 Sāmoan Traditional Wisdom

The discussion of the Sāmoan indigenous culture above points to the *tagata* as a child of the divine and the earth being the parent. In the Sāmoan way of life, the parents always look after and supervise the child through caring and nurturing in the *faa-Sāmoa*. The child in return clings on to the values and shared wisdom of parents as directives in life. According to Efi, the nature of the *tagata* cosmic family is a union of interrelated parties with shared authority and importance in the world; illustrating *faiā* in 'harmony' that must not be interrupted (2009, 104). The original *faiā* of Tagaloa and the earth as parents of the *tagata* (child) laid the benchmark of how a Sāmoan village is organised and structured. The council of chiefs or *matai* became the co-carriers of the 'ancestral gods' duties and responsibilities as decision makers in families and or village (Wildermuth 2012, 10).

In Samoan society, *matai* are not autonomous in that their role relies and includes honouring the divine, cosmos and the community. The *matai*'s role is as important as the



others in the community such as the wives, the untitled men and ladies of the village. To better understand the roles of a *matai* is to know the term itself. *Matai* is from a well-known Sāmoan expression ‘*mata-iai*’ that is translated by Meleisea as ‘being set apart’ or ‘consecrated’ (1987, 7). ‘*Mata-iai*’ is made up of two words, *mata* is generally the ‘eyes or look’ and *iai* is a connotation of ‘towards or to’. Milner on a similar note defined *mata* as ‘eye’ and *iai* as “(…reference to location), be placed, be situated” (1993, 134, 82). Therefore, the *matai* is not only someone set apart with special tasks as clarified by Meleisea, but also someone who everyone looks to for leadership and wisdom. On a day to day basis, families and villages are being guided by the traditional wisdom of the *matai*, known as *tofā* and *moe*; which are from the divine and ancestors.

*Tofā* in general is the respectful word for *moe*, and both *tofā* and *moe* mean sleep. It is through this sleep where the divine intervenes and assists the *matai* in decision making through the provision of wisdom. Efi gave details of this process by pointing to *tofā* and *moe* as,

Both mean sleep: i.e *tofā* is the sleep of the chief and the *moe* is the sleep of the orator. Moreover, *tofā* and *moe* also refer respectively to the views of chiefs and orators and such views can be informed by their *moe manatunatu*<sup>22</sup>. Through *moe manatunatu* the gods and ancestors are able to assist the chief and orator not only in decisions concerning the self but also on decisions relating to family and community (2009, 113).

The *tofā* and *moe* are still in use today by the *matai* for decision making in extended families, villages and other societies including the church. These (*tofā* and *moe*) are communal concepts acting to ensure the wellbeing of a community and the eminence of the *matai*, while most importantly keeping the original *faiā* intact. The Sāmoan

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<sup>22</sup>*Moe manatunatu* “...is a dream dialogue with ancestors and family gods” (Efi 2009, 113). It could also mean sleeping with an open mind and heart through meditation with ancestors and gods for assistance and wisdom during village or extended family meetings; especially during sensitive issues that needs wisdom.

indigenous way of making decisions and consensus is different from that of the modern democracy. In the modern societies I was involved in such as the church, most decisions are final when the majority (more than 50% but not all) agree, taking a more diplomatic approach. As a *matai* for 8 years, this mind-set and decision-making process differs in Sāmoan custom and practice in the village council. In Sāmoan custom, consensus is only reached when all (100%) of the chiefs' concerns are compromised and agreed upon by all. Some argue that this is a lengthy process for urgent matters. Nevertheless in reality, the village council procedure denotes the equal opportunity given to all voices and concerns to be heard and included in decisions making, without any minority voices being discarded. According to Vitolia Mo'a, this is where the saying of *moe le toa* or "...let the warrior rest or sleep" is often heard (2014, 50). It refers to the postponement of a matter due to a non-unanimous decision being reached. During this postponement, Moa explained that this is the time where the chiefs meditate and seek the *tofā* and *moe* from their gods and ancestors (2014, 50). New thoughts and new solutions will be beneficial for all come the following day of discussion and meeting. According to Lui, the *tofā* and *moe* is "The cultural process results in win/win situations and all parties can move forward with no hard feelings" (2003, 4). For the purpose of this paper, the *tofā* and *moe* are the key to hearing the voices of the vulnerable groups, such as that of the PWDs, for recognition in village discussions and decision making.

As explained above, each *matai* represents the *āiga*. *Matai* are not individual members, and their concerns must be upheld and taken into consideration. All *matai* have authority and dignity as representatives and heads of *āiga* (Meleisea 1987, 8). This is why in the village, the council is a communal body that leads the society. Society life and structure is formulated from the original cosmic family union and setting that sees the *tagata* and cosmos as equal parties. The village council is served by the untitled men or

*aumaga* during the meetings and village economic activities and developments. The village ladies are endowed with the tasks of weaving and light domesticated chores in the house, for they are the *feagaiga* or ‘covenants’. The sister being the covenant gives the brother the responsibility of taking care and looking after her. The *ali’i* or main chief is the high ranking chief with the orator or *tulafale* being the talking chief. Some writers like Duranti see the said dichotomy as principles for maintaining status and ‘power structures’ (1994, 9). However these traditional roles are for harmonising *faiā* that has a history of its own, and shapes the Sāmoan culture. Meleisea well discussed this by clarifying these roles as reciprocal and complementary (1987, 19). To Meleisea, those with lower ranking roles hold the same status and importance in the village. The big house of the paramount chief is for village functions rather than his personal house, it is communally owned. The sister being allocated lesser and lighter chores, is accorded highly respected in a variety of ways. For example, she will always eat prior to the brother, she is served by her brother and hold high recognition as the covenant and peace maker within families. According to Efi, the sister can curse anyone who disturbs the peace in families and villages. These family ladies are also known as family gods, and are compared by Efi to the ‘Mariology’ in modern Christianity circle (2009, 111). Despite status formalities that the orator is ranked lower than the main chiefs or *ali’i*, all the talking, speeches, distribution of wealth and more are done by the orator not the *ali’i*. A chief stature and authority is not absolute. The extended family deem a title holder unworthy of such an esteemed position, they have the right (in consensus) to change the titleholder where necessary. Land is also communally owned by extended families under the authority of the village. In relevance to this understanding, Meleisea justifies his argument by stating that Sāmoan social roles and village structure and setting was to “...maintain subsistence economy in which the basic resources were available to all”

(1987, 18). Understanding the Sāmoan worldview, *fa'a-Sāmoa* and origin of *faiā* as well as its application in society give light to villages and families' structures and gender roles.

## 2.6 The *Tagata* in the Family

The above origin of the *tagata* and *faiā* shapes the way of living starting from within the most important and sacred component in society that is *āiga* or family. Lui refers to *āiga* as the "...unit of society...not the individual" (2003, 3). The basic form of *āiga* is the nuclear family, consisting of parents and children, with the father being a *matai* or chief. Societal life in Sāmoa as outlined above is communal and the most common form of family is the extended family or *āiga-potopoto*. The *āiga-potopoto* is made up of a number of nuclear families with common descents guided by the directions and wisdom of one paramount chief known as the *Sa'o*<sup>23</sup>. It is the *Sa'o* who represents the extended family in the village council and decision making process. The village itself is a collection of *āiga-potopoto*. In light of such, the *āiga* is therefore a fundamental and core component of the life of Sāmoans as it upholds the totality of life, and is considered a social institution and a concept which informs the life of the community in all dimensions of the *faa-Sāmoa* (Tofaeono 2000, 30).

*Āiga* is the nurturing ground where *faiā* is nurtured, taught, learned, valued, honoured, maintained and sustained. The *tagata-fou* translated as 'new person' is the Sāmoan name given to a new born child. A *tagata-fou* is placed in a very special position within the context of the *āiga*. There is a common saying "*o au o mātua fanau*", literally

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<sup>23</sup>*Sa'o* is also known as *Sa'o o le āiga* or 'the paramount chief who looks after the extended family'. The *Sa'o* represents the *āiga potopoto* and provides the voice of the *āiga potopoto* to and from the village (Tuisuga-le-taua 2009, 97). The *Sa'o* is to blame for any wrong-doing from any member of his family, as he is responsible for peace and harmony of his family and the village. The *Sa'o* represents the *āiga* and the *āiga* is the *Sa'o*. It is why a wrongdoing by any member of the family is blamed on the *Sa'o*.

translated as 'children are dear to or treasured by their parents'. It is held that every *tagata-fou* has a *fa'asinomaga*<sup>24</sup> or genealogical and cultural identity in Sāmoa as previously explained, regardless of how they were conceived (Government of Samoa 2006, 8). A child belongs to a family, chief title, land, genealogy, village or traditional districts. Every Sāmoan child has an identity and a *faiā* or traditional connections. A *tagata-fou* has a *faiā* to their parents and grandparents genealogy, land, village and district (Government of Sāmoa 2006, 8-9). Therefore a *tagata-fou* has many *faiā* to lands, different villages, districts and even titles. These understandings are hereditary ties are the basis for Sāmoan proverbs such as *tele atu a'a o le tagata I a'a o le laau*, which is literally translated as a 'person has many relationships and connections than the roots of a tree'. They signify that a person is a communal being with numerous connections and traditional relationships not only in immediate and extended family, land and titles, but also in the village, district and the society as a whole.

When visitors arrive either expectedly or unexpectedly they are usually welcomed and greeted in the *fale-talimālo* or guesthouse of the *āiga*. It is a gesture of respect of the *āiga* and village as a whole. It is the training ground and place of exercising the cultural principles and practices of *fa'aaloalo* and *alofa*. The *fale-talimālo* is the main house, usually in the front and center of the *āiga*'s ancestral land. Its main purpose is self-explanatory; it is the house to greet visitors and perform cultural welcoming ceremonies, but could also be used as a residential place by others. Its design mirrors and constitutes the culture and life of the Sāmoan people being deeply connected to the values of ancestors, land and community as above mentioned (Tofaeono 2000, 33). It is a central

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<sup>24</sup> *Fa'asinomaga* is a Samoan personal identity. It is who you are as a Sāmoan. It includes your parents, family, village, district, land, chief title, your parent's families and their (parents) villages plus other elements that determine who a *tagata* is as a Sāmoan. It is the Sāmoan traditional identity that illustrates and shows who an individual is, where they belong and all her/his *faiā*.

place for the family where meetings, worship and other ceremonies like the bestowal of chiefly titles are held. Behind the *fale-talimālo* are the smaller houses of various households of the extended family; and at the far back is their traditional kitchen to serve all the households of the family.

One of the unique features of the *fale-talimālo* or guest house is its open design. There are no dividing walls as the *fale* is open on all sides, and people can enter and exit from any side. It symbolizes the welcoming nature of the Sāmoan people and families, being a modest sign of the Sāmoan hospitality. The openness of the *fale* also embodies the connectedness of the *āiga* or family to the village, as the family is not an independent entity but an integral part of the community or village as a whole (Silipa 2008, 16-17). The status and role of each family member therefore extends beyond the boundaries of the home into the social organisation of the village. The *fale* is thus an embodiment of not only of the openness of the family but also the relational character of the Sāmoan families and persons.

## 2.7 Disability in the Sāmoan Indigenous Perspective

Understanding the Sāmoan way of life draws reference and insight as how people with impairment or disability are treated and viewed by the Sāmoan indigenous society. Earlier discussions of the original *faiā* of *tagata*-cosmos-divine including ancestors (deceased) laid the foundation of harmonious living within the Sāmoan community. I, like other Sāmoans was told of curses in Sāmoan life. Most prevalent are curses by parents or *mala matuā* and village or *mala-nuū*. It is an integral part of Sāmoan child-rearing to honour ones parents and respect village protocols and traditions at all times; it's a way of life. As such, violation of the *faiā* with parents and the village are the two prevalent channels through which a person may be cursed. *Fa'aaloalo* and *alofa* are the principles in place to ensure that *faiā* is honoured, exercised and maintained. *Fa'aaloalo* and *alofa*

are essential in all factions of the Sāmoan societal life and existence. It is also argued that every individual has an *āiga*, a *faiā* and genealogy even those born with impairments. The communal living and being as discussed above point to the face of any Sāmoan individual as being inclusive and part of the community, and the community is their identity.

Reading through various Sāmoan literature work with particular reference to the Sāmoan way of life, I found that there is an apparent connection between the Sāmoan indigenous worldview and how PWDs were perceived within the society. Meleisea according to Wildermuth explained that intruding the original *faiā* between *tagata*-cosmos-divine brings curse to the responsible party or individual; and blessings to those who honour and uphold *faiā* (2012, 10). Therefore, relationships or *faiā* must be honoured with *fa'aaloalo* and *alofa* to maintain friendly and respectful relations. Overstepping or not showing respect (*fa'aaloalo*) and love (*alofa*) to the *faiā* between: parents - children, *matai* - untitled men - unmarried women, *tagata* - cosmos, *tagata* - divine, families - divine, families - gods and other specific connection of the *tagata* and *āiga*; bring chaos and curse to families, villages and even its individuals. The above belief is very common in the Pacific in accordance with Setareki Macanawai, the first ever leader of the Pacific Disability Forum in 2007 (2009, 56). Macanawai, feels that most Pacific indigenous perspective associates "...disabling condition with ancestral curse, parental misdeeds, witchcraft, shame and fear keeps PWDs isolated, neglected, dependent and poor" (2009, 56). Curses as a cause of disability is one of the eight assumptions of communities outlined by Black in Chapter 1. To Black, communities believing in the curse perspective, view disability as a punishment for wrongdoing and something from the divine.

It is the same reason why a person with impairments is generally seen in the Sāmoan indigenous society as a result of a curse. It is figuratively connoted in Sāmoan

proverbs such as, *e le sousou fua le sami, seiloga e agi malosi le matagi*, literally translated as, ‘the sea is never rough, unless the wind blows strongly’. The said Sāmoan indigenous view demonstrates that all bad things happen for a reason, such as a wrongdoing by either the person with impairment or family members especially their parents. Such argument is in line with the LMS<sup>25</sup> missionary George Turner’s reflection of physical impairments such as ‘low vision, paralysis, spine humpback’ and other impairments in those days. His observation is that Sāmoans were calling disability as *ma’i* or ‘sickness’ that are associated with or “... be occasioned by the wrath of some particular deity” (Turner 1989, 140). The word *ma’i* is applied to any kind of sickness such as headache and other common illnesses in Sāmoa. There was no term for disability in the indigenous society, as people were living a communal and relational life in communities by looking after one another as discussed. According to the, *National Profiles of In-Country Capacity to Support Disability-Inclusive Education: Fiji, Sāmoa, Solomon Islands and Vanuatu*, a study conducted by the Queensland University of Technology and the University of the South Pacific, the Sāmoan disabilities profile and background states that,

Prior to European involvement, there was no term for disability, and all individuals were included in the community and given tasks in line with their abilities. Since that time, however, western measures of status such as education, occupation and wealth have introduced negative perceptions of disability (2015, 31)

The afore-mentioned absence of a Sāmoan indigenous term for disability matches Fritzon and Kabue’s argument in Chapter 1 that disability is a term invented by the modern society. As expressed above, people with impairments were given roles to play

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<sup>25</sup> LMS is the London Missionary Society who were the first to establish the first Christian church in Sāmoa, LMS arrived in Samoa in 1830 under the leadership of John William. The arrival of Christianity will be elaborated more in Chapter 3.



in the Sāmoan societies in relation to their abilities. However, there impairments is still believe to be a result of curse caused by either the individual of parents and family violating the *fa'aaloalo*. Therefore, the person with impairment is given a task to carry out in society, but at the same time seek reconciliation with the Sāmoan indigenous gods. Those with impairments or *ma'i* that are suspected to be results of a curse do not usually seek medicinal help. Help is sought from the 'high priest'<sup>26</sup> of the village, who is usually the paramount chief (Turner 1989, 18). So the medical model of disability that relies on medicine was not part of the Sāmoan indigenous way of dealing with disabilities. The high priest in dealing with the occasion tells the family of the sick person to offer 'canoe', 'land' and even a 'family confession' in order to restore the person with impairments. Turner did not give any specific evidence of anyone with permanent impairment such as blind healed in his account. He does however imply that the process it takes is in line with the discussion above on cursing as a result of violating the *faiā*. The high priest uses the *faiā* in conjunction with the divine and cosmos as a remedy of re-incorporating the person with impairments back into society, which is one of the pillars of the social model of disability; and *fāia* in harmony. Basically it is integration of the person with impairments back to society where they belong.

It is remarkable that materials such as land and canoe that represent the environment, are used as offerings to gods so as to restore the sick person's body back to full strength. It is the traditional belief of the Sāmoan people that the *tofā* and *moe* of the paramount chief in dialogue with the divine that restored the *tagata* strength to fully contribute to communal life. However it is through the environment that is offered that provided reconciliation between the sick person's family and the divine and community.

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<sup>26</sup> High priests in our Sāmoan traditional setting are usually the paramount chiefs. If the paramount chief is not available then the next high rank chief on the village council ranking takes over the role of high priest in the village.

The environment that is part of the earth or the mother of the Sāmoan indigenous *tagata* still provides life as discussed in the opening section of this chapter. The cosmic family that was between the parent Tagaloa and the earth with their child *tagata* still lays the foundation of *faiā*, and the reciprocity of *alofa* (love) and *fa'aaloalo* (respect) amongst *tagata*. The earth and environment that is represented by canoe and land re-instate the *tagata* back to society. The social model of disability correspondingly emphasizes the need for a friendly environment ensuring PWDs are included in activities of daily living within the societies. In solidifying the above argument the story of the well-known goddess Nafanua<sup>27</sup> will be summed up below as a case study, and read through the lens of the *faiā* to illustrate the practicality of this discussion.

### 2.7.1 Case study 1: Nafanua the goddess and warrior

In regards to the focus of this writing, this case study will focus on the connections between the story of Nafanua and the original *faiā* of *tagata* – divine – earth (cosmos). The word Nafanua is made up of two words, *na* that means ‘hidden or to hide’, and *fanua* that is defined above as ‘land’ and could also mean a ‘placenta of a woman’. Thus Nafanua’s name refers to her as one that was hidden in the land. Nafanua was born from a blood-clot from her parents Tilafaiga the mother, and Saveasiuleo the father who is known to be half human and half godlike (Gabbard 2014, 249). According to many writers including Turner, Tilafaiga, the mother hid her baby on land in the bushes as she was “...ashamed of the illegitimate birth” (1989, 38). It is parallel to the medical model that focuses on the impairment, and results in negative attitudes like shame, and isolation

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<sup>27</sup> The story of Nafanua will be discussed through this chapter all the way to the first section of the next chapter (chapter 3), where the full legacy and *faiā* of Nafanua will be discussed. Nafanua is well known in Sāmoa as a goddess, warrior, prophet and a paramount chief due to her so many achievements in the history of Sāmoa, as well as the history of the CCCS that is this chapter and chapter 3.

of people with disabilities from societies. Fritzson in Chapter 1 pointed to this as the ‘social interaction’ dimension, where families and parents feel ashamed of their relatives and children with disabilities (Fritzson and Kabue 2004, 19 - 23).

