

# LIFE BEFORE VEGETABLES: Nutrition, Cash, and Subjunctive Health in Samoa

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Proverbs 15:17 Better to eat vegetables with people you love than to eat the finest meat where there is hate.

—Daily Bible text subscription, January 8, 2011, 6 a.m.

To celebrate Vailea's departure to university overseas, she asked her parents to host a barbecue at the beach for the young women at their church. As the women played rugby on the sand, Vailea's brothers prepared the food—since the young men would typically prepare these kinds of foods at home. Sausages and cuts of beef sizzled on plates they arranged next to basins of boiled bananas. Bananas with meat made the meal complete. The elders, including Vailea's father, a pastor, and her mother, ate first while one of the boys shooed the flies away, fanning the food. When the time came for the young women to fill their plates, Vailea and I went to sit in a fale (a small, thatched shelter). I commented that it was nice that all the young women from church had come. She replied dismissively, "they came because of the  $p\bar{a}$  povi [cow pasture]." In other words, they were not there to say farewell, but to eat her father's beef—a rare and delightful treat. Although sumptuous eating at social gatherings was expected, guests should not show up to

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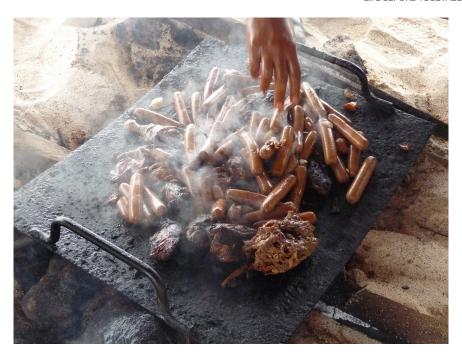


Figure 1. Meat cooking on a grill placed in the sand. Photo by Jessica Hardin.

eat or to receive gifts, but instead to give, which is why Vailea was more interested in sitting with me than with her peers (see Wentworth 2016).

I knew Vailea's mother had recently received treatment for diabetes complications, so I asked about her health. Her mother struggled to change her diet, Vailea said, though she tried to help her by cooking soup: "We always put soup in front of her with lots of veggies." But the *povi masina* (salted beef) at the table tempted her and, Vailea said, smiling, "she grabs a piece and runs away." Although it was recommended that Vailea's mother eat vegetables, Vailea felt the family served apples as though they were rich—to impress visiting congregants. She said bluntly: "Apples mean you're rich." In Samoa, apples represented a whole variety of imported fruits and vegetables considered edible non-foods good for snacks, health, and their symbolic value (Pollock 1992).

This scene is unremarkable in many ways. It shows that vegetables are polyvalent, much like the cheap meat that also features in this story (Gewertz and Errington 2010). It also reflects the daily struggles people faced as they strove to feed others with what Hanna Garth (2019, 2020) calls alimentary dignity. In Samoa, eating with dignity requires eating a meal complete with meat, starchy foods like taro or rice, and an accompanying saucy or soupy dish—these were good foods

(mea'ai lelei) (see also Wentworth 2017). Vegetables were not required to make a meal "categorically complete" (Garth 2019, 4). Yet the absence of vegetables from an otherwise complete meal troubled people like Vailea as they tried to care for their families.

Caring for someone with diabetes, Vailea had learned, requires dietary vigilance in three ways: First, families were to limit access to culturally valued foods like fatty meat, understood to be "bad" for health because of the fat. Second, families should supplement meals with vegetables, understood to be "good" for health because of their nutrients. Finally, fruits and vegetables needed to replace starchy items like rice, white bread, or snack foods, which were "bad" for diabetics. This kind of nutritional reductionism—that is, understanding fruits and vegetables as essential to health owing to their component parts—was "dangerously opaque" in practice, since some of the suggested replacements for supposedly bad foods (e.g., fruits) are in fact quite dangerous for diabetics to consume (Yates-Doerr 2012, 295; Weaver 2018). In postcolonial contexts like Samoa, cardiometabolic disorders and related forms of public health prevention are reshaping—in often confusing ways—the meaning of good, and healthy, foods. At the same time, illness prevention efforts also reshape local relations to land, reflecting the intersection of global health and development paradigms.

While public health efforts aimed to represent vegetables as sine qua non health, their mere categorization reflects biocolonial transformations in land management, consumption, and gifting that can be seen across Oceania (McMullin 2010; Muru-Lanning 2016; Stead 2016). Le'a Malia Kanehe (2014, 331) defines biocolonialism as the "extension of the forces of colonization to biological processes, genetic material and traditional knowledge of Indigenous peoples." Biocolonialism emphasizes the role of scientific policy in extracting materials and knowledge or introducing plant life that threatens indigenous environmental diversity (Whitt 1998; see also Goldberg-Hiller and Silva 2015). In Samoa, biocolonial efforts to transform land relations include instrumentalizing food as cash, while global health solutions to the conditions caused by biocolonial changes rely on individuals learning to instrumentalize food as nutrition. These are twined processes that reflect what Alyshia Gálvez, Megan Carney, and Emily Yates-Doerr (2020, 640) call chronic disaster—the ways that "global health crises" are "disasters within disasters."