Oral accounts present that the divine side of Nafanua’s father cared for the premature baby as she lay in the bushes, and with the land’s care she survived and became a strong lady. According to Gabbard, Nafanua was born at the time of rivalry and civil wars amongst the Sāmoan people, and her family and people were under the ruthless oppression of another district (2014, 249). It was Nafanua who delivered her people to freedom from the hands of enemies. Nafanua became a ‘warrior’ despite being a female, she was known for her strength which resulted in her winning battles and “...she was bestowed with four main honorary chiefly titles...” known as the *Tafa-i-fa*, the highest chief honour and authorisation in Sāmoa (Tofaeono 2000, 183). Malietoa one of the paramount chiefs at the moment went to Nafanua for her blessings, for being late, he was told, “*“Malietoa, ia tali I lagi se ao o lou malo’* (Malietoa, await the head of your government from the heavens)” (Tuisuga-le-taua 2009, 87). The promise was made to Malietoa Fitisemanu according to Tuisuga-le-taua, but the prophecy became a reality during the reign of Malietoa Vainuupo who accepted John Williams and the London Missionary Society missionaries in 1830; who established LMS that is now the CCCS. In noting such, Nafanua was not only regarded as a warrior but also a Sāmoan indigenous prophet.

Nafanua’s encounters and victories are still legacies in the Sāmoan culture and CCCS. Tofaeono referred to Nafanua’s successes as the reality which “...bridges the gap between the mythical aspects and the historical experiences of the religio-cultural heritage of Sāmoans” (2000, 182). As expressed before, the Sāmoan worldview still influences the worldview and way of living of the Sāmoans. If I may use the above discussion of

*faiā* to re-read the story of Nafanua, it offers an alternative reading that, Nafanua was born premature. Tilafaiga the mother took her impaired daughter back to mother earth not to hide her, but to heal and nurture her so that she could return back to society where she belongs. Earth as discussed is the female god that Tagaloa married and created *tagata*. The word ‘hidden’ that is commonly used to translate ‘*nā*’ is not appropriate. The right word to use for ‘hidden’ is ‘*nanā*’ or ‘*nānā*’ as given by Milner as “Hide...In secret, under cover” (1993, 154). The word *nā* in the name Nafanua generally applies to the comforting and soothing of a crying baby, and is usually the duty of the mother. Milner defines the word *nā* as a verb, “Stop crying, be silent...Stop (a small child) from crying...” (1993, 153). Therefore, Nafanua’s name can be described differently as a child that was given back to mother earth to be soothed and comforted to stop her crying. It highlights the complementary *faiā* and relationship between land/environment, divine and the *tagata* in sustaining harmonious living. Tofaeono emphasized a similar view of Nafanua,

Besides many historical events which are related to Nafanua the name itself bears significance as it is related to the people, land and the sea. To some extent, the woman is recognized as the daughter of the opportune time, a manifestation of divine wisdom, a child of nature, a national warrior, a priestess, a saviour and Goddess (2000, 182).

Therefore, the divine, *tagata* and earth worked together in harmonious fashion to ensure Nafanua who was born premature or as a person with disabilities, was re-instated back into society life where she belongs. This indeed matches the social model of disability. The community that includes the village council and decision makers should associate its *faiā* with the environment (cosmos) and the divine, in order to ensure that PWDs are integrated back into community life where they belong. The *tagata*, community and divine must work together to provide an enabling environment to sustain peaceful and harmonious living, especially for vulnerable groups such as PWDs. Nafanua that is usually interpreted as hidden in the land due to her impairment portrays the medical model

of disability. The social model of disability sees Nafanua as the premature baby that her parents soothed and comforted through nature and the environment to become a member of society. The environment (earth) and trust of Nafanua's parents to their *faiā* with the divine raised Nafanua into someone that saved her tribe and community, and also prophesied the arrival of Christianity in Samoa.

## 2.8 Summary

All in all, the discussion in this chapter traces the origin of *faiā* to the Samoan indigenous creation story of Tagaloa, the progenitor god of the *tagata* and the cosmos. The original cosmic family illustrated a mutual relationship and peaceful connections between the *tagata*, divine and the cosmos. The *faiā* is guided by respect or *fa'aaloalo* and *alofa* or love. These two principles are essential in the Sāmoan way of living or *faa-Sāmoa*, and for the most part ensure that the *tagata* honours their relationship with the divine, cosmos and the community. The *tagata* and the community are intertwined and reflect each other through their identity and responsibilities. The *tagata* lives with and for the community and vice versa. Chiefs or *matai* became the co-carriers of the duties and responsibilities of the ancestor's god. The chief's *tofā* and *moe* are inspired by the divine and ancestors to ensure all voices and concerns of every chief representing all families and individuals of the community are heard. The *tofā* and *moe* ensure that decisions involve the individual concerns including vulnerable groups such as people with disabilities.

The *āiga* or family is the shelter where the *tagata* is nurtured to respect and love others in the community and their *fāia*. However the *faiā* of the *tagata* goes beyond the *āiga* to the village and community. The *fale-talimalo* or the guesthouse embodies the openness and connection of the *āiga* to the village. It illustrates the practicality and the relational and communal being of the *tagata*. Disability is not a term in the Sāmoan

indigenous society. The word *ma'i* or sickness was always used to refer to PWDs such as the blind. It is common in the Pacific including Sāmoa to point to a curse as the reason for some of the impairments. It is because the indigenous believe that a curse is imposed on families or individuals who violate the *faiā*. People with impairments were still participating in society through communal and relational living, and were given appropriate roles to play according to their abilities. The story and legacy of Nafanua bears witness to the ability of PWDs if nurtured without limitations and within the right environment to become leaders and prominent figures in every aspect of the community. The *faiā* and social model of disability reading of the story of Nafanua gave an alternative model. Families especially parents, together with the community, divine and the enabling environment pave the way for PWDs to take part and participate in communal and relational living. Let us now turn to the influence of Christianity to the perspective of PWDs in Sāmoa, through theological emphasis and selected biblical references. This Chapter has discussed the *faa-Sāmoa* context but we will now move into the CCCS church context especially the theological perspectives on disabilities.

## CHAPTER 3

### ARRIVAL OF CHRISTIANITY AND THE INTRODUCED THEOLOGICAL PERSPECTIVES ON DISABILITY

The previous chapter discussed the Sāmoan indigenous religious and cultural life that was more communal and relational through *faiā*. Undoubtedly with the arrival of the missionaries, changes were brought about. This chapter therefore begins with a brief history on the arrival of Christianity in 1830, led by John William and the London Missionary Society (referred to as LMS) missionaries. It will secondly, highlight how Christianity impacted the ‘relational living’ and ‘communal being’ of the *tagata* and community that was held together by *faiā*. Thirdly, this chapter will focus on extending the discussion of the theological dimension of disabilities. It will delve into the issues raised by Fritzson, Black and Lees in Chapter 1 and further look into the Biblical significance when reviewing PWD’s. It attempts to explore some of the ordinary theological interpretations that discriminates and isolates PWDs, and present an alternative inclusive reading. Let us start with the arrival of Christianity in Samoa.

#### 3.1 Arrival of Christianity

The arrival of the LMS missionaries in 1830 to Sāmoa marked the era of Christianity on Sāmoa’s shores. However, it is also important to note that there were other foreigners who visited Sāmoa before the 1830s. These included the French navigator La Perouse who traded with the Sāmoans around 1722 and others but were never officially established on Sāmoan shore (Meleisea 1987, 12). There were also

Christian movements before 1830s such as the ‘Sio Vili Cult’ and the ‘Sailors Lotu Movement’, but were never formally established (Tuisuga-le-taua 2009, 109).

The arrival of LMS in 1830 was the first official Christian mission and church established in Sāmoa. The arrival and acceptance of Christianity is generally believed by CCCS to be the fulfilment of the prophecy by the goddess warrior Nafanua, as discussed in Chapter 2. Critical to these discussions is Nafanua’s prophecy and the acceptance of Christianity by Malietoa Vainuupo in Savaii<sup>1</sup>, as the manifestation of the connections between the Sāmoan – myths, indigenous religious-cultural and Christianity (2000, 182). Tofaeono elaborates,

Almost every writing on the old time religion, culture and history includes the narrative account of the heroine, liberator, prophetess and Goddess Nafanua. For our purposes, several vital aspects are offered by the story of Nafanua which are related to the relationships between the divine, human beings and nature (2000, 182).

Tuisuga-le-taua added that Nafanua became “...the mouthpiece of Tagaloalagi proclaiming his divine mind and will to the Sāmoans” (2009, 89). Although some may argue about the validity of such a revelation, this writing takes the Nafanua prophecy as one of the main reasons for the expanse coverage and easy acceptance of the LMS<sup>2</sup> by the Sāmoan people. The prophecy itself is still echoed in CCCS meetings and gatherings as the church’s legacy, heritage and story of God’s revelation to the Sāmoan people.

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<sup>1</sup> Savai’i is the largest Island in Sāmoa. John William and LMS arrived in the village of Sapapali’i in Savai’i where Malietoa is a paramount chief.

<sup>2</sup> LMS and Sāmoan Church were the original name of the church since 1830. The change to CCCS was done in May 1961 during the church General Assembly (CCCS Constitution 2011).



### 3.2 Influence of Christianity on Sāmoan Indigenous Communal Being and Relational living

The missionaries were quick to learn and adapt to the Sāmoan indigenous life and structures. However they came with their own background, ideologies and way of living. One negative aspect that the missionaries brought according to Tuisuga-le-taua was ‘individualism’ that hinders the Sāmoan relational and communal living and *faiā* (2009, 112). Individualism was never part of the *faa-Sāmoa*. It was imposed by the missionaries on the Sāmoan societies and consequently changed some aspects of the Sāmoan indigenous religious culture. The *fale* for instance that embodies the openness and connectedness of the Sāmoan *tagata* was/is replaced by the European closed style/designed houses. This is evident in not only villages, pastor’s house but also in MTC where all sub-districts<sup>3</sup> own a *fale fonu* or meeting house that is now nearly all European designed. The *fale* that embodies the *faiā* is now turn into a European closed wall building that suggests privacy, individual living with walls as symbols of boundaries and barriers.

As previously discussed, the paramount chiefs were high priests of villages, who were the ones leading the communal worships or *tapuaiga*. According to Meleisea, by the 1860s the role of high priest<sup>4</sup> was taken over by the missionaries and the clergy as their own (1987, 13). Correspondingly, the pastor or church ministers took up the status and prestige of *feagaiga* or ‘covenant’. *Feagaiga* as discussed was with the *matai* or chiefs, the ‘scared one’, and more importantly the ladies who were gods in families and were given the title of family *feagaiga* or ‘covenants’. According to Le Tagaloa, the Christian teachers of the past and current pastors carry out the roles that were done by the

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<sup>3</sup> Each sub-district or *Pulega* own a meeting house that is used as the sub-district meeting and residential place during the CCCS Annual General Assembly. These *fales* are also used by students of Malua Theological College as residential places.

<sup>4</sup> Meleisea call the high priest the *ali'i paia* or holder of sacred power.

lady in the *āiga* (2003, 58). These roles include “...peacemaker, she was the healer, the teacher, the keeper of the knowledge of the family, and she was also the priestess...” (Le Tagaloa 2003, 58). These roles were part of responsibilities in honouring the *faiā* but were now being transferred to the Christian pastor who is now the *feagaiga*. The roles therefore carried out by the pastor are very important in the communal and relational being of the church community and the *tagata*. The then missionaries and now pastors have consequently taken over the *feagaiga* privilege. It is now also viewed and accepted as the top ranking authority in not only families but village community.

Interestingly, even the *matai* whose role was believed to be from the Sāmoan indigenous god Tagaloa, is now believed to be authority given by the newly introduced Christian God<sup>5</sup>. For instance, in the process of chief title bestowment today, the pastor is responsible for blessing the new title holder reflecting this new transition of chief’s divine authority. The *matai* is now the co-carrier of the Christian God’s image in families and village; something that was attributed to the god Tagaloa. This creates contradictions between *faiā* that the Sāmoan indigenous culture promotes and the newly introduced Bible creation story and its interpretations brought by the missionaries. It is important to note that the *faa- Sāmoa* is still the way of life in the modern Sāmoa, together with Christianity. The theological discussion later on this chapter will explore the contradiction between the Christian and the Sāmoan indigenous creation stories.

A further change introduced by Christianity includes the role of women. It was seemingly downgraded by Christian traditions and is apparent up to the current times in CCCS. The blame has often been given to the *faa- Sāmoa* and the cause of non-ordination

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<sup>5</sup> The introduced Christian God by the LMS missionaries is commonly known in Samoan as Le Atua mamana or God Almighty, and Sāmoa is now founded on the Christian God. The Holy Bible or Tusi Pāia was the source of stories about God’s history, creation, power, love, wrath and revelations. The introduction of Le Atua resulted in the rejection of Sāmoan traditional gods but worship the one God. However the Sāmoan traditional culture remains with changes imposed by the missionaries that are discussed in this Chapter 3.

of women in the church. As explained in Chapter 2, Nafanua a lady became a leader, goddess, and warrior during the pre-Christian era. Tuisuga-le-taua also refers to Salamasina as a prominent woman in Sāmoan history who was able to hold the *tafa'ifā* or the 'four most paramount chief title' in the whole of Sāmoa (2009, 145). Therefore, the history or the *faa-Sāmoa* clearly allowed for ladies/women to hold prestige positions. The family ladies were known as family gods, *feagaiga* and priests as mentioned in Chapter 2. Women/ladies of the family in pre-Christian era were the *feagaiga* or covenant. Nafanua was a leader and warrior, Salamasina was a paramount chief. The introduction of Christianity by missionaries stripped the ladies and women of these roles and prestige. The history of the CCCS illustrates the struggle of ladies and women to become *feagaiga* in churches through ordination<sup>6</sup>, only men are allowed to be ordained ministers in the CCCS constitution and traditions.

Apart from the abovementioned negative influence of Christianity on *faa-Sāmoa*, there were also positive inspirations and integrations by Christianity on *faa-Sāmoa*. The *fa'aaloalo* and *alofa* were still maintained and are still part of the CCCS moral values and practise as it is parallel to the teachings of Jesus in the Gospels. Jesus promotes love or *alofa* in Mathew 22: 34 – 40, "...37...You shall love the Lord your God with all your heart...39...you shall love your neighbour as yourself" (NRSV). The love Jesus promotes is parallel to the Sāmoan *alofa* as discussed in the previous chapter that is outwards and for the others. *Alofa* put others first and not I. The only different from the *faiā* is that the *faiā* includes *alofa* and *fa'aaloalo* for the cosmos that includes the earth and environment. Accordingly, Tuisuga-le-taua stated:

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<sup>6</sup> Family ladies were known as priests, covenants or *feagaiga*. The word *feagaiga* is now the formal status given to the church pastor. Therefore women were ordained in the Sāmoan indigenous culture, but are now rejected by Christianity to become *feagaiga* or ordained pastors. They are not even allowed to enter the Malua Theological College of the CCCS.

Since then, Sāmoan culture and the *faa-Sāmoan* has been very much influenced by Christianity. Traditional norms of the *faa-sāmoa* have been reorganized in such a way that Christian principles, practices, moral and ethical values have all become integrated and assimilated with the *faa-sāmoa*. This reorganisation of traditional norms and the incorporating of western worldviews was perhaps somewhat easier than one would have expected in such a situation. This was because many Sāmoan moral and ethical values were relatively similar to those of Christianity...(2009, 112).

Many other Sāmoan indigenous rituals and ways of living are still alive and have been altered to be in line with Christian principles and moral values. The *ava*<sup>7</sup> is still used in the church as a way of meeting visitors and for inter-districts and inter-church meetings as done in the old days. The exchange of gifts and traditional mats during special ceremonies in churches such as weddings and funerals are still part of the church tradition. All these modifications of some part of the culture does not take away the essence of these Sāmoan indigenous practices that keeps community relational. For instances, money and some common goods such as boxes of corned beef replace the whole pigs and basket of fish that were used in the old days. These alterations to the Sāmoan culture were done to suit the modern Sāmoa and the context of Christianity as introduced by LMS.

However, not all changes were accepted. One of the rejected influence by the LMS as mentioned was individualism. According to Meleisea the early missionaries of LMS tried to introduce "...middle-class individualism, setting up their village pastors as models of the family life they wished Sāmoans to adopt" (1987, 18). However, the missionaries' plans were rejected by the Sāmoan community at that time who preferred the village setting and structure for the church and the pastor. The Sāmoans preferred the

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<sup>7</sup> Also known as *kava* in other Pacific islands such as Fiji and Tonga and other countries. *Ava* is a traditional drink from the root of the *ava* plant that is pounded and squeezed, it is a drink used for welcoming ceremonies between host and guests.

communal living and relational structure rather than the introduced individual setting (Meleisea 1987, 18).

In effect, the then LMS and now CCCS have adopted the village setting as the structure for community mission and village church. These village churches belong to a sub-district known as *Pulega*, which is under the guidance of the district or *Matāgaluega* that connects directly to the CCCS Executives and CCCS church as a whole. The *faa-Sāmoa* as argued is still practise in the CCCS context but with some modification to be in line with the church's principles.

The CCCS Constitution clearly outline that the CCCS still respects the Sāmoan culture and its practices, but needs minor alterations and improvements to suit the teaching of the Bible and church's principles and doctrines (Congregational Christian Church of Sāmoa 2011, 18). The above discussions highlight some of the influence Christianity imposed on the Sāmoan indigenous culture that binds *faiā*. It includes both negative and positive effects on Sāmoan communal living and relational being. However, other than the effect on the cultural practise and structures, the Bible and its interpretations also challenge the *faa-Sāmoa* and the community approach towards harmonious living. Let us now examine the *faiā* of *tagata*, the divine and cosmos theologically.

### **3.3 Theological Discussion on Disability**

#### **3.3.1 Problematic Biblical Interpretations to Disability**

To briefly outline the theological discussion about disability by Fritzon, Black and Lees in Chapter 1, they all emphasise the importance of biblical text interpretations, language and preaching. Fritzon highlights the need to recognise the different audience and their needs in our interpretations and preaching. He also cautions the using of PWDs as symbol of sin and objects used by Jesus to illustrate his power over evil that paints a

negative image of PWDs in relation to biblical texts interpretations and the church. Instead, Fritzon highlights Jesus' healing as a way of incorporating PWDs back to society. Significantly, theology as discussed by Fritzon is the relationship between God, the church community and PWDs. This is in line with *faiā* and the social model of disability that enhances harmonious and healing relationships.

Lees' challenges the usual reading and interpretations of biblical texts that silently discriminates PWDs. It is however important to look at texts from the point of view of PWDs to ensure their perspectives are recognised. This is where Black introduces homiletics that is healing and promotes inclusiveness. This coincides with the dimension of the social model of disability.

According to all three theologians (Black, Fritzon and Lees), the optimum objective is to ensure that readings, interpretations and preaching of God's word include the views of PWDs. Any discussion and preaching of the Gospel should be good news to all including PWDs. Fritzon argues that preachers and the church should recognise that people in the church have likeness and differences as explained. It should not isolate but empowers PWDs to feel recognised by the church, and also encourage inclusive attitude for the church about PWDs.

Amos Yong in his book *The Bible, Disability and the Church: A New Vision of the People of God*, argues that the Bible is never the problem, it is our interpretations, church traditions, presuppositions and attitudes (2011, 12-13). These factors impose negative images of PWDs on our readings of biblical texts. Sadly, the Bible that should empower all, becomes the rod that seems to isolates PWDs from the church community. The community that is often refer to as the family of God and body of Christ. Biblical interpretations influences our *faiā* or how we relate to God, cosmos, other fellow *tagata* and the church community.

### 3.3.2 Introduced Christian Creation Story: *Tagata as Paleali'i or crown of creation*

As a member of CCCS for more than thirty years, I often hear the prayers by some pastors and even church goers referring to the relationship between the Christian God and the tagata as '*Le Atua na faia mea uma, faapea le tagata o le palealii o au foafoaga*'. This can be literally translated as, 'God the creator of everything, and human as the crown of creation'.

Interpretations and how we believe the biblical texts, shapes our *faiā* and attitudes towards the cosmos, God and other *tagata*. The *faiā* that was a mutual relationship between *tagata*-cosmos-and the divine, is now perceived as hierarchical. As discussed before, the Sāmoan indigenous god Tagaloa is a progenitor god is indwelt in creation. The *tagata* is in equal par with the cosmos through love and respect.

The Christian God however is commonly suggested to be on top of the hierarchy isolated from the creation, and *tagata* becomes the 'crown' or *paleali'i* of creation as abovementioned. *Paleali'i* according to Milner is a noun meaning 'king' (1993, 351). Therefore, the *tagata* is not only crown but also king of creation that includes the cosmos such as the earth, ocean and animals to name a few. This tradition as expressed in such prayer creates a sense of man higher than the cosmos. Sonia P. Juvik according to Wildermuth calls this 'viewpoint' as "...the dominant Judeo-Christian perspective..." (2012, 14). The Judeo-Christian perspectives is labelled by Yong as problematic towards disability and must be challenged by positive interpretations for PWDs (2011, 145). It can be argued that the Christian creation story in Genesis does not present human as superior but a 'stewardship' of the creation as was introduced to me in MTC<sup>8</sup>. Juvik according to Wildermuth refers to the Sāmoan indigenous perspective of creation as

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<sup>8</sup> I was educated in MTC of the CCCS from 2011 – 2014 where I attained my Bachelor of Divinity in Theology..

‘animistic religious viewpoint’, where nature, divine and *tagata* shared mutual respect for each other (2012, 14). Correspondingly, the *tagata* as steward of creation is discussed by Tofaeono as,

“Being made in the image and likeness of the Creator-God ought to be envisaged in the light of carrying out one’s responsibilities to bring about corporateness and co-existential identity of all life forms” (2000, 206).

*Tagata as paleali’i* of creation is a concept I was introduced to in a very young age in CCCS Sunday school or ‘A’oga Aso Sa’ and pastor’s school or ‘A’oga Faifeau’. These two CCCS institutes are the foundation of theological development for CCCS children. Jack L. Seymour in the *Mapping Christian Education: Approaches to Congregational Learning* points to these institution using the ‘Religious Instructions Approach’ (1997, 21). It is where traditions, doctrines, history and theological instructions of the church is passed on from generations to generations of the church. It solidifies and revives church traditions and core theological instructions that guide the church’s moral way of living (Seymour 1997, 21). However, the danger of such approach is that it is usually one way, where the teacher teaches and the student accepts everything that is given without questioning it. It creates a norm of doing things based on traditions rather than understanding what it really means. It is a method of keeping church traditions. The *paleali’i* concept used for the *tagata* in prayers is becoming a tradition and is echoed regularly in CCCS worship’s prayers and even in some sermons. These ‘religious instruction’ institution of CCCS upholds, educates and keeps these traditions and theology such as *paleali’i* alive. It is about time to challenge this *paleali’i* concept and its usage in prayers, as it creates human selfishness and exploitation of the environment and other parties of the cosmos; thus also hindering the *faiā* between *tagata* and other fellow *tagata* as well as community.



The above problematic 'religious instructions' traditions is challenged by Paulo Freire, a Brazilian lawyer who later became an educator that sets up a philosophy known as 'conscientization progress' (1990, 5-7). The philosophy involves commitment, critical reflection that leads to reality transformations of situation, status and context. It involves exploring history with a conscious and critical determination to transform one's situation and reality to a positive one. Freire's idea was seen as a liberating move to reject the oppressor's way of thinking and methodologies that became passive traditions and maintains the status quo (1990, 5-8). Consistently, Leonardo Boff highlights the need for society to change itself for the betterment of all; it needs continuous transformation that gives hope, love and faith to all (1990, 159-162).

There is a need for dialogue between faith, church and the society to critically transform itself. In this way, there is little room for traditions that places the minority in control and the majority is marginalised. Boff's approach highlights the importance of not only understanding the situation but also the need to be critical in order to act and implement satisfactory changes (1990, 159-162). Freire and Boff pointed out that critical thinking is needed by the church to prevent following traditions that maintain status quo and excludes the vulnerable groups such as PWDs. Therefore traditions and old interpretations from commentaries need critical thinking to ensure it includes all, not just the able bodies. Traditions such as *paleali'i* should be critically analysed to ensure it is in line with the *faa-Sāmoa* and Christianity that the modern CCCS operates in.

### **3.3.3 The *Faiā* of PWDs and able bodies in God's cosmos**

The *paleali'i* concept of *tagata's* superiority over other creatures of creation can morph into the mentality of seeing other *tagata* as inferior and subordinate based on their status such as disability. Thomas E. Reynolds book *Vulnerable Communion: A Theology of Disability and Hospitality* thoroughly discussed their experience of being cut off by

the church community due to his son's Tourette's syndrome disorder<sup>9</sup> (2008, 12). Reynolds' includes in his discussion the creation story (book of Genesis) interpretations as one of the many causes of isolating PWDs from communities including the church; which should be reviewed and challenged. The creation story is the leading story in the Bible and it sets the mood of how to read the rest of the Bible. To Reynolds, creation should be seen through the themes of "...creation from nothing..." (Reynolds 2008, 154). The earth and water in Genesis 1:11, 1:20 clearly illustrates that God did not impose full control on creation, but commanded things into being with the 'formless' earth and water. The disorder and unstructured water and earth was used by God in creation to produce the designed cosmos that at the end He sees 'good'. It highlights the formless earth and unstructured water dependency on God's divine intervention for perfection and order. Reynolds believes that "After all, formlessness is required for creativity, undergoing transformation in the process of becoming formed" (2008, 155).

The above discussion illustrates God's creation includes formless elements which the divine intervened and transforms into perfection. The nothing is turned into something that God saw good. The *faiā* between the divine, cosmos and *tagata* is seen in perfection and in harmony through God's intervention and presence as demonstrated and modelled by the creation story. It is *faiā* in harmony. God's creativity model of turning the vulnerability into something holistic as illustrated in the creation is the optimum example for the church community. God's relational love creates goodness from something that was weak and vulnerable. It illustrates the complementary nature of creation to work for each other and co-operate for harmonious life. The strong helps the weak and vulnerable.

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<sup>9</sup> More information on the Tourette's syndrome disorder is explained in detail by Reynolds in page 12 of his book *Vulnerable Communion: A Theology of Disability and Hospitality*. It is a multi-facet disorder that includes autism and many other associated conditions.

It is the way for the church to follow to strive for the common good of all bodies and members of the church.

According to Reynolds creation therefore was created by God's 'love' and 'grace' that was offered freely. It is the love that flowed throughout creation and everything, and that love should be owned up and shared by all of creation by being responsible for each other (Reynolds 2008, 151 – 159). The above discussion by Reynolds of love is matched with the Sāmoan indigenous definition of *alofa*. *Alofa* is for all four directions and the four sides of the *fale* that embodies the whole community and people of all walks of life. It is the love and dignity that should be shared with the face of the other as offered by Levinas, and encounter the cosmos with *fa'aaloalo* that creates harmonious *faiā*. *Alofa* and *fa'aaloalo* therefore as discussed in the previous chapter is the *tagata*'s identity and responsibility that maintains communal being and relational living. Love and respect are also core in church communities as it was and still part of God's creation. God's love and grace creates the beauty of creation from the formless existence of water and earth. Therefore that Godly love should be relational and communally owned by everything of creation including *tagata*. God's love is *faiā* in perfection. The social model of disability relates to *faiā* as it promotes a healing space between PWDs and the church community through *alofa* and *fa'aaloalo*. *Alofa* and *fa'aaloalo*, are essential for the church community to accommodate PWDs through inclusive interpretations and interventions.

Michael S. Beates in his book *Disability & The Gospel: How God uses our brokenness to display His grace*, points to the *tagata* created in the 'image' of God making the *tagata* special from the rest of the created cosmos (2012, 26). However, theologians are for and against such argument and what the 'image' or 'likeness' of God means. Beates focuses his discussion on the two Hebrew words: *tselem* and *demut* ('image' and 'likeness'). According to Beates, theologians such as John Piper and

Anthony Hoekema defines these two Hebrew words towards ‘physical image/likeness’ and representation of God (2012, 27). On the other hand, Gregory Dix according to Aiava presented a ‘relational interpretation’ of ‘image’ and ‘likeness’ of God to the ‘analogy of love’ (2013, 20). God out of His ‘love’ created man, therefore He is God of ‘love’, and man should share this attribute of God to other creatures and *tagata*. This relational definition is in line with *faiā*. It is where *alofa* should be the identity and responsibility of the *tagata* to honour and carry out through *fa’aaloalo*. The above discussion is in line with Reynolds discussion of God’s relational love through His grace offered to creation.

### 3.3.4 God with Disability and Disability with God

‘God with disability and disability with God’ is connected to Nancy L. Eiesland’s discussion of the “Sacramental Bodies” in her book *The Disabled God: Towards a Liberatory Theology of Disability* (1994, 107 – 118). Eiesland wrote about a figurative social approach that weaves ethics and theology about the Eucharist, and relating PWDs vulnerability and weaknesses to the sacramental body of the ‘disabled God’. Eiesland’s ‘disabled God’ is derived from questioning the common text that the church is familiar with during Holy Communion that is from 1 Corinthians 11: 23 – 25.

23 For I received from the Lord what I also handed on to you, that the Lord Jesus on the night when he was betrayed took a loaf of bread, 24 and when he had given thanks, he broke it and said, this is my body that is for you. Do this in remembrance of me”. 25 In the same way he took the cup also, after supper, saying, “This cup is the new covenant in my blood. Do this, as often as you drink it, in remembrance of me.” (NRSV)

Eiesland metaphorically discusses PWDs experience and struggle as the experience God also went through His salvation work through Jesus Christ. The incarnated God that was with the cosmos and the *tagata* through Jesus Christ offers holistic ‘love and grace’ for the world to be saved and witness God’s unconditional love. The Eucharist’s celebration statement above is the manifestation of God whose body was demolished by

soldiers and humans punishment and abuse. It is the celebration to remember the body of God that was destroyed and ‘broken’ and His blood spilt for the wholeness of sinful humanity (Eiesland 1994, 107 – 108). Crucial to this discussion is that Jesus the incarnated God disabled his body for the sake of the sins of the *tagata*. God incarnated and dwells among humans not as an elite or *matai*, but to restore the creation from sin. It is an inclusive act of love for not only PWDs but all humanity from God, and performed by God to bring sinful humanity back to God. It is *faiā* in harmony. The social model of disability promotes an environment that incorporates PWDs back to society’s life. God disables Himself for the incorporating of the sinful humanity back to God’s family.

God’s broken body that Eiesland refers to as the ‘Disabled God’ was resurrected on the third day and is ever present with all *tagata* and community in the cosmos. The resurrection is the sign of ‘hope’ for all, including PWDs. The resurrection for PWDs is not about the physical restorative from impairments to physical wholeness for that is something the medical model focuses on. According to Utumapu, impairment and physical healing almost impossible for people with permanent physical disabilities. Moreover, Jesus resurrection for the PWDs is remembering what the ‘Disabled God’ did in incorporating the whole world from sin through repentance. The ‘Disabled God’ to Eiesland demonstrates inclusiveness for all, not only PWDs. The church too should mimic the ‘Disabled God’ example of striving to include all and for all to participate in worship. The church should endure all difficulties in order to include all people especially the marginalised back to God’s family in the church (Eiesland 1994, 107 – 109).

The *faiā* is in perfection through God’s grace and love for the sinful *tagata*, including PWDs. It is the *tagata*’s and the church’s responsibility to honour it with faith and repentance, and share this love to others especially those who are excluded and isolated. The resurrection ensures that *faiā* is restored and harmonise through repentance.

God's love encounters the cosmos and the *tagata* with His body being broken for sins. The church in return should also encounter God with *fa'aaloalo* and dignity through honouring others, especially the vulnerable minority such as PWDs.

Yong argued on the same line with Eiesland but with a distinct viewpoint by focusing on 'Jesus' Resurrected Body' (2011, 125). Yong firstly clarifies his approach by excluding the medical model of disability that prefers 'biological and medical' emphasis and definition of disability. Focusing on the impairments as the problem leads discussions into the trap of tracing disability to sin and evil. This same argument is mentioned in Chapter 1 by Black. Yong sees disability in line with the social model of disability. It is more about the isolation and exclusion of PWDs by those in control and with high social status through attitudes, traditions, cultures and politics. In using the above definition of disability, Yong believes that "...Jesus entered into the experience of disability fully in his suffering, persecution, and execution at the hands of others" (2011, 126).

Yong pointed out that Jesus suffered a two layered sort of punishment. Firstly the physical abuse punishment in the hand of soldiers that is heavily discussed by Eiesland. Secondly, the cultural and social exploitation through discriminative social religious organisations, and injustice provided by the social and political environment (Yong 2011, 126 – 127). So although Jesus is an able body, he associated himself with PWDs and experienced their struggles in their respective communities. Jesus' life experienced and struggled through social and political injustices is related to the struggle PWDs faced in communities of all contexts including the current.

Yong believes that his reading is different from the usual readings presented by commentaries that focuses on Jesus as the incarnated God that offers himself to suffer for humanity on the cross. To Yong, Jesus experienced disability. PWDs face medical and biological impairments, and they also face social and political exploitations and

injustices. Jesus also experienced both physical and social – political exploitations and injustices in the hands of the ruling elites. Jesus faced the reality and everyday struggle that PWDs encounters daily in communities including the church (Yong 2011, 127 – 128).

The *faiā* that should be relational and communal is individualised by the community for PWDs. The identity and responsibilities of *faiā* is restricted and barricaded due to communities' attitudes that is shaped by poor interpretations that associates PWDs with sin and evil as suggested by Lees and Black. These negatives image of PWDs is also similar to the Sāmoan indigenous traditions that connect PWDs with curse. As mentioned earlier, God's intervention and grace gives peace, hope and harmony to the broken and formless of *tagata* and the cosmos. It is the task that the church should attend and continue to implement. The church's identity and responsibility is to ensure that all are included in the family of God. The church should empty itself physically, politically, socially, economically and spiritually for the wellbeing of others; especially the vulnerable minority who is the church's *faiā* and *aiga*. The church should be for all and accessible for all<sup>10</sup>.

### 3.3.5 Church *faiā* with PWDs

Kathleen A. Cahalan in chapter seven of her book, *Introducing the Practice of Ministry*, traces the nature of the church's ministry to the essence of God as 'God self' and 'Trinitarian God' that is communal and relational (2010, 149 – 171). Cahalan used this nature of God as a 'relational being' in 'action' through Jesus Christ to illustrate and demonstrate how 'practice' and 'ministry' should be carried out in a harmonious fashion by the church.

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<sup>10</sup> Accessible in social, political, economic, and spiritual and all dimension that encompasses the environment of the church.

God is not separated from us. Moreover, God is with us and is among us in our daily struggles. If God is relational and communal, then we must also reflect God's image in our relationship and communion with others. The immanent of God is beyond human knowledge, but God's relational being is evident in the salvation by Jesus Christ and the ever present Holy Spirit (Cahalan 2010, 149 – 171).

The Trinity in perfect relationship is the best *fāia* that should be followed by the church. The church's mission and actions should reflect God's love that was evident in the salvation by Jesus Christ. The salvation that saw God disabled according to Eiesland. Our relational being as a church should be for others as God is through His Son for the world. The God that experiences physical, social and political injustices in the hands of those in power. The church should not be for itself but for others who need God's love and grace. God is a relational God, and so too is the church.

One problematic text for PWDs inclusiveness in the church community is found in Leviticus 21: 16 – 24. In this text, a lists of people with specific impairments are forbidden to offer sacrifices. The list includes those who are 'blind or lame, hunchback, mutilated face, limb too long, broken foot and broken hand' to name a few. It highlights what most PWDs theologians pointed out that the Bible is not the problem, but the interpretations. These texts promote the non-performance of PWDs of sacrifices and clearly precludes them from serving in the temple or otherwise the church. Such text also demonstrate the inability of PWDs from becoming leaders or church ministers. PWDs are not supposed to offer sacrifice or even lead worship. The above are some of the interpretations and presuppositions Leviticus 21: 16 – 24 can create. The *faiā* of PWDs is restricted and limited by such text and interpretations.