These forms of instrumentalization interlink through a biocolonial logic that positions land as providing the potential for various forms of resource extraction. It is possible to see nutrition and cash as kinds of resources that can be extracted

from the land when food is commoditized in ways that align with entwined global health and national development goals to prevent chronic sicknesses while increasing GDP (cf. Foster 2002; see also Burnett 2018). Ultimately, this dual instrumentalization reveals the subjunctive quality of health conditioned, in places like Samoa, on choosing between earning enough cash to care for one's family's overall needs or ensuring family members' regular access to enough "healthy" food to fend off sickness. Vegetables thus emblematize the everyday paradoxes that Samoans face as they navigate competing forms of instrumentalization.

Reflecting global efforts directed by the World Health Organization and the United Nations' Food and Agricultural Organization to prevent conditions like diabetes, vegetable consumption has come to play a starring role in Samoan public health materials as the only means of combating chronic sickness. In particular, these materials teach the public to evaluate foods for their elemental properties (see Figure 2; Hardin and Kwauk 2019), which is an increasingly common strategy in global dietary reform. The assumption is that increasing vegetable consumption will decrease consumption of so-called "negative nutrients" like fatty, salty, and sugary foods (Nestle 2007; Scrinis 2008; Yates-Doerr 2012; Hite 2018; Warin 2018). In Samoa, these remarkably consistent messages were communicated through workplace special events, village-based outreach, media, the school curriculum, and national policies (see Figure 3).

The slippery quality of vegetables—as objects of wealth and health—reflects the particular interstices of development and public health institutions that demonstrate how public health interventions have been historically aligned with market-based development goals (Packard 2016). In Samoa, vegetables have been both essential to combating sicknesses and imbued with the potential to generate wealth for farmers and the nation, revealing an often overlooked counterpart to health metrification that links vegetable farming with local forms of metric-based development (Hardin and Kwauk 2015; Yates-Doerr 2015; Adams 2016). In the urban area, and especially among diasporic families, vegetables connoted cosmopolitan tastes and the aligned budgetary flexibility either to consume imported vegetables or to conscientiously eat Indigenous foods. More commonly across Samoa, household meals included vegetables with less frequency and ease. The stories I feature here are about families who described a commitment to adding more vegetables to their meals as if there were sufficient cash at the end of the day or week to do so.

The as if relation that dual instrumentalization generates reflects a notion of health, one that undergirds global health prevention frameworks, as a state with



Figure 2. Health promotion poster, which translates as "Amount of fat in food."

Photo by Jessica Hardin.

an ever-receding threshold (Moran-Thomas 2019; cf. Jusionyte 2018). Amy Moran-Thomas (2019, 137) connects the shifting thresholds of epidemics, exposure, and pain to the original meaning of diabetes as "one who straddles" by highlighting how many living with diabetes in Belize, for example, are "straddling multiple worlds," between "foreign encroachment and pollution of their lands that continuously displace them anew, and profound ancestral and community ties that bind them back again through the very foods that biomedical advice discourages them from eating." These paradoxes appear also in Samoa, where the very foods that biomedical advice encourages people to consume—namely, vegetables—are available only as a result of the biocolonial disruptions to land management that have caused chronic illnesses like diabetes to flourish. It is in this tangled logic that veg-



Figure 3. Health promotion materials. Photo by Jessica Hardin.

etables recursively draw attention to their superfluousness as health seemed possible before they were considered required, whereas now, when they are required, health is in decline (cf. Tomlinson 2004).

I introduce the notion of *subjunctive health* to make sense of how a feeling of unobtainable health creates an *as if* relationship to vegetables because of their potent capacities to create both health and wealth. The subjunctive is a grammatical mood that describes a way of articulating an already embedded stance—that is, a stance of wishing for, an irrealis mood describing actions or emotions that have not yet occurred (Jaffe 2009; Throop 2014). Cheryl Mattingly (2014, 51) calls on anthropologists to consider the subjunctive qualities of self, arguing that anthropologists should examine not only the actualities of everyday life but "possibilities and their ethical implications." She asks: "What are the subjunctive potentialities available in certain cultural and structural circumstances?" (Mattingly 2014, 51–52). When considering these structural circumstances in Samoa, issues around shifting land and food relations influence how health becomes a wished-for state that people enact through their consumption, adding vegetables to their meals *as if* that alone would combat chronic illness the way health promotional materials and clinical care suggest.

Susan Reynolds Whyte (2002, 175, 2005) links subjunctivity with the efforts people make to "try something that matters to them—as they undertake to deal with a problem" given the "the chanciness of health." For Whyte (2002, 186), the subjunctive draws attention to "the intentions, hopes and doubts of people looking toward an immediate future" marked by uncertainty (see also Good and Good 1994). Here, I suggest that at the intersection of development efforts to commodify gardens and global health efforts to prevent chronic illnesses associated with diet, health itself is constructed as subjunctive. To extend the notion of the subjunctive to health itself means to highlight how it is constructed as aspirational, relying on an as if logic that entangles economic and nutritional conditions. Health is impossible to achieve because of the doubling of ever-receding thresholds whereby vegetables index both the promise of wealth (despite the presence of poverty) and the promise of health (despite the presence sickness). In turn, this doubling then reinforces the dual instrumentalism of vegetables that positions improving one's family's diet against cultivating vegetables for cash trade. As these thresholds shift, their definitions change, making them all the more impossible to achieve (Moran-Thomas 2019, 90). Ultimately, the subjunctive qualities of health, positioning health in a perpetual as if relation vis-à-vis people's everyday efforts to nourish their families, serve as a mechanism by which structural circumstances and experiences of uncertainty become occluded from view.

This could be a story about health inequities, and in many ways it is. Certainly, the perceived choice between keeping the power operating in one's house or adding vegetables to one's evening meal reflects the fact that historical, global patterns shape who gets sick and who does not (Singer 1990; Carney 2015; Mendenhall 2019; Reese 2019). This could also be a story about gender, as gender shapes the ways that feeding others in Oceania depends on men's gardening and women's food preparations (Weiner 1976; Kahn 1986; Strathern 1988; Jolly 1991; Tengan 2008; Cottino 2018). And yet, as the stories I tell show, it is across economic and gendered positions that Samoans felt beleaguered by the need to add more vegetables to their meals.

The narratives that follow come from fieldwork in and around the capital city of Apia conducted between 2011 and 2012, and then again in 2017 and 2019, with farmers and working professionals. The stories revolve around the daily efforts of ordinary people to nourish their families as these moments articulate multiple layers of *as if* relations to health. The first story locates us in the family garden, examining how even within the same household, distinct theories of health inform attitudes to vegetables, one based in labor, the other in consumption. Then,

taking up stories about nostalgia for life without vegetables, I explore how memories of past environments that sustained health without vegetables create absences in people's lives today that follow from the subjunctive qualities of health. Finally, I consider the trade-offs people make when they forgo vegetable consumption as a means of caring for reciprocal relations that flow from family meals. Each of these sections examines the ways that the circular paradox of the cause/solution pair—that the consumption of commodified vegetables would solve the problem of sicknesses as if land relations had not changed—expresses subjunctive health. I begin by briefly outlining the political and economic context in which vegetables have emerged as a novel food category.

## THE PROBLEM OF VEGETABLES

Although Samoa has a long history of colonization, land was never alienated from traditional forms of governance in any wide-scale manner. During the German colonial period (1900-1914) a limited amount of land was alienated, becoming what is today called freehold land; largely this was to support exports crops of copra and cocoa beans (Schmidt 1994; Tuimaleali'ifano 1998; Meleisea and Schoeffel 2015, 2017; Droessler 2018). This approach has had lasting impact on sustaining home gardening (as most families have access to land for subsistence gardens) and in providing opportunities for commercial agriculture (as there are large stretches of land available for commercial development). Following German colonization, Samoa became a protectorate of Aotearoa (New Zealand), creating a special relationship and seeding the intense circulatory migration that shapes daily life today (Lilomaiava-Doktor 2009; Gershon 2012; see also Lee 2003; Ka'ili 2017).1 In Samoa, many working-age adults will migrate for work opportunities, thus making most families dependent on remittances to sustain their households. Remittances in turn shape prestige politics particularly around food preferences in both formal gifting relations and daily consumption. Missionary churches were also influential in developing agricultural markets. The first Samoan congregants provided agricultural offerings to the mission, including coconut oil and arrowroot, which were then exported to England to support the mission (Meleisea 1987). This form of gifting later became the basis for making public cash donations to church each week-further entrenching the importance of cash in establishing family status (see Macpherson and Macpherson 2011; Hardin 2019).

As early as the 1950s, cardiometabolic disorders began to rise across the Samoan islands (Baker, Hanna, and Baker 1986), tracking major changes that have come to shape the islands' economies: military opportunity, increased availabil-

ity of global foods, and increased work options in urban centers and the diaspora (Hawley and McGarvey 2015; McLennan and Ulijaszek 2015; see also Uperesa 2014). Although people around the world are catching up to them, since 1975 Oceanic people have experienced the largest rate of increase in adult BMI (body mass index) per decade (Finucane et al. 2011). In Samoa, the rapid rise in obesity appears particularly striking. Between 1978 and 1991, for example, the levels of obesity increased in the male population by 297 percent and in the female population by 115 percent in rural Samoa (Hodge et al. 1994). Recent statistics suggest that more than 66 percent of the Samoan population is obese, and total prevalence of overweight and obesity among women was 93.5 percent and 86.5 percent among men (Hawley et al. 2014). Accordingly, extensive prevention-based health promotion interventions and campaigns have been rolled out across the region for decades (Hardin, McLennan, and Brewis 2018). Despite these endemic efforts, rates of cardiometabolic disorders have not declined.

In Samoa, one effort to translate prevention messages into relevant Samoan categories led to the introduction of a new food category—that of mea'ai paleni to categorize fruits and vegetables as "balanced food"—by the Ministry of Health. Its use is almost entirely limited to health promotion campaigns. Foods associated with the category mea'ai paleni do not have the same social capacity as indigenous starches such as taro, breadfruit, as well as green banana, which may be taxonomically classified as fruits and vegetables, respectively, but are not culturally categorized as such in Samoa. Instead, they are referred to as mea'a'ano, which signifies the fleshy part of animals, including humans, and is a shorthand for substantial food; such foods are thought to be essential for developing bodily strength. Fuala'au, the Samoan term for fruit prior to mea'ai paleni, also refers to medicine/ pills; this term is not typically associated with vegetables either. Indigenous foods that are categorized by Samoan public health workers as vegetables, leafy greens in particular, were culinarily essential to one Sunday dish (palusami, taro leaves baked with coconut cream) but are otherwise disregarded as leaves with little value. My own adopted sister would tease me, probing to see if I could possibly be full after I had prepared my typical evening meal of rice with leafy greens.<sup>2</sup> Stand-alone vegetables, most often introduced items like tomatoes, cucumbers, or pumpkins, were not categorically recognized as a nutritional food group; instead, they were treated like a garnish, ancillary to an already complete meal. When people talked about putting together a meal, directing the person who was shopping or harvesting, they would ask for specific items like watercress or cucumbers, never referring to the category vegetable.