The above problem was also echoed in our times at MTC<sup>11</sup>. There was a common saying, '*e le se galuega ma'i le galuega*', which is literally translated as 'the ministry is not a sick ministry'. Such a saying supports the erroneous mentality, that only healthy and able bodies can be pastors. Maafala Limā the current principal of MTC believes that PWDs can do a far better job as pastors for CCCS, something that is often undermined by many (2015). Eiesland boldly discusses the fact that "The exclusion and segregation of people with disabilities from receiving and administering the Eucharist has been the 'normal' practice of the church" (1994, 113). PWDs are seen as a burden during Holy Communion, especially those on wheelchairs and need assistance to line up to receive the Holy Communion according to Eiesland. The mentality is that the Holy Communion is disturbed and prolonged by the presence of PWDs. It is a mind-set that is shaped by focusing on the medical model of disability approach, and the belief that disability is a result of sin and curse. It then leads to the thought that it is better for PWDs to stay home for safety reasons, and the pastor will go to their families and serve them with the Holy Communion (Eiesland 1994, 112 – 113). This style of communion serving at home and family is just exclusion and isolation by the church. It is what the medical model of disability points out that disability is an individual problem. The church community becomes a place for only the able bodies and family home is where PWDs belong.

Beates suggests an alternative interpretation of Leviticus 21:16 – 24. Beates suggests that such texts should be interpreted or in the light of the whole book of Leviticus, not by chapter or by verse alone. According to Beates this particular text;

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<sup>11</sup> This was also a saying I experienced in MTC. It reflects that the church minister's role is only for the totally able bodies or those with healthy bodies, not for PWDS.

It must be understood in light of the overall purpose of the book of Leviticus – to show Israel the all – surpassing holiness and purity of God. The point was not that broken or marred people are unworthy. The point, though we seldom get it, is that no one is utterly worthy (2012, 31).

Beates even points to Leviticus 19:14 where it is instructed that “You shall not curse the deaf or put a stumbling block before the blind, but you shall fear your God: I am the Lord” (2012, 31). The motive of Leviticus 21: 16 -24 therefore is the protection of PWDs from mocking and gossip and to be respected members of the temple. Leviticus 21 should be read together with Leviticus 19 under the purpose of the book which is, holiness. It is also for the protection of the able bodies of Israel from violating Leviticus 19 by creating barriers for the blinds and other PWDs. It promotes respect for PWDs in the temple, and honouring the holiness of God. God’s holiness is the message of Leviticus and especially during worship. One may argue that such approach ends up with isolating PWDs from able bodies in the church as abovementioned. However, Beates points out that it is only in the most holy place of the temple where PWDs are not allowed to serve. PWDs in Leviticus are still allowed to worship, become ‘priests’ and perform other tasks in the temple (2012, 30 – 31). Therefore PWDs according to Leviticus are allowed to worship and serve the Eucharist. They are restricted in Leviticus 21 so that they must be respected, and to avoid church members from violating Leviticus 19.

The CCCS constitution defines the church as the body of Christ as in 1 Corinthians 12:27 with Christ as the Head, and the Church as His Body that is made up of different members (2011, 5). In realising the above definition of CCCS ministry as the body of Christ, the CCCS constitution outlines two main important tasks and missions of the church in the world,

There are two aspects of this important work of the Church in the world: (1) The Church represents God to men in its testimony and loving service to people, and may all its words and actions be a way to draw God's Holy Love to people. (2) The Church also represents the world before God through its prayers of confession, intercession and thanksgiving (2011, 9 – 10).

The above section of the constitution mandates CCCS to ensure that God's love is reflected in the roles and mission of the church. It is akin to the relational love that Reynolds suggests whereby God wills through creation is, for the cosmos, *tagata* and church to share with one another.

It is also the *alofa* that the Sāmoan indigenous *faiā* gives for the others and all members of the community. It is *alofa* that does not discriminate. It reflects the community representing the individual and the individual carrying the image of the community before God. It is *faiā* in harmony.

The first part of CCCS's work is about 'service to the people' and may its 'words and actions' reflect God's love. Therefore, it is the role of CCCS to ensure that service is provided to ensure everyone is able to attend, enter and worship God without barriers. The word of God should be good news as discussed through healing homiletics that upholds *faiā*.

The above role of the CCCS is also supported by its baptism sacrament. It is where the congregation make a vow before God that they will train, look after and have full responsibility of the church's children as their own. The congregation's vow according to the CCCS worship book is as follows,

...ua ou folafola atu, ona o le fesoasoani o le Atua, o le a matou tatalo mo lenei tamaititi ma ona matua, o le a matoua tauave foi lo matou tiute o le aoao atu ma fesoasoani atu I lenei fanau, ina ia tupu ae o ia e fai ma kerisiano ma tagata o le ekalesia (Congregation Christian Church of Samoa 1975, 54).

The congregation's vow can be literally translated as,

...we proclaim that through the guidance of God, we will pray for this child and his/her parent, we will also perform our duties of teaching and assisting this child so that he/she may grow and become a Christian and member of the church' (author's translation) .

Accordingly, the above vow spells out the responsibility of the church to nurture and ensure that all church's baptised children become active members regardless of their circumstance. The congregation commits itself in ensuring that the child is involved and included in the church community in all initiatives and developments to become good Christians. The above vow highlights the church and parishes' responsibilities in fulfilling their vow before God, to ensure the church and parishes are committed in bringing everyone in the church regardless of their status and health. Thus, the church is mandated to ensure that they attend to the different needs of members of the church, to ensure members are able to attend worship. Not only attending, but the word of God should be inclusive for PWDs and provide a good news socially, physically, politically and spiritually. The intention is ensuring that the children have access to worship without barriers, and that the church ensures that all worship God freely.

### **3.3.6 John chapter 9: 1 – 7 Jesus and the Blind man**

The story of Jesus healing the blind man encompasses the reality faced by PWDs in societies and the church in general. The Gospel of John 9: 1 -3, 6 - 7 accounts,

1 As he walked along, he saw a man blind from birth. 2 His disciples asked him, 'Rabbi, who sinned, this man or his parents, that he was born blind?' 3 Jesus answered, "Neither this man nor his parents sinned; he was born blind so that God's works might be revealed in him. 4 We must work the works of him who sent me while it is day, night is coming when no one can work. 5 As long as I am in the world, I am the light of the world". 6 When he had said this, he spat on the ground and made mud with the saliva and spread the mud on the man's eyes, 7 saying to him, "Go, wash in the pool of Siloam" (which means Sent). Then he went and washed and came back able to see (NRSV).

Many commentaries including *The New Interpreter's Bible: A Commentary in Twelve Volumes. Volume IX: Luke John*, discuss the above story and they highlight the 'miracle' and Jesus the 'light' of the world (Culpepper 1995, 651 – 656). The blind man is isolated from the community and religion. Blind and other impairments were connected to sin in the Jewish community and this prompted the discussion between Jesus and his disciples (Culpepper 1995, 651 – 656). Black's healing homiletic together with *faiā* and the social model of disability, can interpret this story as, Jesus' healing of the blind man means the inclusion of the blind man into society. Jesus' healing power is indisputable as He is God. Jesus approached the man, which shows *alofa* and *fa'aaloalo* that is for the other; something that should be core for the church's mission. Jesus' approach is *faiā* in action. He saw the blind man's problem as also His problem. Jesus encounters the blind man's face or *alo* with respect and love. It is in line with the social model of disability that promotes being responsible for one another through reaching out.

Eiesland argues that Jesus in the above text negates the association / relationship of disability and sin; rather it promotes disability as an 'ordinary life' (1994, 72). Such discussion on disability and sin falls in the trap of viewing disability as a 'virtuous suffering'. This therefore encourages PWDs to endure their situation as it is part of their eternal compensation in God's kingdom in the afterlife. It promoted a belief that disability is temporary, and finding cure and healing becomes a burden in the lives of PWDs. Jesus however views disability as an ordinary life as already mentioned (Eiesland 1994, 72).

It is the role of the church however to complement the needs of PWDs through the provision of social and political access for PWDs. In meshing the *faiā*, social model of disability and the above theological view of disability, an alternative approach is suggested. It is an ordinary life that *faiā* connects to the society and church. *Faiā* in the theological sense as discussed in the 'relational love' shows how God shared with creation

in the beginning. Creation should image God's love. The blind man to Jesus was an ordinary man living an ordinary life with community and the church. It is God's relational love invested in creation that will complement and play a significant role in the life of the blind man. The blind man will open the eyes of others in how God's relational love through society and church can make the blind man a normal person of society. The belief was that disability is associated with sin and evil. This duly isolates the blind man. However, it is God's relational love through community and church that provides PWDs with a true sense of belonging.

Jesus symbolises the divine intervention that created something from nothing and formless to perfection. Jesus used mud and soil to heal the blind man's eyes. Soil or *palapala* as discussed is life or blood in the Sāmoan language. *Palapala* or earth in the Sāmoan indigenous creation story is mother god that Tagaloa married and issue *tagata*. Nafanua was soothed by mother earth and brought her back as a powerful warrior, prophetess and goddess. Again, Jesus uses soil or mud to heal the blind man, and as argued before, to bring back the blind man to society where he was excluded from.

The message is more about inclusion but not only about Jesus taking away sin that causes the man to blind. It was Jesus who reached out to the blind man. It is *fa'aaloalo* that put the other first and not the I, it is *alofa* for all. The church needs to reach out to the isolated and bring them back to the church of Christ.

### 3.4 Conclusion

In conclusion, the arrival of Christianity in Sāmoa brought not only the LMS way of living but also the Bible and their interpretations of the Bible. These changes realised both positives and negatives. Individualism was one major negative aspect, but positively the *alofa* and *fa'aaloalo* concept remain as they were in line with the principles and teachings of the gospels. The theological discussion focuses on the relationship between

God, PWDs and the church community. This argument started in Chapter 1 and extended further in this chapter to a more practical theological approach that alluded to the role of the church in including PWDs. Most PWDs theologians argued that an interpretation not the Bible is the problem. The creation by God from nothing and the formless water and earth illustrates God's working together with formlessness to produce perfection. The church community should work together with PWDs and other vulnerable members of the church for a harmonious community. God creates man in his image of love that is relational, therefore *tagata* and the church community should share this *alofa* to all. God even went through the disability experience through not only physical punishment but also the social and political injustices. Therefore the church community is the body that should also fight these struggles socially and politically in order for all to access worship and church community.

God even 'disabled' Himself through Jesus Christ so that sinful human is united back to God's family. The church's ministry should be modelled to the harmonious Trinitarian relationship that is never separated; the model for the church's *faiā*. CCCS's ministry is all about inviting all to God's family through 'service' and the 'word' of God. Therefore, CCCS mission should be through actions and interpretations of the word of God that are inclusive and barrier free for all. The baptism even mandates the congregation to uphold its vow of ensuring all children through baptism is the responsibility of the whole church. Promoting the individual in church and church in individual. The story of the blind man in John 9 illustrates *faiā* in harmony. Jesus avoided any relationship between sin and disability. Disability is an ordinary life and the church community's responsibility is to share God's relational love that will open eyes to God's wonder through perfect *faiā*. Let us now turn to the VSD; and apply what we have discussed so far from Chapter 1 to Chapter 3 to its context.

## CHAPTER 4

### RESEARCH ANALYSIS AND DISCUSSION OF THE ‘VAIMAUGA I SISIFO’ SUB-DISTRICT OF THE CCCS PASTORAL APPROACH FOR PWDS

This chapter centres on the research analysis and discussions of the pastoral approach used by church ministers in the VSD<sup>1</sup> for PWDs in their parishes and villages. As argued throughout this paper, anything about disability should also have the view of PWDs. Therefore, the second emphasis will be on what PWDs in the VSD of the CCCS think about their involvement in the church. Apart from the above two target groups, there is also information from graduates of Malua Theological College (also referred to as MTC) in VSD, leaders of PWDs organisations, PWDs focal point under Sāmoa’s government, and the leaders of CCCS as well as the principal of MTC.

For the above reasons, the first part of this chapter will be the methodology used to collect the data. This will include sampling method, target groups and other statistical inference as mentioned in the introduction. The major part of this chapter is the research analysis and discussion of key themes and common contents or patterns identified from the information collected from the research. The key themes and analysis of data collected will be presented and analysed under the *faiā* framework. Thus, this chapter is not only a research analysis of the VSD pastoral approach and situation of PWDs, but also how the discussion from Chapter 1 to Chapter 3 evaluates the VSD situation and pastoral approach.

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<sup>1</sup> VSD as used throughout this paper is ‘Vaimauga I Sisifo Sub-District of the CCCS.’



## 4.1 Methodology

### 4.1.1 Brief Background of the Research Population: ‘Vaimauga I Sisifo Sub-District of the CCCS’ (VSD)

The VSD is made up of eight (8)<sup>2</sup> parishes (‘parish’ and ‘church’ is hereafter used interchangeably where it is appropriate but both refer to the church/parish community and worship) each with a pastor looking after each parish under the guidance of the VSD Elder. The VSD is part of the Apia I Sisifo District which is one of the 18 Districts<sup>3</sup> that make up the CCCS. However as outlined in the topic of this research, the focus is on VSD only. The methodology for this research is both ‘quantitative’ and ‘qualitative’. Catherine Dawson in her book, *Introduction to Research Methods: A practical guide for anyone undertaking a research project*, simplify ‘qualitative research’ as focusing on in-depth search for quality information using a small sample. Dawson defines ‘quantitative research’ as the statistical analysis of the obtained data<sup>4</sup> (2009, 14 -15).

### 4.1.2 Qualitative Sampling Method

Given the time frame<sup>5</sup> and limited resources for this research, the research qualitative information were obtained from twelve (12) interviews. The ‘research question’ for this thesis is ‘how the VSD can strengthen its pastoral role, to cater and include PWDs in pastoral activities and Sunday worship? Thus, creating an enabling

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<sup>2</sup> These 8 parishes are in different village but located next to each other, 1. Vaivase Tai 2. Vaiala 3. Moataa, 4. Levili 5. Fagalii 6. Mauga Fiafia 7. Vailele and 8. Tanoaleia where I am from.

<sup>3</sup> There are also districts outside of Samoa such as New Zealand, Australia, Hawaii and the United States of America.

<sup>4</sup> For more information on ‘Qualitative and Quantitative data’, please refer to chapter 2 of Dawson’s book *Introduction to Research Methods: A practical guide for anyone undertaking a research project*, which provides details on the two terms (2009, 14 – 26).

<sup>5</sup> The field work research started right after our 2015 academic year in PTC Fiji that is mid-November up to January 2016 when we returned to PTC Fiji for our 2016 academic year.

worship environment for all (abled body and those with disabilities) in the VSD'. Hence, the core target group are the pastors in VSD who are responsible for pastoral care/activities. As previously mentioned, there are eight (8) pastors in VSD and they are also the total target group or population<sup>6</sup> of this research. Although sampling is not so significant in qualitative research, many scholars in research including Tim May argued that representative sampling that is usually applied to 'quantitative research' is also very important to 'qualitative research' (1993, 70).

Five out of eight pastors in the VSD were selected using the simple random sampling method. It is a representative sample of the population as  $5/8 \times 100\% = 62.5\%$ ; thus the sample is 62.7% of the population<sup>7</sup>. The eight pastors' names were listed and given a number from 1 – 8, and the Samoan Go-Mobile Telephone Booklet<sup>8</sup> page 100 was used to select five numbers using the last digit of the five digit telephone numbers<sup>9</sup>. The five pastors selected and interviewed are hereby named as Tasi, Lua, Tolu, Fa and Ono as they did not want their names to be acknowledged in this research, so I respect their decisions. However, a consent letter (attached as Appendix A) was signed by all those interviewed for the information to be used in this paper<sup>10</sup>.

Other than the five (5) pastors selected, other key respondents were interviewed to get core quality information. Four (4) were selected from the leadership and decision making circle of the CCCS that includes: the Chairman of the CCCS Elders Committee: Elder Kerisiano Soti, the General Secretary of the CCCS: Afereti Uili, Principal of MTC:

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<sup>6</sup> Population according to Keith F Punch is the total 'target group' or the total units of subject of the research where the sample is selected from.

<sup>7</sup> 5: Sample size and 8: population size converted to  $100\% = 62.5\%$  which is more than 50% the representative mark or average.

<sup>8</sup> Samoa Gomobile is one of the largest telephone company in Samoa.

<sup>9</sup> If the phone number is 22033, then the last number that is 3 will be used, if the second number is 24518 then the second sample unit will be number 8.

<sup>10</sup> All consent letter with the author.

Maafala Limā, and member of the MTC Board: Elder Siolo Tauati. The CCCS leader's voice is very important as they are the CCCS decision and policy makers. Two (2) interviews were conducted with leaders of active Disabilities Organisations in Samoa: the President of the 'Nuanua o le Alofa Organisation' commonly known as NOLA, Faatino Utumapu; and the Disability Awareness Coordinator of 'Senese Inclusive Institution for the Disabled', Faaolo Uitaulesolo. Utumapu and Uitaulesolo are both PWDs<sup>11</sup>. These two Disabilities' leaders represent the voice of PWDs and their opinions on the necessary role of the VSD for PWDs. One (1) interview was conducted with the Principal Officer<sup>12</sup>, Meritiana Tanuvasa, of the Disability Unit under the Samoan Ministry of Women, Community and Social Development. Therefore a total of twelve (12) interviews were conducted.

The quantitative questionnaires<sup>13</sup> (attached as Appendix B and C) for 'ordained pastors and MTC graduates of VSD' and 'PWDs of VSD'<sup>14</sup> were used as a guide for all interviews, but the interviews were open using probing questions to get important points that the respondents were putting forward. Therefore, 'structured questions' were prepared to guide the interviews so that it never lost track, and the process was more through 'unstructured interviews'. The 'research question' as mentioned above focuses on 'how to strengthen the pastoral role to include PWDs'; thus the main question framing the whole interview process.

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<sup>11</sup> They were both born blind but are very vocal on disability awareness. They are also computer literate using special modern technologies for the blind.

<sup>12</sup> Tanuvasa's role is second ranked to the Head of the Division of the Disability Unit under the Ministry of Women Community and Social Development, which is the disability focal point in the Sāmoa government.

<sup>13</sup> The quantitative questionnaire attached as Appendix B and C was also used for the qualitative process through interviews, as there is a need to use both quantitative and qualitative data analysis together in the discussion part.

<sup>14</sup> The pastor's questionnaire (Appendix B) was used for CCCS leaders, and the PWDs questionnaire (Appendix C) was used for Disability Organisations and the Samoan government Disability Unit.

### 4.1.3 Quantitative Sampling Method

Quantitative information are from two separately designed but similar questionnaires that contain six (6) closed-ended questions and one open-ended question in each questionnaire<sup>15</sup>. The questionnaires were distributed to two (2) target groups: fifteen (15) ‘PWDs<sup>16</sup> from VSD’, and fifteen (15) ‘ordained pastors<sup>17</sup> and graduates<sup>18</sup> of MTC’ who are assisting the pastoral roles in VSD. As PWDs are very rare to find in VSD, the help of one of my friend Sa Seufale<sup>19</sup>, a PWD working at NOLA was sought. We were able to identify seven (7) PWDs at VSD from PWDs working at the NOLA and other Disability Organisations with the help of VSD pastors. The seven (7) PWDs we identified and their families helped us identify eight (8) other PWDs within the VSD.