Most families maintain some kind of subsistence garden, but even if a family were to grow cucumbers or pumpkins, making them "free" to consume, such foods might prove more valuable as a source of cash than as sustenance or nutrition. Preparing homegrown vegetables in a meal meant they were not needed as cash. This kind of calculus is anathema to public health workers who bemoaned an imagined fisherperson selling their freshly caught fish only to buy tinned fish (see Hu 2016). While incomprehensible to a nutritional logic that seeks to maximize personal health, the instrumentalization of food as cash makes such choices inescapable. In navigating these dueling forms of instrumentalization, where choosing nutrition comes at the expense of other forms of sustenance, the subjunctive quality of health, as I will demonstrate, becomes clear.

## THE PLANTATION IS PEACEFUL

Tanu, my adopted father, was a fit man, in his mid-seventies when I lived with him. The plantation was a respite for him (*plantation* being the English term used to describe family gardens).<sup>3</sup> When I first moved in with his family, he and his wife, Lulu, slept in the main room of his house on mats during the week. They had a bedroom, with a bed, but it was small and hot. So, each night, they would lay down their mats and hang mosquito nets in the front of the house, which was without windows and open to the elements. When I returned a year later, Tanu was sleeping at the plantation during the week and had taken over the only remaining wooden structure on their land—their original house (a symbol of how much their life had changed)—where he would sleep on the weekends, a place where he would read his Bible, cooled by the wind coming off the ocean just meters away.

I never found out why Tanu began sleeping in the wooden *fale*. However, I did notice that Lulu began to occupy a more central authoritative role in the household. She managed the church donations, remittances from Aotearoa, family requests, and contributions for the school building loan. While they were both titled family leaders, family members visited in the evening to see Lulu, not Tanu.<sup>4</sup> Her title was more powerful. He receded to his own place. Tanu said he went to the plantation to be with God, to sit in the dark quiet, free from electricity and the light of the village, and talk with God (Hardin 2020). He could avoid distraction.

Tanu had cultivated this land, his father's, as a younger man, but then his brothers moved overseas, Tanu malingered plantation work, and cultivation stopped. When he married Lulu and built a house in her village, he resumed cul-

tivating his father's plantation. The labor was a sign of his commitment to becoming a husband and father, as he had been moving between households for some time—living with women, having children, and moving on to do the same with others. His labor was also an expression of service, historically rewarded with a family title.

Being present, especially at night, was important to establishing his authority over the plantation. His presence warded off thieves who might come to steal taro in the darkness. Recently, he built a small wooden house on the plantation, giving him a place to sleep (see Figure 4). His construction efforts also tested the response from those cultivating neighboring plantations; if he built unencumbered, he could advocate for his brother-in-law to build a church on the adjacent land. This church was for people who lived *kua* (in the back), a shorthand derogatory reference to people who were poor and also backwards (Shore 1982). The church was Pentecostal, aimed at saving the souls of those who lived *kua*. Working and sleeping on the plantation allowed Tanu to create his social world, a world expressed in his moral choice to return to cultivating his family's land.

Tanu did not turn to cultivating vegetables, specifically cucumbers and tomatoes, until recently, and then only occasionally. He bundled them to sell to the food stall on the main road of his village. The real reason he cultivated the plantation was for green banana, breadfruit, and taro. He would bring baskets' full home each week, on Saturday before church for Sunday lunch. His sons would prepare coconut cream for boiled bananas and taro during the week, but the <code>umu</code> (earth



Figure 5. The house Tanu built at his plantation. Photo by Jessica Hardin.

oven) was for Sunday preparations. As elsewhere in Oceania, exchanging the foods grown in these gardens entails giving away the best, largest root crops as an essential way to create relations with important others (Young 1972; Munn 1986; Battaglia 1990; Thomas 1991). After the *umu* was complete, Lulu would pick through the roasted items by hand, making choice selections for the pastor and his family. If there were no large taro, she would scold Tanu for bringing such pitiful crops.

Despite all the pride that Tanu felt—in his land, his expansion—he only brought me to the plantation once. Plantations were spaces for men, especially young men, to work beyond the regulating gaze of village life (Shore 1982; Refiti 2017). When Tanu did bring me, it was to interview his brother-in-law, the pastor who was overseeing the church construction. Lulu came to the plantation on this day as well, a rare instance. She was embarrassed that I would see her in her dirty work clothes but also wanted to accompany me. She avoided meeting my gaze. Their sons picked up baskets of food, loaded them onto the pickup, and within a couple of hours I was loaded up with those baskets as well.

Tanu's story is typical of Oceania in that his plantation was a place for gendered labor that enabled successful participation in ritualized exchange. His labor created space for family expansion, making the family known within the surrounding landscape. His labor created food items that sustained his wife's obligations in her village and church, as well as his own household. His labor kept the land within his family's control. If he didn't cultivate it, neighboring farmers could encroach, shrinking his jurisdiction. If the objects of plantations—starchy crops—were materials for social growth, as expressions of generosity and obligation, the land itself was productive of sociality. These kinds of places contracted and expanded with (usually) men's labor.