The fifteen (15) PWDs who were given questionnaire were assisted by family members, plus Seufale and myself in filling-up the questionnaires. This sampling method is related to the ‘snowball sampling method’<sup>20</sup> according to Dawson (2009, 50). The other fifteen (15) questionnaires were given to fifteen (15) ‘ordained pastors and MTC graduates’ who are assisting pastors in pastoral roles/activities. As some parishes do not have ordained pastors and/or MTC graduates, five (5) ordained pastors and ten (10) MTC

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<sup>15</sup> Please find the two attached questionnaires for ‘PWDs in the VSD’ and ‘Pastors and MTC graduates in VSD’ at Appendix B and C, as well as statistical analysis at Appendix D and E.

<sup>16</sup> As clarified in the introduction and the topic of this thesis, PWDs targeted by this paper and research are those with physical disabilities only.

<sup>17</sup> These are the ordained pastors from VSD who are waiting for parishes, some are working in the CCCS offices, some as teachers in CCCS schools.

<sup>18</sup> These MTC Graduates are the ones supporting pastors in worship and other pastoral roles/activities such as Sunday school and youth.

<sup>19</sup> Sa Seufale is working as a senior officer in the NOLA Organisation. He has a very low vision but can still go around with his walking stick. He is from my village and a good friend. He is very active in NOLA’s awareness programs in Sāmoa.

<sup>20</sup> The ‘snow ball sampling method’ is applied to target groups that is rare to find and needs assistance in responding. The researcher uses the available/identified target group members to get the information of other members of the target group. Approval is needed from guardians before any research is done in this method according to Dawson (2009, 50).

graduates from VSD who were available were selected and given questionnaires. The method used is more related to the ‘quota sampling method’<sup>21</sup> as raised by May (1993, 71). It is due to the availability nature of the ordained pastors and MTC graduates and their uneven distribution in VSD. However, the selection was distributed along six (6) parishes in VSD where the target group were found to ensure validity of information. Therefore, 30 questionnaires altogether were distributed and collected. The table below statistically summarises the sampling method employed.

**Chart 4: Summary of Sampling Methods**

<b>QUALITATIVE TARGET GROUP (Interview)</b>	<b>SAMPLE</b>	<b>QUANTITATIVE TARGET GROUP (Questionnaires)</b>	<b>SAMPLE</b>
Pastors in VSD (simple random sampling method)	5	PWDs in the VSD of the CCCS (Snowball sampling method)	15
Leaders of CCCS(relevant stakeholders)	4	Ordained pastors and Malua Theological College graduates in VSD (quota sampling method)	15
Disability Organisations Leaders (relevant stakeholders)	2		
Government Disability Unit (relevant stakeholders)	1		
<b>Total Sample</b>	<b>12</b>		<b>30</b>

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<sup>21</sup> The ‘quota sampling method’ is a ‘purposive sampling method’ that is used to select the right cluster of the target group that is available and relevant to the purpose of the research. A sample taken from this method is not representative but the best ones available that is appropriate for the study are chosen (May 1993, 71).

## 4.2 Analysis and Discussion of Key Themes

### 4.2.1 Pastoral Perspective: The church is always ‘open’ for PWDs

The ‘research question’ targets the strengthening of the pastoral roles of VSD’s pastors to include PWDs in pastoral activities and Sunday worship. Hence, one of the core question asked during the interviews with the five (5) VSD pastors was ‘how they ensured that PWDs are included in worship and other parish activities? The majority that is four out of five VSD’s pastors interviewed namely Tasi, Lua, Fa and Ono pointed out that their parishes are always ‘open’ or *matala* and ‘free’ or *avanoa* to PWDs anytime, especially during worship, Sunday schools and other parish activities. Specifically, Tasi refers to his parish as always free and open for all vulnerable groups, including PWDs (2015, Interview by author). Tasi elaborated that the church especially communal worship is the place where PWDs should go to find comfort, and they are welcomed and supported by the parish anytime they want to attend. Lua responded that he encourages families of PWDs during his family visits to bring PWDs to worship (2015, Interview by author). Lua believes that the church is always open for PWDs but sometimes the families of PWDs attitude and PWDs impairments make it hard for PWDs to attend worship. Fa clarifies that he doesn’t force PWDs to come to communal worship on Sunday, but the church is always open for PWDs anytime they feel comfortable to attend (2015, Interview by author). Fa explained that he only encourages the families of PWDs to bring PWDs to church, but the decision is up to the family of PWDs as they better understand their (PWDs) situation. Fa and Lua’s approaches of encouraging families of PWDs are similar. However, Fa gives families of PWDs the freedom to bring them to worship or leave them at home. Ono recognised the parish as an open institution for all, and it is where PWDs are tested if they can endure and have the willingness to be involved in worship (2015, Interview by author). Therefore, the above responses from the majority of VSD pastors

interviewed presented the church as an open church, but it is up to the PWDs and their families whether to attend church worship or not.

The above responses are the normal attitude and mentality common among church pastors in the CCCS according to the principal of MTC Limā's observation (2016, Interview by author). Limā pointed out that the pastors take for granted the assumption that the church is there and always open for all, and all are invited to join and take part in worship freely. It is an approach that presents the church as a responsibility of the individual such as PWDs and their families to attend or not to attend. Attending church worship then becomes a personal choice and responsibility of the PWDs and their families, thus limiting the *faiā* of PWDs within the comfort of the family as it is not a problem of the church and the pastor. Such a mentality is in line with the medical model of disability, where disability is a problem that belongs to the individual and their families; not the community or church. However, Limā believes that groups such as PWDs need more than an open church, they need 'avenues' such as accessible buildings, transportation and other accessibility opportunities to ensure PWDs are given the same barrier free environment at the parish, as enjoyed by the able bodies. An open church that invites all to worship is not enough, as PWDs do need special facilities and avenues such as ramps for wheel chairs and other means of accessibility. There are physical barriers as mentioned above that prevent PWDs from attending worship (Limā 2016, Interview by author). Meritiana Tanuvasa of the Disability Unit (under the Samoa Ministry of Women, Community and Social Development) affirmed that PWDs according to their consultations are very sensitive to barriers, and environmental barriers including physical facilities hinder PWDs from attending church worship and activities (2016, Interview by author).

The *faiā* model as discussed promotes harmony between: the community whom in this case the church, the *tagata* or PWDs, the cosmos which represents the parish environment<sup>22</sup> and the divine or Jesus Christ the head of the church. *Faiā* in the circle of the church is a harmonious relationship between PWDs (including their families), the church community (under the *tofā* and *moe* of the pastor), the church environment and God. Tolu who is the only VSD pastor interviewed not to mention his parish as an open church utilised a different approach. Tolu stated that building ramps for his church building was one of his first projects in his parish, as he has people on wheel chairs in his parish. It was an expensive project but he was able to get the support of his parish to fund it<sup>23</sup> (Tolu 2015, Interviewed by author). Tolu also acknowledged that he also uses his personal van to pick up some of the children on wheelchairs as part of his youth program. Tolu explained that it is a very good training ground for his youth to be able to help people on wheel chairs even on the ramps, as it includes assisting some of the old people in his parish who use wheelchairs and walking sticks before and after church worship. He believes that it is a practical evaluation of what they discuss in youth seminars every Sundays. To Tolu, his youth like other CCCS youth discuss Samoan culture and values such as respecting the elders and other core values, but the practical part is always lacking. Therefore, assisting those on wheelchairs before and after worship is a good practical exercise for his youth and also an encouraging approach for PWDs on wheelchairs to attend worship easily.

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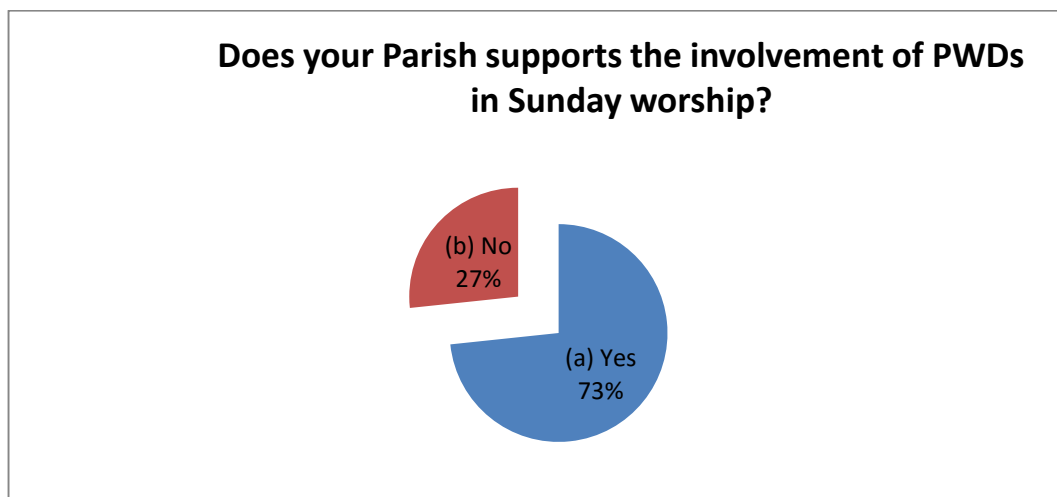
<sup>22</sup> Church environment includes the church physical facilities such as the church buildings, communications such as sign language and other technologies used by PWDs, transportation such as accessible buses, attitude of the church members and ministers and the needed avenues that enable PWDs to participate freely in church activities and especially Sunday worship.

<sup>23</sup> According to Pastor Tolu, fundraising like Bingo games and raffles were used to get money to fund his parish ramps project. It cost his parish nearly \$7000 Samoan dollars to build the ramps for the church building and car park.



We now turn to the perspectives of the ‘ordained pastors and MTC graduates’ of the VSD who provide the pastoral supporting role in parishes and Sunday worship.

**Figure 1**

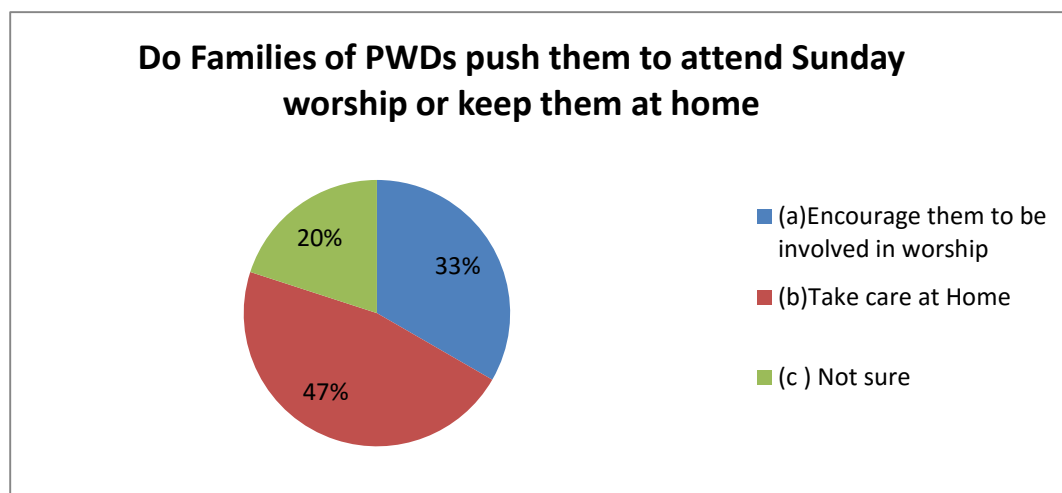


The questionnaires given to the ‘ordained pastors and MTC graduates’ asked them about their parishes and community support for PWDs to be part of worship and church activities. According to Figure 1 above, 73% which is the majority of the fifteen (15) ‘ordained pastors and MTC graduates’ respondents to questionnaires agreed that their parishes support PWDs. The above results support the common opinions of pastors interviewed that the church is always open, free, welcoming and supportive of PWDs all the time.

If 73% admit that their parishes are open and supportive of PWDs, then why are PWDs not attending Sunday worship at parishes? ‘MTC graduates and ordained pastors of VSD’ were asked about the families of PWDs’ willingness to bring them to church worship. Figure 2 below illustrates that most (47%) ‘ordained pastors and MTC graduates’ respondents to questionnaires observed that families of PWDs tend to take care of them at home during worship. Only 33% respondents perceived PWDs families as

supportive in assisting PWDs to be involved in worship; the other 20% were unsure of the families of PWDs stance. Therefore, families of PWDs according to Figure 2 below are blamed for keeping PWDs at home during Sunday worship. The same approach that is common among the majority of pastors interviewed say that families of PWDs are usually the ones responsible for not bringing PWDs to worship. It is an approach that indicates that the problem of non-attendance by PWDs is due to their families.

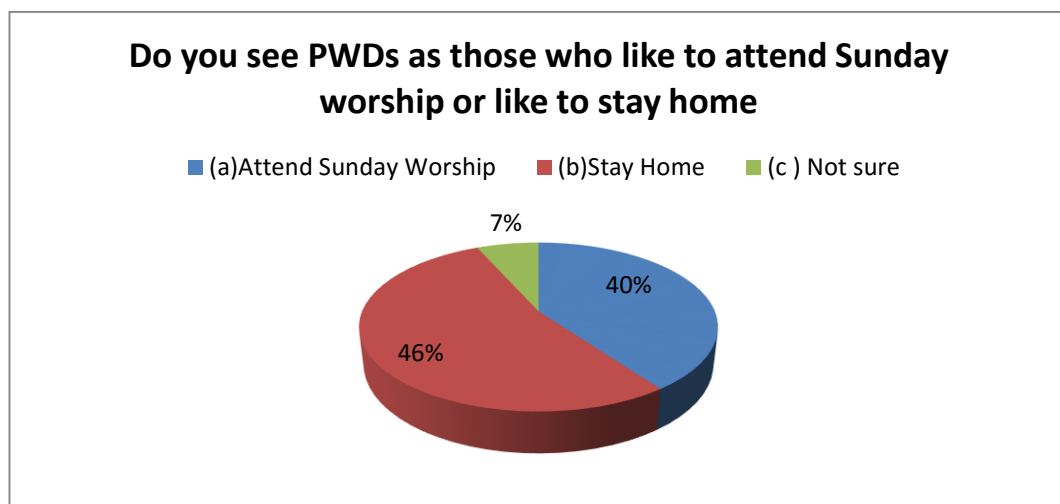
**Figure 2**



Furthermore, Figure 3 below shows 46% which is the highest portion of the ‘ordained pastors and MTC graduates’ respondents to questionnaires expressed that PWDs usually stay home during Sunday worship. The other 40% of the respondents stated PWDs often attend worship on Sundays, with 7% of respondents are not sure. Therefore, we can say that the majority of pastors interviewed, and the ‘ordained pastors as well as MTC graduates in VSD’ respondents to questionnaires are not only blaming the families for being irresponsible in not bringing their PWDs to worship on Sundays, but also the PWDs themselves. A simple analysis of the above discussion is that the church is there and is open for all including PWDs, but their absence in worship is theirs

(PWDs) and their families' problem; and not of the parish or the pastor. Yet, the social model of disability as discussed throughout this paper defines disability as the failure of the community or the parish to take into consideration the needs of PWDs; thus emphasising the need for harmonious *faiā*.

**Figure 3**



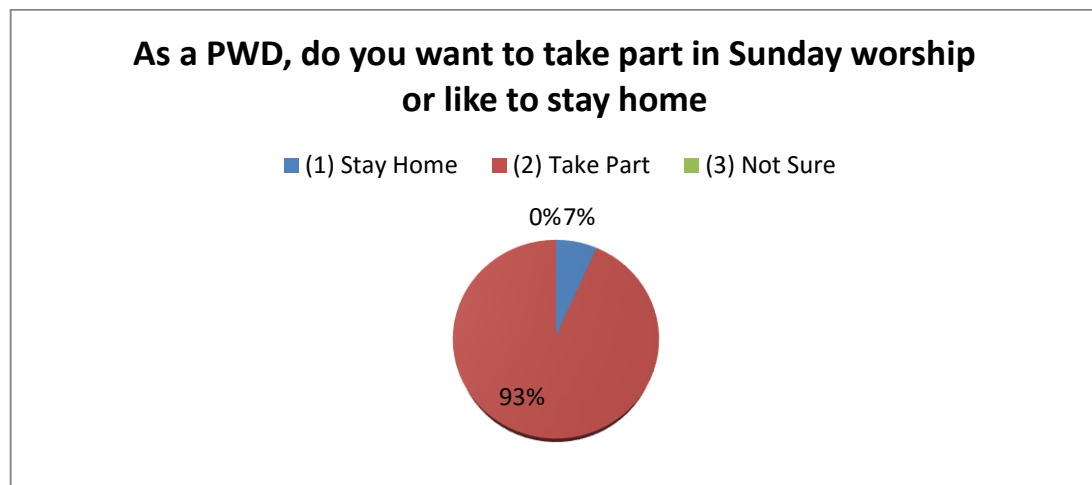
#### **4.2.2 PWDs perspectives of their Families and Parishes**

The voices and viewpoints of PWDs are very important in any discussion or development on disability issues. The pastors and those supporting pastoral approach above argued that PWDs and their families are responsible for their church attendance as the church is always open for them. Subsequently, PWDs (15) in the VSD were asked if they prefer to stay home during Sunday worship and other church activities or want to take part. According to Figure 4 below, 93% or nearly all PWDs respondents to the questionnaires preferred to take part and be involved in worship and other church activities. So most of the PWDs respondents are willing to attend Sunday worship, and show that they want to be part of the parish community and worship. This is just the opposite of the observation in Figure 3 by 'ordained pastors and MTC graduates'

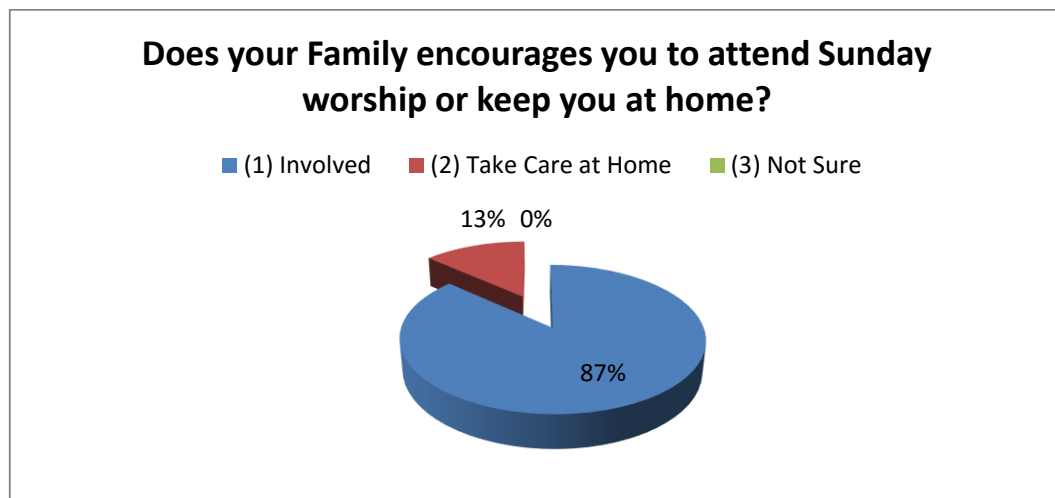
respondents, which shows PWDs as individuals who like to stay home during church worship. Therefore, those supporting the pastoral roles in Figure 3 say that PWDs like to stay home during Sunday worship, PWDs in Figure 4 rejected that claim and state that they are *tagata* who want to be involved and recognised in church and worship.

Faatino Utumapu the President of the NOLA argued that as a PWD herself, family comfort is not their only place in society as they also would like to get involved in communal worship and contribute in parish activities (2016, Interview by author). Utumapu added that the main reason why PWDs stay home during church services is because the parish environment does not provide or cater for their needs such as ramps.

Using the *faiā* model to evaluate the claim by pastors and those supporting pastoral care that the church is open for all, it illustrates a *faiā* that is limited and centred on the self not the other. The Samoan indigenous *faiā* as discussed in Chapter 2 between the community and the individual is an outward and two way harmonious relationship. The individual represents the community and the community reflects the individual. *Faiā* is both an identity and responsibility in relational living and communal being of *tagata* and community. The church community therefore as an open church is merely a role that the church acknowledges. However, it needs to take on the responsibility to ensure that all have the same opportunity to attend and take part in church worship and activities. So part of the parishes and pastors' responsibilities is to overcome the barriers in the physical facilities, culture, attitudes, policies and other factions of the church to ensure that the church is truly open for PWDs. 93% of PWDs respondent to questionnaires in Figure 4 below strongly confirm PWDs' will to be part of church worship.

**Figure 4**

Similarly, families of PWDs are also seen as those who prefer to leave PWDs at home during worship in Figure 2. On the same line, PWDs respondents to the questionnaires were asked about their families' position on their inclusion in church worship. Figure 5 below exhibits 87% of PWDs respondents to questionnaires experienced their families as supportive of their involvement in Sunday worship, with only 13% stated their families tend to keep them home during worship. The result in Figure 5 below again contradicts the image of PWDs' families portrayed in Figure 2. Families of PWDs are seen in Figure 2 (observation by those supporting pastoral roles) as those keeping PWDs at home, but PWDs in Figure 5 below point to their families as those encouraging and pushing their involvement in church worship and activities.

**Figure 5**

Apart from the families of PWDs, Faaolo Uitaulesolo of the Senese Institution who is also a PWD believes that disability is the ‘responsibility of all’ including the pastor and the church, not just families of PWDs (2016, Interview by author). As argued above through the *faiā* model, the church should be responsible for the inclusion of PWDs through ensuring of a barrier free parish environment. Uitaulesolo further clarifies that it is unfair to blame families of PWDs for not taking them to church worship or isolating them at home on Sundays. To Uitaulesolo, families of PWDs see the parish physical environment, attitude and discrimination language in worship as very uncomfortable and stressful for their relatives with disabilities. As a result PWDs are well off staying home during church services on Sundays (2016, Interview by author).

Utumapu on the same line argued that the church should reach out to PWDs, but not just wait for PWDs to come and face the many barriers in the setting and structure of the church environment. The Secretary of the CCCS Afereti Uili framed the absence of PWDs from worship as either ‘discouraged by others’ or ‘feel discouraged to attend’ (2016, Interview by author). Therefore Uili emphasised barriers face by PWDs as something from the other face or *alo* of PWDs. In reference to the circle of the parish,

PWDs are either discouraged by people's attitude or feel uncomfortable with the parish environment. It is why *fa'aaloalo* or respect in the *faa-Sāmoa* is all about the other face not I. The face of the church should treat PWDs with dignity, *fa'aaloalo*, *alofa* or love; thus ensuring *faiā* in harmony. The church operates in the *fa'a-Sāmoa* context where *fa'aaloalo* is still upheld by the Sāmoans even in the modern context as essential to Sāmoans relational living and communal being, including the church. For the church to be a *fa'aaloalo* and a truly open church, it has to put the needs of vulnerable groups such as PWDs a priority. Uitaulesolo specifically pin-points the pastors as the ones that should identify the needs of PWDs during their usual weekly family visits. It is a good start to know the needs of PWDs in order to create avenues to cater for their accessibility (Uitaulesolo 2016, Interview by author). Part of this idea is used by Tolu as discussed above who built a ramp for his parish to help members of his parish who use wheelchairs. Let us turn to the specific barriers identified by VSD pastors, MTC graduates and church pastors providing the supporting pastoral roles as well as PWDs in VSD.

#### **4.2.3 Barriers faced by PWD's in attending Sunday worship**

All target groups interviewed and respondents to questionnaires were asked this very important question about the number one barrier they believe hold back PWDs from attending church worship and other activities. We have learnt from the above discussion that the church needs to create a barrier-free environment that accommodates the needs of PWDs. We have also learnt that PWDs do want to attend and participate in worship and church activities, and families of PWDs hold them home if they see the parish environment not safe for PWDs' needs. Hence PWDs face so many barriers in the church, but Fritzon as discussed in Chapter 1 categorises the barriers into: physical barriers, social interactions and ethical decisions as well as theological understanding of PWDs (Fritzon and Kabue 2004, 19 – 23). To simplify the categories put forth by Fritzon to be in line

with the language<sup>24</sup> used in the field work research and the discussion so far, the focus will be on physical barriers, attitude/behavioural barriers and theological barriers<sup>25</sup>.

During the research, most interviewees and respondents were not fully aware nor understanding of the so many existing barriers within the domain of the church. For instance, when they refer to physical environment it included wheelchairs, special transportation vehicles and parking lots, attitude and gossiping, special writings for the blinds on the ramps to direct them and others. Therefore, physical barriers in this chapter refer to church building designs, transportation, technologies and all physical facilities or equipment needed for PWDs. Attitude and behavioural barriers include the church members and families of PWDs negative attitudes and protective approaches towards PWDs. The attitude also includes looking down, exclusion, discriminating cultures and traditions, policies and the decisions by church leaders that include some and exclude others. Theological barriers include biblical interpretations that connote negative images of PWDs and other dimensions that were discussed in Chapter 1 and especially Chapter 3.

#### **4.2.4 Number One Barrier faced by PWDs**

At the end of each interview with the five VSD pastors, the last core question asked is the number one barrier they see PWDs struggle most with in attending church services in the VSD. Ono, Tolu and Fa that represent the majority of the interviewees (3 out of 5) acknowledged that the physical environment such as ramps, church building,

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<sup>24</sup> Disability discussion according to PWDs leaders interviewed, Utumapu and Uitaulesolo, is a very new issue in Samoa and it is still in its early stage in development. The language used during our interview was straight-forward and simple as some of the areas such as discriminative interpretations of the Bible is something that pastors interviewed never mentioned in our interviews. Therefore the barriers discussion will not categorise the barriers in the way scholars such as Fritzson use to label them, but through the narrated language used by pastors during interviews and I will categorise them formally as the analysis and discussion progress.

<sup>25</sup> More details on these barriers are discussed by Fritzson in Chapter 1.



wheelchairs, including accessible transportations for wheelchairs is the number one barrier faced by PWDs. Tolu as afore-mentioned admits that he built a ramp for his church building, and even admits that it was a very expensive project. Tolu however believes that physical environment is the key for PWDs to physically enter the church building for worship. Fa and Ono also voiced that finance was an issue when considering renovations of building structures to accommodate the physical needs of PWDs. It is important to note that Fa in the previous section believes the church is open to PWDs, and families of PWDs have the freedom of bringing them to worship or not. At the end of the interview, Fa seems to point to the physical environment as the main problem for PWDs, but sees funding for such a project an expensive undertaking<sup>26</sup>. Tasi sees PWDs impairments as the number one barrier holding PWDs away from worship. To Tasi, if the PWDs were born without an impairment there might not be any problem in attending worship at all. Such emphasis falls in the medical model of disability where the focus is on the impairments and sees it as a personal problem. Lua blames the attitude of the church community as the core problem faced by PWDs. To Lua, PWDs are downhearted by gossiping and negative attitude of the church community, which makes PWDs feel uncomfortable to attend church worship.

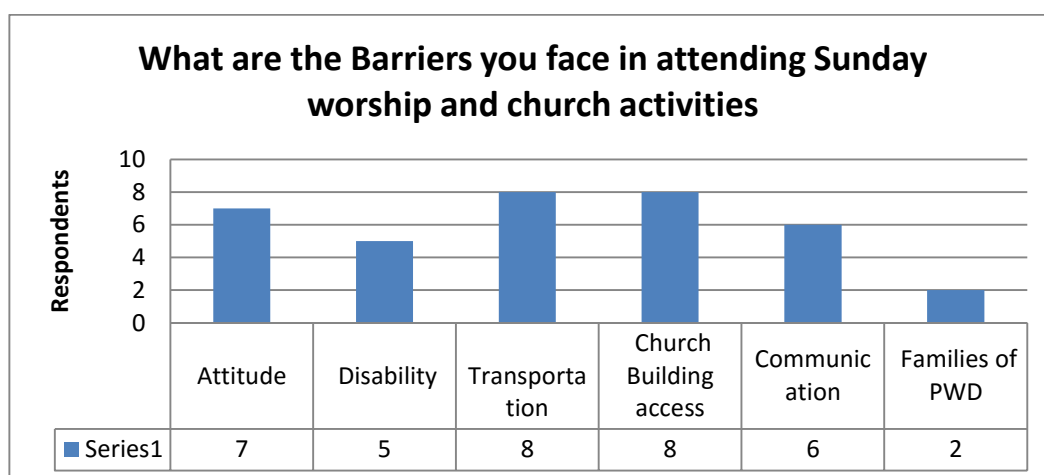
From the above discussion of responses from the five pastors interviewed, the number one problem faced by PWDs rank from: physical environment (Tolu, Fa and Ono:  $\frac{3}{5} \times 100 = 60\%$ ), impairments (Tasi:  $\frac{1}{5} \times 100 = 20\%$ ) and attitude (Lua:  $\frac{1}{5} \times 100 = 20\%$ ). This is the ranking of the barriers by pastors to a question asked at the end of the interview. However, it is important to note that the pastors in the beginning of our interviews even blamed the families of PWDs as barriers; but no one mentioned families

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<sup>26</sup> Fa explains that his parish is facing a lot of financial commitments that he did not specify. Therefore extra project will be very hard for his parish to handle and carry out as they are financially struggling with the current developments and programs that they are currently involved in.

of PWDs as a core barrier when asked at the end of the interview. To get a more accurate account of the barriers faced by PWDs, we now look at what PWDs think is the number one barrier they face in attending church worship.

Apart from the five pastors interviewed, the same question was also asked to PWDs respondents to questionnaires. The five pastors ranked the barriers from: 'physical barriers' with 60% of interviewees, then 'impairments' and 'attitudes' level with 20% interviewees each as calculated above. According to Figure 6 below: 53% or most of the PWDs questionnaire respondents point to each 'Transportations' and 'Church Building' as the main barriers, 47% stated 'Attitude', 40% pointed to 'Communication', 33% pointed to their 'Disability' or impairments and only 13% PWD blamed their 'Families' as the main barriers for their participation in church worship. Respectively, the PWDs responses to questionnaires in Figure 6 support the five interviewed pastors that the 'physical environment' of the parishes is the number one barrier faced by PWD in attending worship. PWDs like the interviewed pastors also point to 'Attitude' 47% and 'Disability' or the impairment 33% as other barriers. It is also important to note that 'Families' of PWDs is again the lowest barrier identified by PWDs. The new barrier is 'Communication' with 40%, which is the fourth ranked barrier in Figure 6 below.

**Figure 6**

Variables / Barriers	Frequency	Frequency percentage of total sample size <sup>27</sup>
1.Transportations	8	8 / 15 x 100 = 53%
2.Church Building	8	8 / 15 x 100 = 53%
3.Attitude	7	7 / 15 x 100 = 47%
4.Communication	6	6 / 15 x 100 = 40%
5.Disability	5	5 / 15 x 100 = 33%
6.Families of PWDs	2	2 / 15 x 100 = 13%

Figure 7 below exhibits the ‘ordained pastors and MTC graduates’ respondents to questionnaires of the barriers PWDs face in attending Sunday worship. According to Figure 7 below, 93% or nearly all ‘ordained pastors and MTC graduates’ respondents to questionnaires stated ‘Disability’ or impairments as the number one barrier PWDs faced in attending worship. Such a result indicates the mentality and perspectives of ‘ordained pastors and MTC graduates’ of the barriers hindering the participation of PWDs in worship. It is a perspective that is in line with the medical model of disability that focuses on the impairment as the problem faced by PWD, and it is a personal and individual

<sup>27</sup> The calculations used here is to find the percentage of respondents in each variables as respondents were given the choice to pick more than one barriers option. The calculation used is the number of respondents picking a variable (x) divided by the number of respondents or sample size (n) then multiply by 100 to get the percentage: Formula:  $x/n \times 100$

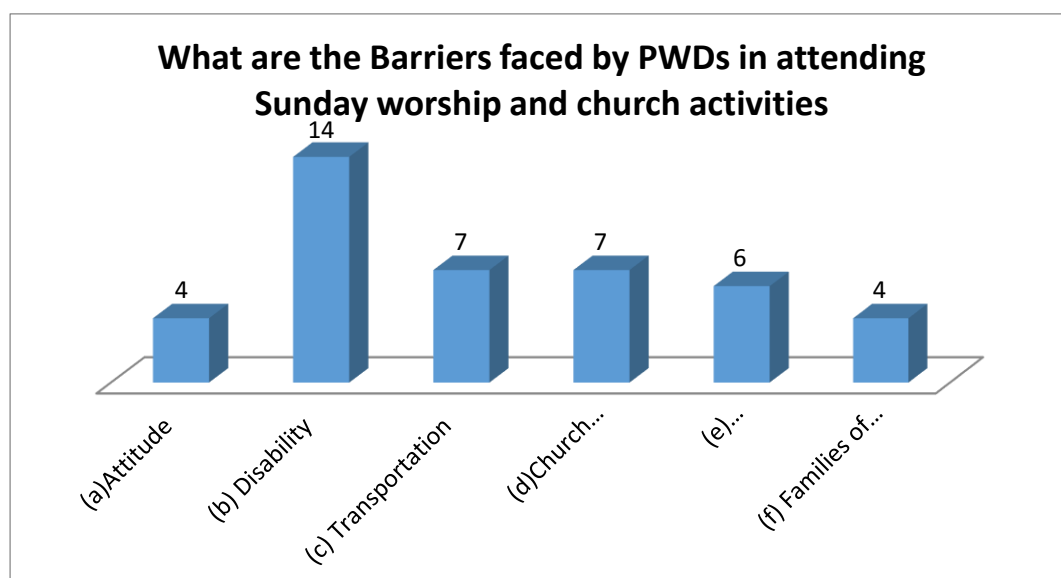
problem. Such a perspective as discussed throughout this paper results in the isolation of PWDs in the comfort of homes away from the church community to deal with their impairments, it's not a community or church problem.

The *faiā* in such a view is again limited in the comfort of PWDs families, the face or *alo* of the church does not want to be responsible for the problems faced by PWDs as individuals. The questionnaires respondents are also all MTC graduates, and are future church ministers in whatever parish they will be called to serve. Elder Siolo Tauati explained that CCCS ministers are not trained in MTC with special skills to deal with PWDs or even an awareness of disability issues (2015, Interview by author). The Chairman of the Elders Committee and Board of MTC Elder Kerisiano Soti also voiced that awareness programs about disabilities issue should be part of the pastors training at MTC, but it should be done with the Sāmoan government ministries who have the skills in disabilities area. The principal of MTC Limā voiced out that any new course to the MTC curriculum such as disability has to come through the CCCS Constitution. Elder Soti through our interview stated that they are preparing to review the CCCS constitution in 2016, and disability issue will be one of the issue to be discussed for specific inclusion. As mentioned in Chapter 1, there is no specific policy or provision in the CCCS constitution that mandates any plan of actions for the needs of PWDs. There are general responsibilities for the spiritual and physical wellbeing of the general church members in the constitution, in which Elder Soti believes covers PWDs but needs to be more clear and specific so as to prioritise PWD in worship and CCCS activities.

Fritzon in Chapter 1 believes that 'likeness' and 'difference' is important. People have different needs that the church needs to accommodate, thus including the needs of PWD. Oliver's social model proposed that development for PWDs should be mainstreamed in the existing policies and plans not to develop a separate document that

isolates PWD. Therefore it is healthy to include PWD in the CCCS constitution and curriculum of MTC not to develop a separate program or policy. Disability issues should be mainstreamed in CCCS school curriculum, Christian education, finance policies, mission plans and other CCCS policies and implementation plans.

**Figure 7**



Variables / Barriers	Frequency	Frequency percentage of total sample size <sup>28</sup>
1.Disability	14	$14 / 15 \times 100 = 93\%$
2.Transportation	7	$7 / 15 \times 100 = 47\%$
3.Church Building	7	$7 / 15 \times 100 = 47\%$
4.Communication	6	$6 / 15 \times 100 = 40\%$
5.Attitude	4	$4 / 15 \times 100 = 27\%$
6.Families of PWDs	4	$4 / 15 \times 100 = 27\%$

<sup>28</sup> The calculations used here is to find the percentage of respondents in each variables as respondents were given the choice to pick more than one barriers option. The calculation used is the number of respondents picking a variable (x) divided by the number of respondents or sample size (n) then multiply by 100 to get the percentage: Formula:  $x/n \times 100$

#### 4.2.5 Theological Barriers

Theological barriers is something that was never mentioned by the pastors interviewed. As mentioned above by Elder Tauati, ministers were not trained on disability issues and skills. To Elder Tauati, awareness is needed by pastors on how to include PWD in worship and understand their needs, but the special skills such as sign language and other are the responsibility of NGOs like NOLA and Senese. The church must never take over this role as this is the specialty and career of Disability organisations. This idea is supported by Uitaulesolo, she believes it is them the NGOs who have the skills to negotiate and work with MTC on awareness and help parishes who need such skills development to help PWDs in their parishes. However, Utumapu believes that MTC should look at interpretations and language used in worship that discriminate PWDs. Utumapu even raised the issue of some ministers who came to open NOLA's meetings and conferences but use language such as 'spiritually blind' or '*tauaso fa'aleagaga*' that is very offensive to PWDs. Disability such as blindness is used as a symbol or metaphor for sin and evilness. Utumapu believes that awareness and training at MTC is the place where theological students should be introduced to proper interpretations that do not offend vulnerable groups like PWDs. The theological discussion in Chapter 3 discussed the interpretation and language that discriminates PWDs and offers alternatives through *faiā* reading and social model of disability understanding. Awareness is needed for pastors and MTC students to improve understanding of PWDs' views, perceptions, nature, needs and issues. Through understanding and awareness comes a different attitude towards PWDs in worship, preaching, language and interpretations.