Vegetables, too, could grow in plantations, but as many would tell me, they were "fickle" and "unpredictable." They did not always grow well, and when the market flooded with cucumbers, people could not sell them for a decent price. Many people I talked with felt the effort required was not worth it because, although cucumbers and tomatoes were fine items to add to soup—a soup of store-bought chicken and onion, say—the soup was complete without them. Vegetables alone could not sate hunger. Tanu could supplement his household meals with cucumbers, for their nutrition, but instead he grew them to sell. Specifically, he grew them to support much needed supplies for his grandson. Tanu's daughter was the only person in the household that earned a salary, working in town; her infant son, therefore, needed formula to nourish him while she worked. Tanu's cucumbers provided the cash needed to provide this essential nourishment for his grand-

son, which explains the pride he felt when one afternoon he asked me to take a photo of them with the bundles cucumbers he had grown to be sold at a vegetable stall down the road (see Figure 5). Vegetables were an absent presence because he wanted them for his family's health and yet they proved more valuable as cash because cash could provide multiple forms of nutrition and sustenance to his family.



Figure 4. Tanu with his grandson. Photo by Jessica Hardin.

Even though Tanu would sell most of the vegetables he grew, he still felt that the family needed to eat more of them. When he did keep some vegetables for household consumption, he would admonish his granddaughter and his wife to eat more of them. "Eat vegetables for God," he would tell them when they picked over the cucumbers in the soup bowl looking for the remaining chicken. Reminding them they needed to be healthy for God further reinforced the idea that vegetables were morally superior, even if they did not sate (Throop 2010). Vegetables were suspicious, though, because he also felt that his plantation should be sufficient to meet his family's needs. Indeed, for Tanu the plantation was enough. He rarely ate the vegetables he cultivated, even while chastising his family for avoiding them. Starchy foods were enough for him, he felt, because he was made strong from his

laboring efforts to sustain his family. His wife and children did not engage in that same kind of labor and fell sick because of it; they needed vegetables.

Vegetables straddle the threshold between "scarcity and excess" (Moran-Thomas 2019, 137) as objects required to live healthfully in a world disrupted by biocolonialism, their absence making scarcity felt. Vegetables in Samoa reflect excess in that they are required for health but not for satiety. Vegetables proved a different kind of excess for different people in Tanu's household. For Tanu, vegetables made for a welcome excess that could be converted into cash. For his wife and granddaughter, vegetables were an unwelcome (in being unpalatable) nutritional excess that could yet ensure a healthful future. Both kinds of excess speak to Joseph Dumit's (2012, 201) description of how pharmaceutical industries create surplus health—that is, creating future health by consuming pharmaceuticals to reduce risk. Surplus health also animates nutritional logics, where future health depends on accruing vitamins and nutrients through vegetable consumption. When this nutritional logic intersects with the commodity quality of vegetables, future health becomes inextricable from the ability to accrue health through the consumption of would-be commodities like vegetables. However, for people like Tanu, who related to the land in deeply spiritual ways and gardened to sustain his obligations while selling vegetables to earn cash, health was tied to a memory of a life without vegetables, a time before they were necessary to nourish his family. His health did not need to be accrued through objects like foods or pharmaceuticals because he was living as if health were derived from his labor, not his consumption. In contrast, the health of others in his household was imperiled by not laboring on the plantation, creating a health deficit that the consumption of vegetables could rectify. Tanu's wife and granddaughter were to eat vegetables as if that were enough to mitigate the risk of disavowing household labor.

Here, the subjunctive describes the intersection of a backward-looking health (from a time before vegetables) and a future-oriented health (accrued by way of healthful commodities) making health seem elusive if not impossible to achieve because of its idiosyncratic conditions. The contrasting relations to vegetables cultivated by Tanu and by members of his family as they navigated everyday thresholds between health and wealth, nutrition and cash, exemplify how health comes to be framed in the subjunctive mood, ever subject to further contingency.

## LIFE WAS CHEAPER. WE WERE HAPPY.

Situated in the recently renovated, air-conditioned lobby of a historic hotel built by a famed *afakasi* woman (part Samoan, part European), the café was an

easy place to meet working professionals. Offering coffee, tea, and sweets, the menu was generic, with no sign of connection to the urban markets just a short walk from the hotel doors. I met Tai and Sisifo there to interview them about their experiences of eating and feeding their family. Tai was a successful CEO at an essential government ministry. Taking the lead, Tai spoke English with ease, although, as she said self-consciously, she "only" attended the local university. Sisifo, her husband, was at least a decade older and spoke Samoan. I asked them how the foods they ate had changed over the years. Tai shared that, close to forty years ago, she grew up "poor." "Not like living in a shack," but without cash. In fact, she clarified, it wasn't really poor. They lived the way everyone did. The family grew everything they needed, "making use of what the land gave us." Vegetables were not required, and they only occasionally ate meat. Only two drinks existed—laumoli (orange leaf tea) and koko (cocoa). Tai was wistful. Although people today often communicated hunger and deprivation by saying, "we only eat taro," indicating a lack of cash to complete their meals with meat, she used the same phrase to express the completeness of her past life without cash. Now, she felt that as a child she had been healthier than her own children, who refused vegetables and were constantly battling viral infections. In the past, the household and plantation together provided enough. The place was safe and nourishing. Today, despite her career success and relative financial stability, Tai felt she could not spare the money to add cucumbers, tomatoes, or pumpkins to their dishes of noodles or bowls of soup.