Uili believes that there is a need to look at awareness programs, revise church liturgies, develop local training workshops for ministers and those supporting and doing pastoral roles such as lay-preachers. To Uili, the theological aspects need to look at

manuals such as the CCCS lectionaries, Sunday school manuals and even the CCCS hymn book '*Pese ma Viiga*' or 'Hymns and Songs' and assess if it discriminates PWDs or not (2016, Interview by author). A simple example of Uili's argument can be found in the CCCS '*Pese ma Viiga*' hymn number 157, which is usually sung during services and church offerings. The song is about holistic offering, "*1.Ave lou ola ia aoga le Alii e I au feau...2.Ave ou lima ia aoga e fai ai mea e aoga ia te oe. Ave ou vae e femoei I au feau...*" that can be translated as, '1.Take my life for your ministry Lord...2. Take my hands to do the good things for you o Lord. Take my legs to run for your work...' <sup>29</sup> (Congregational Christian Church of Samoa 1909, 157). Such a song is very important as it promotes giving our whole life for God's ministry. However PWDs throughout this paper argue that their point of view is so important. Black, Fritzon and Lees plus other theologians with disability in Chapter 3 promote healing homiletics and interpretations in worship. The same concerns of PWDs can be applied to hymns as well. Hence, it is important to consider PWDs with hands and legs impairments and the theology promoted by such hymns. To the able bodies, such hymn is very fitting for offering purposes. To those with hands and legs impairments, such song can cause two paradigms. First it can be suggested that those with hands and legs impairments sufferings are part of their offerings to God and there is eternal compensation in the afterlife as discussed by Eiesland in Chapter 3 (1994, 72). Therefore such hymn (157) promotes impairments as offering. On the other hand, such song as I experienced in our parish can be literally applied to the physical being of parish members. This is where the 'difference' that was argued Fritzon is crucial. Gossiping and teasing of one of the guys with a short leg in our parish is evident whenever we sing this hymn for offering. I can still recall this guy's smile whenever the youth make fun of him, but deep in his heart I know he is hurt. Interpretations and

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<sup>29</sup> Author's translation is hereby done in the most simplest form for ease of reference.

language in worship should not be discriminative as suggested by Uili. Rewording such song in a way that it can include PWDs with hands and legs impairments can be one alternative. The *faiā* model offers an alternative through communal and relational living as discussed in Chapter 2. The social model as well point to the individual problem as a problem of the community such as the church. Therefore rewording the song to be more communal and inclusive will take away the word ‘my’ and replace with ‘our’. Then the song will be, 1. Take our lives for your ministry Lord... 2. Take our hands to do the good things for you o Lord. Take our legs to run for your work...’ Such a rewording reflects *faiā* and harmonious social environment where the parish praise God as one body of Christ.

### 4.3 Conclusion

To sum up this Chapter, the analysis and discussion was mainly focused on the ‘Research Question’ that this paper tries to answer. The ‘Research Question’ looks at how the CCCS can strengthen its pastoral role, to cater and include PWDs in pastoral activities and Sunday worship? Thus creating an enabling worship environment for all (abled body and those with disabilities) in the Vaimauga i Sisifo District of the CCCS or VSD. The qualitative analysis of responses from the key target group which are the five (5) pastors from the eight (8) pastors in the VSD provide the themes that outline the analysis and discussion. Other interviews with relevant stakeholders provide supporting arguments. The ‘quantitative’ research through questionnaires to ordained ministers and MTC graduates in the VSD, and PWDs in the VSD provide the backup statistical evidence that justifies the qualitative information.

From the analysis, it was discovered that pastors believe the church is open but PWDs and their families is the problem. Such claim is rejected by PWDs as they acknowledge their will to be included in church worship. However pastors and PWDs



share a common response that the number one barrier faced by PWDs in attending worship is the 'physical environment'. There is a great need to look at the physical environment, especially in regards to funding as such project is raised as expensive. Other barriers include communication, attitude, families of PWDs and PWDs impairments. MTC graduates and ordained ministers' responses to questionnaires see disability as the problem that demonstrates the medical model of disability mentality. Awareness is very much needed by parish ministers especially in MTC where ministers are trained in order to raise understanding and attitude towards PWDs. Disabilities issues should also be mainstreamed in existing policies as raised by the three pillars of the social model of disability as discussed in chapter 1; but not as a separate policy and development that isolates PWDs. The church should reach out to PWDs but not just acknowledge the church as an open church. Its ministry should be inclusive for all

## CONCLUSION

In conclusion the *faiā* model promotes a harmonious relationship between *tagata*, divine and the cosmos in the Sāmoan indigenous way of living or *faa-Sāmoa*. *Faiā* mutual relationships is rooted in the Sāmoan creation story of Tagaloa that sees *tagata* and all other elements of the cosmos equal and share a common authority and responsibility for each other. The communal relationship see the *tagata* being responsible for the wellbeing of the natural environment of the cosmos, and also other fellow *tagata* and community. The *tagata* carry the image of the community, and the community is the *tagata*'s identity. *Faiā* model is all about 'communal being' of the *tagata* through 'relational living', there is no individualism. Love or *alofa* and *fa'aaloalo* or respect are the essential values and principles that keep the *faiā* intact. *Alofa* does not discriminate as it is service and dignity for all. *Fa'aaloalo* is an outward love that puts the face of the other before the one's self, it's relational living. The Sāmoan traditional wisdom in decision making ensures that every voice including the minority are recognised and included.

Consequently, the 'social model of disability' promotes *faiā* between the community and PWDs by encouraging the community to be responsible for the inclusion of PWDs in society. This readily includes church community activities and Sunday worship. The social model of disability highlights the need for the community to see PWDs as also their concern and responsibility leading to inclusive actions and initiatives.

The social model of disability focuses on a harmonious relationship and a complementary physical, social, political, theological environment between communities including the church and PWDs. It takes away the emphasis on the medical model of disability that focuses on the impairment, which results with PWDs and their families facing disability as their own individual problem. The negative side of the medical model is that PWDs would face isolation from the community and church as they have to deal

with their circumstances alone. It is considered as a problem that is not within the context of community gatherings and worship. *Faiā* in the medical model is limited and located only in the comfort of the family or *āiga*. Consequently, PWDs are contained within their families and are considered as charity targets and their lives will be controlled by others preventing their voices and concerns.

The arrival of Christianity in Sāmoa in 1830 from the LMS missionaries brought individualism and other changes to the Sāmoan indigenous culture. Other roles such as *feagaiga* or covenant was taken by the pastors from the Sāmoan family ladies. Ladies and women are still not allowed to be *feagaiga* or ordained in CCCS. The bible was at the core of these introduced changes. The Bible as discussed by many theologian including Yong is not the problem, it is interpretations by preachers. Theologically, discussions were mostly on how interpretations and language in worship discriminates PWDs. The Sāmoan indigenous culture sees disability as a result of curse, from breaking harmonious relationships with villages and parents. Such a belief is also presented by those who see Jesus' healings as the casting away of sin or evil from the cured person. It presented disability as a result of sin and evil. Eiesland believe that the blind man narrative in John 9 clearly states that Jesus points to disability as an 'ordinary life'. The *faiā* model and the social model of disability promotes harmonious relationships that takes PWDs back to community life, church activities and Sunday worship. Jesus healing the blind man in John 9 is not all about the healing, but also about Jesus reaching out to the isolated man by community; thus healing and re-incorporating him back to the community and giving him a sense of belonging.

## **Recommendations and A Way Forward**

Chapter 4 analysis and discussion presented the findings and the discussion of what is to be done from the VSD perspective. As a way forward, the research question targets how to strengthen the pastoral roles of VSD of the CCCS in have an inclusive approach. With the above concluding statements, this paper provides the basis and/or basic opinion for a discussion forum for further consultation with key stakeholders of the CCCS on disability development. Although disability is a well-known topic, there is limited writings and or no research conducted within the CCCS on the issue; thus requesting expanding of this research to a macro level with theological inference and analysis. It is the vision of this project as discussed that this initiative could lead to the mainstreaming of policy development in CCCS constitution, policies and existing programs and developments. Chapter 4 analysis and discussions point to the physical environment as the common problem faced by PWDs. Therefore physical environment is an area where CCCS as a whole could assist in through policies such as ramps. CCCS should be working together with the Sāmoan government and other funding agencies such as the Australian Aid in funding. The CCCS as a whole can easily establish financial support rather than single parishes and sub-district such as VSD asking for funding alone. This does not discourage single parish who want to fundraise for their own renovations for PWDs members of their church, as done by Pastor Tolu.

As experienced during the interviews with the pastors, the awareness and understanding of the pastors on disability issues grew as we went through our discussion. It opens up our discussion and pastor's responses at the beginning of the interview about the church as an open church which ultimately led to the realisation that there are physical barriers in their parishes, including attitude. Awareness programs for pastors are very important. Hence, this paper could be used as a discussion paper in forums such as 'EFKS

Fonotele’ or ‘CCCS Annual General Meeting’, CCCS Youth Week, CCCS Church Ministers annual retreat and even as a theme for White Sunday to promote disability issues. The MTC play a very important role in the understanding and attitude of MTC theological students towards PWDs, as they educate future pastors of CCCS. In the short run, awareness programs on disability issues by Disabilities Organisations and PWDs in partnership with CCCS for MTC students as discussed should be encouraged. In the long run, as argued by Limā, any new course should come from the CCCS Constitution. Therefore, the voice of those lobbying for disability issues such as this paper should push for disability issues to be part of the normal provisions of the CCCS constitution and other CCCS policies and action plans.

A course on interpretations as deliberated in chapter three should be part of the disability course and awareness program. It should also include the *faiā* model and the social model of disability from the world of scholars (Mike Oliver). All in all, the church and the bible should always be the place where the vulnerable groups such as PWDs must find comfort. This paper is just the initial step within the CCCS, and I hope it is the start of more research for the inclusion of brothers, sisters, parents, grandparents, friends and children with disabilities in the CCCS, especially in Sunday worship and church activities.

## APPENDIX A

### **LETTER OF CONSENT FOR INTERVIEW**

***PAPER: "INCLUDING PEOPLE WITH PHYSICAL DISABILITIES WITHIN THE 'VA'IMAUGA I SISIFO'SUB-DISTRICT OF THE CONGREGATIONAL CHRISTIAN CHURCH SĀMOA"***

I, Filemoni Crawley, am currently writing a thesis paper on the above mentioned topic in the Masters Level at the Pacific Theological College, Suva Fiji. It is with all due respect that this consensus ensured that all information from this interview will be strictly confidential, and will not be used in any other purpose(s) rather than this task as requested. It is also your right to direct the author to mention or not to mention your name in his paper. It is the objective of this writing through the aid of your valuable experience to contribute something for the mainstreaming of People with Physical Disabilities in Church devotions and activities in the CCCS.

I would like to acknowledge with utmost gratitude your time and valuable experience shared for this undertaking. May God bless your good self, ma ia togo pea malama aua le feagai ai ma le soifua vala'auina.

Ma le faaaloalo,

Filemoni Crawley: \_\_\_\_\_ Mr/Ms/Mrs/Rev: \_\_\_\_\_

Date \_\_\_\_\_ Venue \_\_\_\_\_

## APPENDIX B

<b>Questionnaire for Congregational Christian Church Samoa Church Ministers/Malua Theological College Graduates (Ao'ao)</b>
<b>CODING SHEET</b>
<b>Date:</b>

1) How long have you served the CCCS as a church minister/ Ao'ao?

0 - 5 years ☐ (a)      >5 – 10 years ☐ (b)      >10 – 15 years ☐ (c)  
 >15 years and above ☐ (d)

2) In your experience as a church minister/ ao'ao, have you come across people with physical disabilities in your Sunday Worships and church activities?

Yes ☐ (a)      No ☐ (b)

3) From your experience and observation at your parish, do people with physical disabilities tend to attend church services on Sunday and other church activities or do they stay home often?

Attend ☐ (a)      Stay Home ☐ (b)      Not sure ☐ (c)

4) Do families of people with physical disabilities push them to be involved in Sunday worship and church activities, or do they keep and protect them at home?

Encourage them to be Involved ☐ (a)      Take care at Home ☐ (b)      Not Sure ☐ (c)

5) In your parish, does the church community supports those with physical disabilities?

Yes ☐ (a)      No ☐ (b)

If **yes**, please give some examples below, if **no** go to question 6 please.

---

6. Please tick appropriate barriers you see faced by people with physical disabilities when attending Sunday worship and church activities (you can tick all appropriate answers).

- |  |   |
|--|---|
| <input type="checkbox"/> Attitude of the community (a) | <input type="checkbox"/> Building including church access (d)     |
| <input type="checkbox"/> Their disability status (b)   | <input type="checkbox"/> Communication barriers (e)               |
| <input type="checkbox"/> Transportation barriers (c)   | <input type="checkbox"/> Families of People with Disabilities (f) |

7. Any recommendations on how to include people with physical disabilities in Sunday worship and pastoral activities in the CCCS?

***\_Faafetai Tele. God Bless.***

## APPENDIX C

<b>Questionnaire for People With Physical Disabilities CODING SHEET</b>
<b>Date:</b> _____

1. Gender      Male ☐ (1)      Female ☐ (2)

2. Disability: \_\_\_\_\_

3. Age \_\_\_\_\_

4. As a person with disabilities, do you prefer to stay home on Sundays and other church activities or do you want to take part?

Stay Home ☐ (1)      Take Part ☐ (2)      Not sure ☐ (3)

5. Does your family encourage and support you to be involved in Sunday worship and church activities, or do they prefer to protect and take good care of you at home?

Involved ☐ (1)      Take care at Home ☐ (2)      Not Sure ☐ (3)

6. In your parish, does the church community supports you in attending Sunday Worship and church activities?

Yes ☐ (1)      No ☐ (2)

If **yes**, please give some examples below, if **no** go to question 7 please.

\_\_\_\_\_

7. Please tick appropriate barriers you experience in attending Sunday worship and church activities.

- |  |  |
|--|--|
| <input type="checkbox"/> Attitude of the community (1) | <input type="checkbox"/> Building including church access (4)    |
| <input type="checkbox"/> Their disability status (2)   | <input type="checkbox"/> Communication barriers (5)              |
| <input type="checkbox"/> Transportation barriers (3)   | <input type="checkbox"/> Families of People with Disabilities(6) |

8. Any recommendations on how to include people with physical disabilities in Sunday worship and pastoral activities in the CCCS?