Shifting the conversation, Tai said: "I loved those days; you just ate what was given to you from the land without having to hunger. Everyone was like this. All of us. So skinny." Everyone had enough and their bodies reflected this. The land was also hospitable. "You could walk on the ground without having to worry about pricking your feet, developing a rash," she said. "We were running around barefoot. Our parents couldn't afford dinner or shoes. Nowadays you don't see kids running around." They lacked things considered essentials today—a large evening meal or shoes. Yet the ground was safe for walking. Kids were free to play. Tai said, "We were happy. We did what we wanted. We had no fear of getting sick." Contrasting past with present, Sisifo added what I heard time and again: "Now we have all the sicknesses." He felt everything—from diabetes to asthma to the flu—was linked to eating foods that did not come from the land, food with additives, cheap foods that should be special (e.g., meat, cake) but were now commonplace (Gewertz and Errington 2010). For Sisifo, food that came from the land felt trustworthy—it did

not have the antibiotics or pesticides that made chickens, for example, strangely large (Derby 1998; Solomon 2016; Lamoreaux 2019).

Sisifo was trim and broad shouldered. The skin of his face was taught, darkened from working in the sun on his plantation. Reviving freehold land behind his house that had not been cultivated in many generations, Sisifo cultivated a small area to grow bananas, breadfruit, and taro. Yet without access to the resources needed to clear the land of old trees, it remained too shady to grow vegetables. His daily work included cultivating starches, shopping, and preparing household meals. Similar to Tanu, Sisifo's role as a father and provider was intimately tied to the cultivation of family land. "Working the plantation makes me strong," he said proudly. "I'll be sixty-five years old and I'm still working the land, doing everything." Even so, Sisifo was nostalgic for days past. "I still prefer the old days. I had better days in my life. I used to be able to grow mangoes, bring them down to the hospital, and sell them for one hundred  $t\bar{a}l\bar{a}.^5$  That money would last for a week or two. Now, one hundred  $t\bar{a}l\bar{a}$  is nothing," he said. "It doesn't cover one trip to the market. Life was cheaper in those days." Maintaining a plantation in the urban area was necessary but not sufficient to provision the household. Indeed, on many days the family would eat dinners of instant noodles with chicken, served with taro bathed in coconut cream—with no vegetables. These were weeks when family obligations were particularly high, when they had to send money to relatives to help with emergencies or to participate in fa'alavelave (life crisis exchange events) (cf. Gershon 2000). Vegetables were the first thing to go when cash was needed elsewhere.

The stories Sisifo and Tai both tell are nostalgic, which on first pass articulates "edible memory," that is, the ways that foods offer people embodied connections to shared pasts (Garro 2000; Jordan 2015; see also Trainer et al. 2020). Certainly, such memories articulate an "unsolvable longing" for days past, but they also evoke the biocolonial disruptions to environments that have made those past lifeworlds impossible to inhabit (Jordan 2015, 36; cf. Garth 2013). Biocolonial disruptions refer here to the creep of cash requirements for full participation in domains of life that prior to colonialism had only necessitated family-organized land cultivation. Stories like Tai's and Sisifo's were stories about the diminishment of their environments—stories that "fill in the gaps created by change and loss" (Gálvez 2018, 35). These memories, though, were not marked by the warmth typically associated with food nostalgia, nor the "defiance" or "pride" often associated with serving nationalized meals (Wilk 1999, 247); instead, the memories beckoned the experience of absences, of missing vegetables, cash and nourishing environments.

Much like the imperialist nostalgia described by Renato Rosaldo (1989, 108), where "people mourn the passing of what they themselves have transformed," vegetables evoked memories of a time before they were required—before they were a food category at all. In other words, the dual instrumentalization produced through global health and development discourses about vegetables valorize lifeworlds associated with times prior to colonialism as times to which one might return. But, in effect, narratives about vegetables communicated the impossibility of this through the subjunctive, through the *as if* relation that people engaged when they talked about eating them—*as if* vegetables were both plentiful and essential to a proper meal, *as if* people were not healthy before vegetables were introduced, *as if* it were possible to sustain oneself through the family garden alone.

## I WOULD ADD A LOT OF VEGETABLES.

When Ana left Samoa at eighteen to attend university in Aotearoa, she had not expected to change the way she cooked as "drastically" as she did. With regular access to novel ingredients and cooking instruction available via YouTube, she "learned how to cook." Since returning home at thirty, with her husband and children, she moved in with her parents, where she struggled to shape household meals. "I think the biggest issue we've had since moving home is with food. Just making sure we have vegetables and some kind of healthy diet. We feel it is very much lacking in our wider family." She went on to describe her natal family as a "rice family," which meant she had to persuade them to switch to eating bananas and taro as their daily staple instead. "And the chicken," she'd say, "there's just so much cheap, imported chicken." Ana seemed overwhelmed by the sheer predictability of her new normal diet. Fatty chicken and rice were items she never became accustomed to, since her family only began eating these after she had left the household as a teenager. As "agents of social differentiation or of commonality," these foods gave her pause because they made her think about her family members in new ways (Gewertz and Errington 2007, 496). Such foods did more than indicate the ways she had changed since leaving her family home; rice and fatty chicken also came to indicate what her diet lacked. As Deborah Gewertz and Frederick Errington (2007, 497) note, foods like cheap meat "can lead people to think critically about the broader historical relationships" that situate "their position in the world." When Ana consumed now familiar foods like rice and fatty chicken, she came to reflect on the absences at her table created through global, historical relations that have made those foods desirable but also dangerous. Foods like vegetables were conspicuously absent, revealing how her relation to the world shifted

as she moved through the diaspora. The sense of something missing was a function of subjunctive health, *as if* filling her table with leafy greens would mean that her family could be healthy.

After suggesting that she and her husband were trying to "train the family" to re-appreciate the staple foods of her childhood, she revised her words, saying instead that they tried to make "suggestions" about transitioning from rice to root starches and reducing chicken fat. She suggested that the family boil the chicken twice to remove the fat. Her husband, whom I also interviewed, mentioned this technique more than three times during an hour-long conversation. Ana wanted to eat salads, though she felt it was enough that her family integrated some vegetables into their meals—vegetables she would purchase and bring home. Salads, though, she could not convince her family to prepare.

Part of the reason they did not have as much success as Ana would have liked in modifying the family's meal preparation was because once a day, on most days, the family exchanged a few portions from the main meal with neighbors. Ana and her husband had initiated this process as a way to practice forms of reciprocity they remembered from childhood. This sharing with neighbors, though, was not the norm in urban areas. Yet it was a memory shared by many that Ana and her husband were committed to recreating. After all, they had chosen to raise their children in the islands so they could experience what made "island life" distinct from Australia or Aotearoa. It was precisely this kind of sharing that made Ana and her husband feel they had made the right choice to "come home."

Yet the sharing came with its tensions. Ana's mother did not want Ana to spend money on salad items—as if they were wealthy—and did not want to share these kinds of foods with neighbors for what it might say about them. The three households they exchanged food with always served the same thing—chicken, starches, rice, noodles, while the one fisherman always offered fish. To offer something different, even if it were economically and nutritionally desirable, would be to make the family socially visible in their difference (Garth and Hardin 2019). Ana and her husband, though, desired more vegetables. They "craved" them day to day as they tried to integrate their preferences into family meals, since there were no opportunities for private eating. Some vegetables could be integrated without much notice—cucumbers in soup, for example. Others, however, would be disruptive. In Ana and her husband's case, it was not so much their expense (though that was a consideration) as the signification of their expense that caused the disruption. Ana gave up on trying to incorporate these foods, which she worried about for her children—fearing they were losing necessary nutrition—but did

so as a way to demonstrate care for her parents and their family's position within their village. For others, like Vailea, vegetables signified sickness and were disruptive as a result of the ways that they communicated the privilege of health. They were ostentatious in the household because they indicated that cash was used to purchase them, cash gifted to them from their congregation, on which they relied entirely for support.

Salads laden with leafy greens and other store-bought vegetables also cast a shadow of foreignness onto people like Vailea and Ana, as indicators of their time abroad, adapting to foodways associated with whiteness (Slocum 2007; Guthman 2008; Hardin 2015; Hobart 2017). To eat salad was to eat as if one were white. When Vailea returned to her parents' house after her studies, her duties in the household returned as well, although she had a government job and commuted an hour each way to work. As a young unmarried woman, she was expected to care for her parents and younger siblings (duties temporarily relieved to study overseas), including daily dinner preparations. When she was away, her father had begun cooking for her mother and more strictly enforcing her diet to help her better manage her diabetes. When I asked Vailea what had changed when her father started cooking, she said, "they used to eat a lot of fried food. Not anymore. Now mom's very strict with her food. We just have to make sure we have soup, vegetables, and fruits, and all that stuff. She doesn't drink soda. I guess that's something. We drink a lot of water." Her father realized he loved cooking. Even now that Vailea had taken over the cooking, it was her father's responsibility to ensure there were vegetables, fruits, and fish available for his wife. "My dad takes care of her very well," Vailea would say.

This attention to vegetables, however, was limited to Vailea's mother, because her father's position as a pastor meant that the family received daily food gifts—always fried food, Vailea noted. Did the church families know that the *faletua* (the pastor's wife) ate a strict diet of fish and vegetables? No, they did not. The family felt they could not require others to offer vegetables or fish because of their expense; they could not delimit what was an appropriate gift. They also did not want the congregation to think that the *faletua* was weakened by her sickness, as a specialized diet might suggest. The food, then gifted *as if* there were no illness in the house, would be eaten by everyone but the one most in need of special care and attention. Vegetables thus doubly signified the presence of sickness and the privileged position of striving for health.

The polyvalent meanings associated with vegetables make the desire to add vegetables to one's meals more than a performance of virtue, as is increasingly

typical of hegemonic notions of healthy eating promoted around the globe (Garro 2010; Brewis et al. 2011; SturtzSreetharan et al. 2021). It is precisely their polyvalence that places paths to health at odds with other forms of well-being, most often associated with daily forms of reciprocity, and that makes vegetables impossible to ignore. Salad, specifically, and vegetables, more broadly, are "bound up in colonial histories, in which diet, labor and race help determine the parameters of what is delicious" and, as is evident here, what is healthy (Hobart 2017, 135). The social work of vegetables thus "locate[s] and define[s] people relative to a range of others, both local and global," in ways that make health an ever-present state to be achieved as if one could disregard the land-based, reciprocal practices associated with living without cash (Gewertz and Errington 2007, 504).