\_\_\_\_\_

\_\_\_\_\_

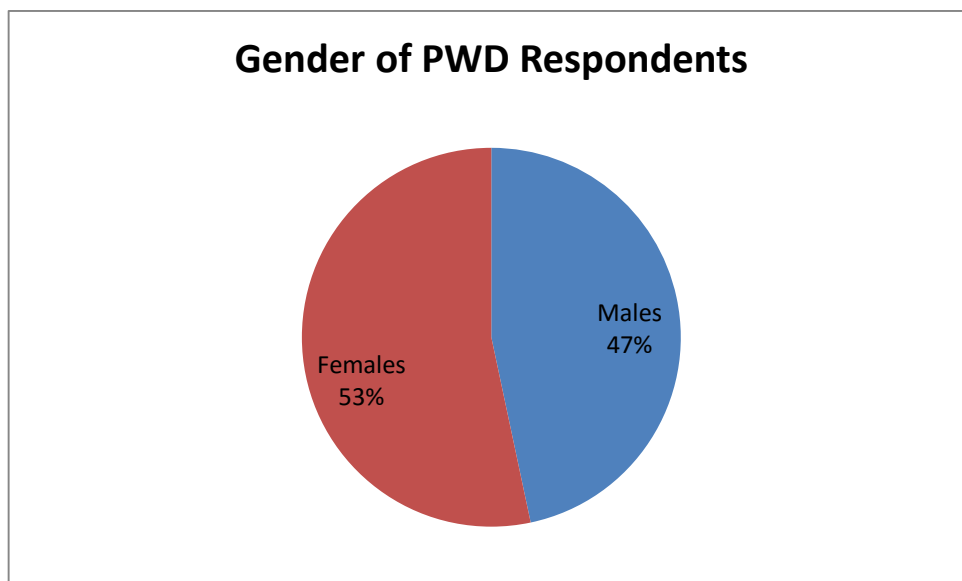
***Faafetai Tele. God Bless.***



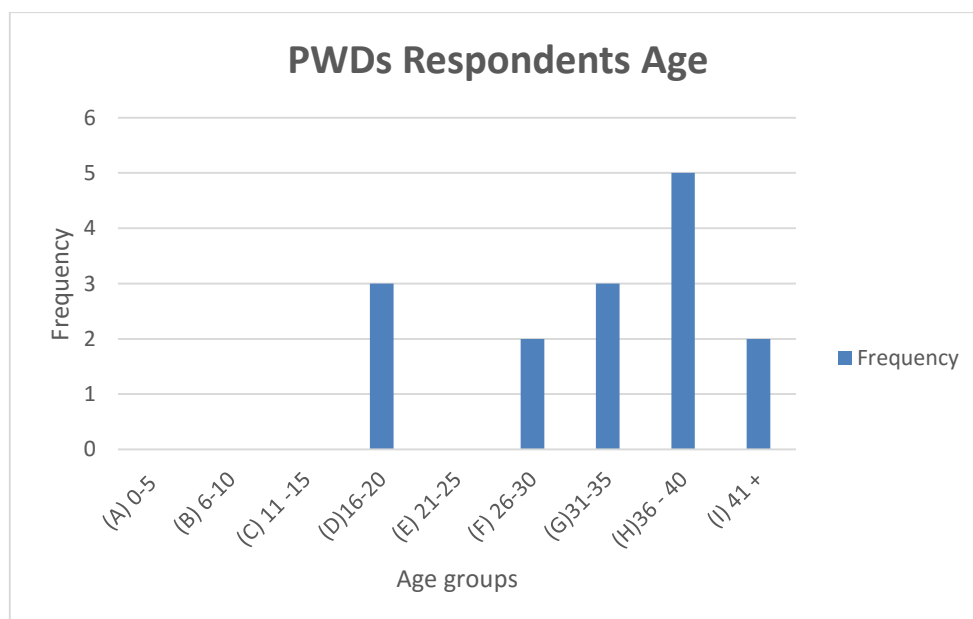
## APPENDIX D

### Overall Statistical Analysis of the PWD in the VSD Questionnaires

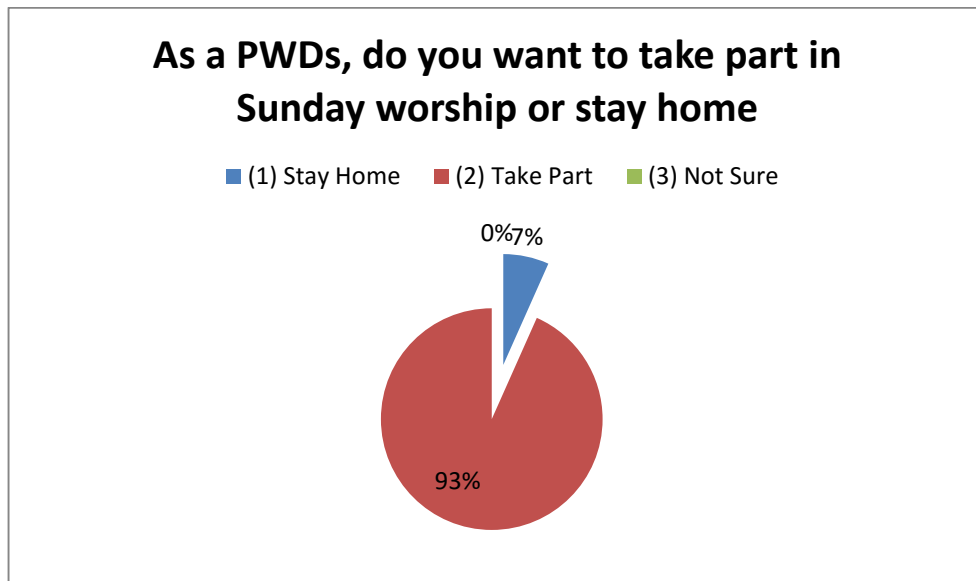
#### Question 1



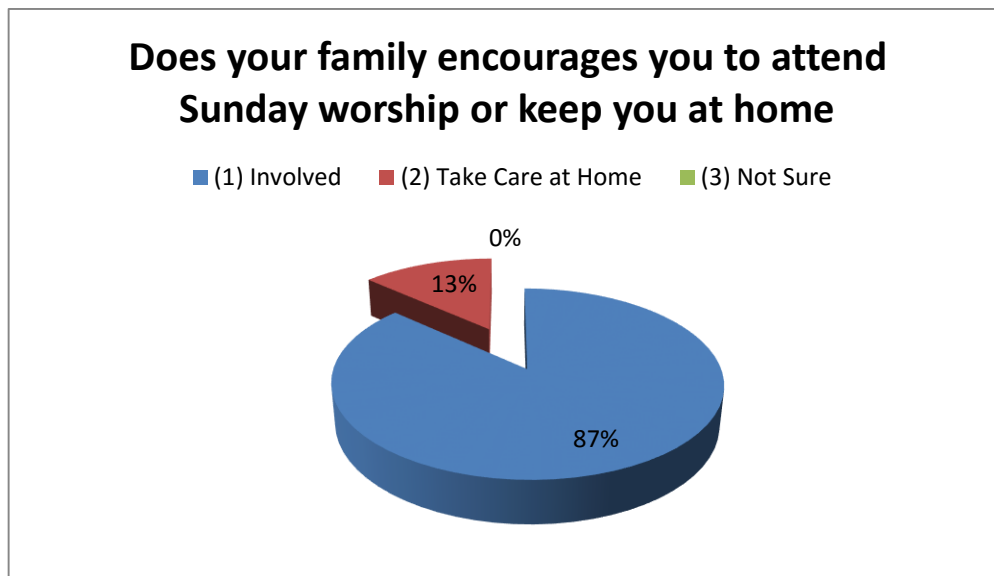
#### Question 3



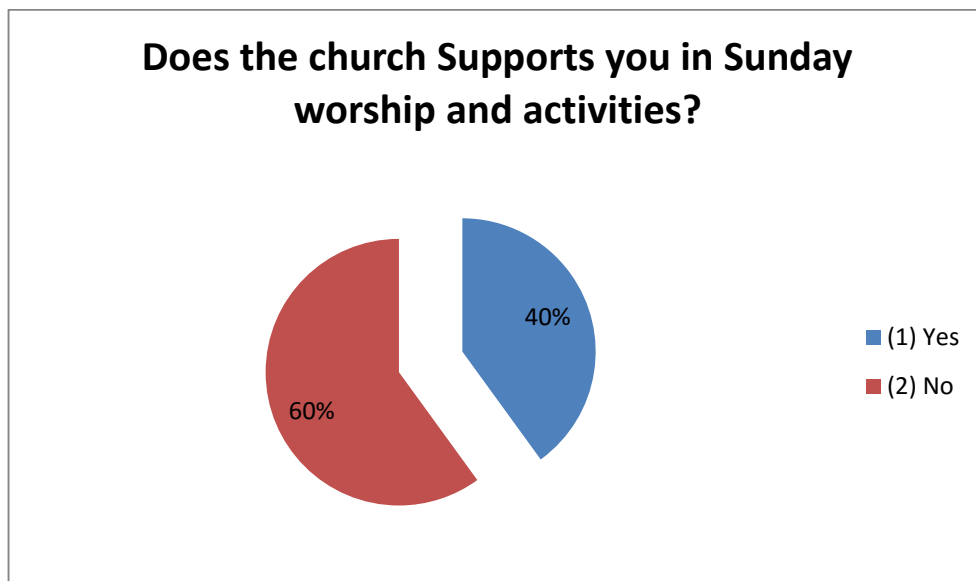
## Question 4



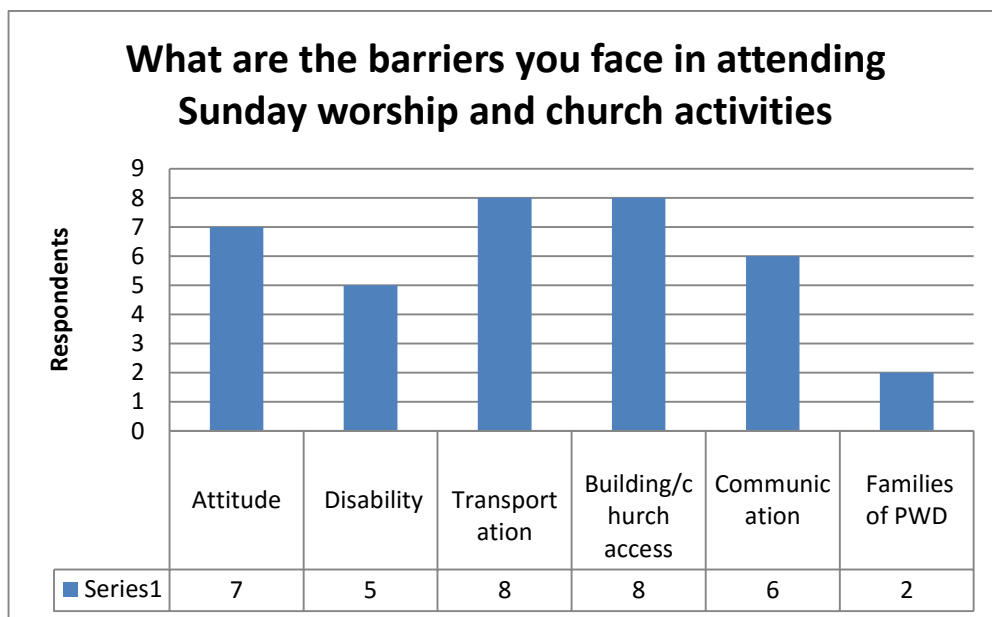
## Question 5



## Question 6



## Question 7

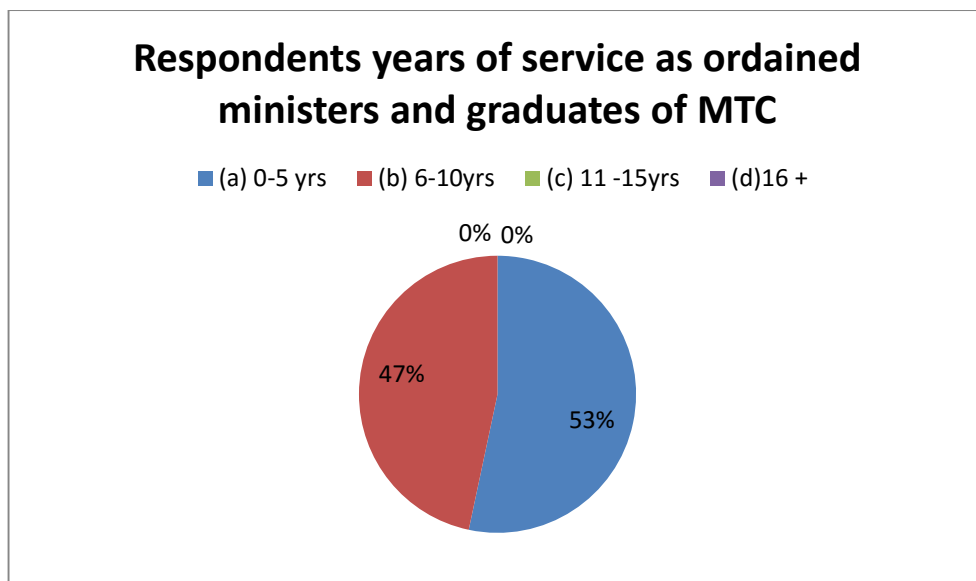


## APPENDIX E

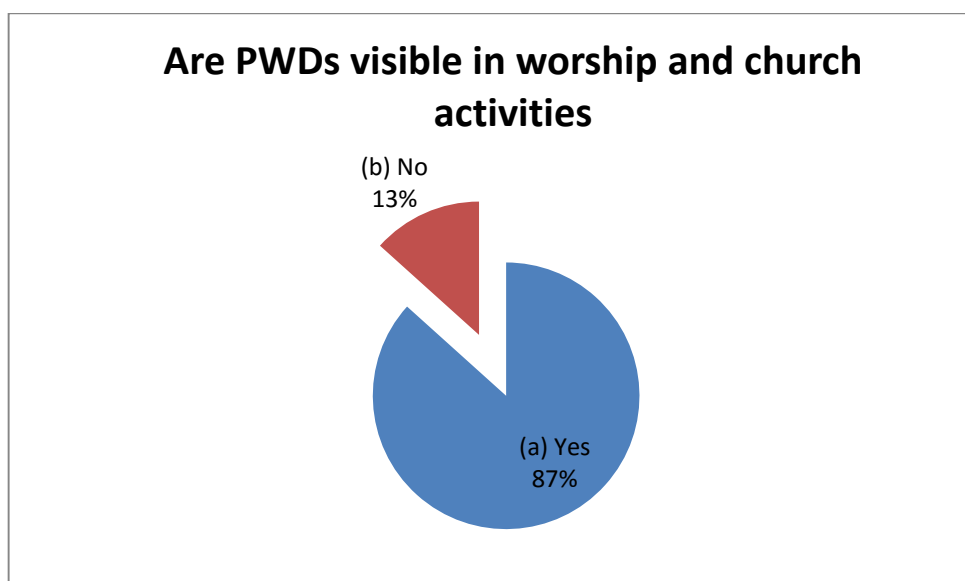
### Overall Statistical Analysis of the Ordained Ministers and MTC

#### Graduates' (Ao'ao) Questionnaires

##### Question 1



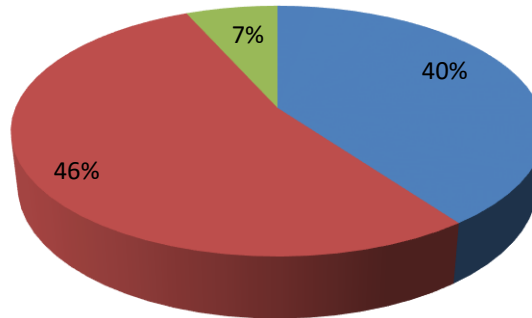
##### Question 2



## Question 3

**Do you see PWDs as people who like to attend Sunday worship or like to stay home**

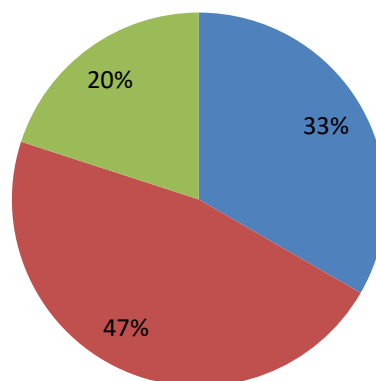
■ (a)Attend Sunday Worship   ■ (b)Stay Home   ■ (c ) Not sure



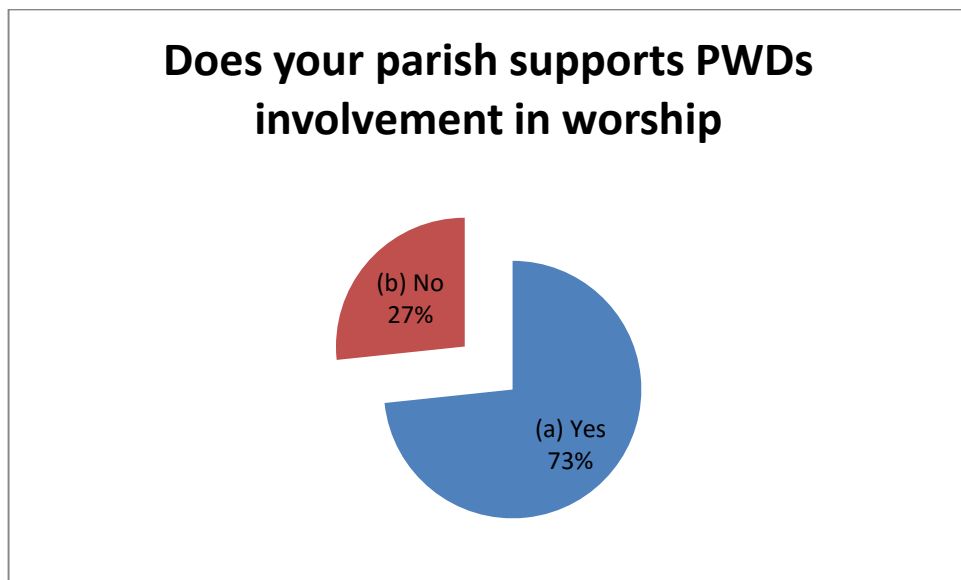
## Question 4

**Do Families of PWDs push them to attend Sunday worship or keep them at home**

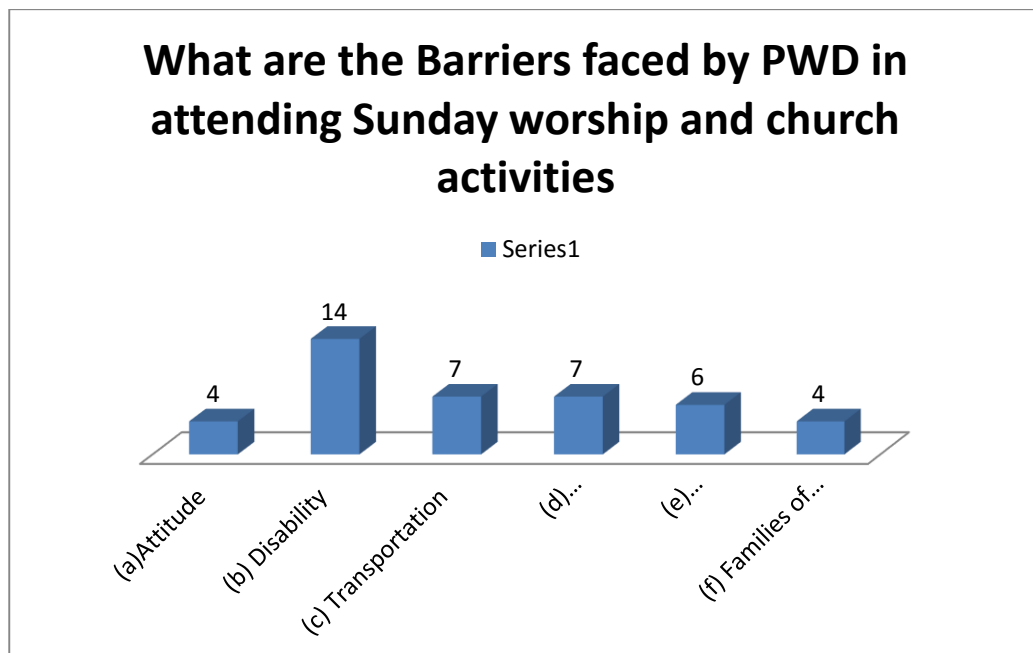
■ (a)Encourage them to be involved  
■ (b)Take care at Home  
■ (c ) Not sure



## Question 5



## Question 6



## GLOSSARY

Aganuu	- Culture
Āiga	- Family
Āiga Potopoto	- Extended family
Ali'i	- High Chief
Ali'i Paia	- High Priest
Alo	- Facing or face, can also mean stomach or children of a chief
Alofa	- Love
Aumaga	- Untitled men
Ava	- Kava roots / plant
Ekalesia	- Congregation or parish
Fa'aaloalo	- Respect
Fa'alupega	- Genealogy of a family, village, district and even Sāmoa as a whole
Faa-Samoa	- Samoan way of life and culture
Fale	- House
Fale-talimālo	- Sāmoan traditional guest house
Fānau	- Children, but can also mean giving birth
Fanua	- Land or the placenta of a woman
Feagaiga	- Covenant
Galuega	- To work or an employment
Itumalo	- District
Lagi	- Heavens
Le Atua	- Christian God or Lord

Matāgaluega	- District of the CCCS
Matai	- Chief
Moe / Tofā	- Sleep, but also the Sāmoan traditional wisdom of the chief and orators
Nā	- To soothe or calm a baby from crying
Nanā / Nānā	- To hide or hidden
Nuu	- Village
Palapala	- Soil or dirt but also mean blood
Paleali'i	- Crown or king
Pulega	- Sub-District of the CCCS
Sa'o	- Paramount Chief
Tagata	- Person(s)
Tagata-fou	- New-born child
Talimālo	- Hospitality
Tamaitai	- Family and village ladies
Va	- Space, gap, relationship



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