## SUBJUNCTIVE HEALTH

During my fieldwork, the daily newspaper ran a series of articles explicitly intended to raise the status of farmers, with headlines like: "Buying a Car with Vegetables" (Maiava 2016) and "Living off Vegetables" (Sanerivi 2016). In one article, the reporter told the story of one woman who moved from the main road to a more rural place inland—kua, the opposite of the presumed desirable direction. She said, "Life with vegetables is great. We have no issues here at our house; we have running water and we have electricity." Another explained what I heard from many: "I know that the plantation is where the money is for many families. The problem with us in Samoa is that not many people want to work the land. Growing root crops is alright, but if you want fast money then you should grow vegetables." Vegetables were valuable because people needed them; farmers needed them as cash, urban consumers needed them for health. Tanu and Sisifo both felt their plantations should produce enough food for their families, but because their families did not labor alongside them, they needed more. The "more" they needed was what Tanu and Sisifo could not produce—enough vegetables to provide needed nutrition to combat chronic sicknesses associated with urban life. Vailea and Ana had become accustomed to a diet rich with vegetables after living overseas and felt it was essential to care for their families by supplementing the family meal with these items. Yet they lived a life without vegetables to nourish the reciprocal relations that flowed from living within a harmonious household. Their stories reflect what I heard from most of the people living in and around urban areas, that vegetables were elusive. As both required and unnecessary, expensive and free, vegetables seemed just out of reach.

To choose to add vegetables to a family's diet meant to expend cash, whereas to sell them meant to forgo their nutrition: one must choose. A similar set of contradictory conditions is unfolding in Mexico, according to Alyshia Gálvez (2018, 8), where the rising popularity of "Mexican food" as a global cuisine is mirrored in the fact that average Mexicans are finding traditional foods increasingly inaccessible. The growing imperative to include vegetables in one's meals—and related ideas about cosmopolitan responsibility—is directly connected to the mechanisms by which gardens have become filled with capitalist potential. At the same time that Samoans are encouraged to see their gardens as untapped resources, as sources of cash, it has also become more difficult to grow Indigenous foods most closely associated with health.

Across these stories, vegetables figure as both surplus and a noticeable absence. These seemingly contradictory experiences resolve when we understand health as subjunctive. The subjunctive quality of health relies on multilayered fictions that one should eat vegetables, as if that alone would combat the widespread experience of cardiometabolic disorders. This as if relation is also ever receding because it is based in a consumptive model of health that positions nutrition as a resource to be accrued. There is always more nutrition to be consumed, more weight to be lost, and more muscle to be gained. Yet with health defined by the consumption of commodities like vegetables, this ever-receding threshold can only be met at the expense of other forms of care. Adding vegetables to one's meal, as health-promotion materials commonly suggest, is not a neutral practice. Adding vegetables further enmeshes people in capitalist logics inherent in global health approaches to nutritional advice. The dangerous fiction involved in this as if relation to vegetables, specifically, is that it relies on a propositional notion of consumption that suggests that more vegetables in a family meal would keep people from falling sick. The danger in this fiction is that vegetable consumption alone cannot undo the historical, biocolonial reshaping of land relations and related forms of reciprocity that make vegetable consumption necessary in the first place.

The stories I tell here show how people stumbled over the fact that vegetables constituted a required salve for the very conditions of biocolonial disruption that have made their consumption necessary. In turn, vegetables indexed foreignness and also the ability to recover what was lost in foreign transformations of Indigenous Samoan lifeways. While Samoa is not a settler state, this paradoxical logic reflects some of settler colonialism's hallmarks—settler colonialism is a land-centered project that narrows the ontological scope of how humans relate to land (Wolfe 2006; Kauanui 2018). The subjunctive quality of health that cre-

ates as if relations to vegetables shows land-based assumptions embedded in global health frameworks that link health with development and productivity (cf. Howard 2018). In everyday life in urban Samoa, however, vegetables appeared strange because their instrumentalization erased the social potentialities of foods grown from family gardens. Just as settler colonialism relies on eliminating "the native as native" (Kauanui 2016; emphasis original), dual instrumentalization requires the elimination of the spiritual, embodied, and social potentialities of Indigenous foods from customarily controlled lands. Ultimately, dual instrumentalization constitutes a process of estrangement, making objects of the land commodities uneasily incorporated into everyday life. Dual instrumentalization does not fetishize—that is, vegetables are not fetishes that "can make a range of important things happen for differently located people" (Gewertz and Errington 2007, 496)—but instead, by estranging vegetables from land relations, people long for vegetables as if they were fetishes.

When vegetables move between categories—free or expensive, required or surplus, nutrition or garnish—health becomes an uncertain project. Medical anthropologists have long explored how people create health and well-being in contexts of unequal resources, seeking care by navigating the contingencies of life. The stories told here show how at the intersection of global health and development discourses, a consumptive model of health emerges that is defined by its subjunctivity. The resulting as if relation is ultimately a mode of erasure that occludes the meanings and materialities of the health objects positioned as unquestionable salves. The as if logic of subjunctive health in practice remains conditional because of the fictions on which it rests-if only vegetables were fungible with cash, if only vegetables could heal diabetes. The fiction is that commodified foods can heal widespread disease, when to heal diabetes and the host of other related chronic cardiometabolic disorders would mean to change the conditions in which vegetables have become necessary in the first place. This requires taking seriously that life was once, and could again be, possible without vegetables through an embrace of the memory of a time otherwise, a time without chronic sickness or the constant need for more cash, a time when people shared their foods and felt nourished as a result.

## **ABSTRACT**

Since the 1950s, Samoa has faced rapid changes in food systems and labor practices, creating an environment in which health conditions such as diabetes touch every individual. Through an ethnographic analysis of Samoan people's attitudes toward

the novel food category of vegetables, this article explores how intersecting health promotion and development discourses instrumentalize vegetables as a source of both health and sickness, and as signs of poverty or wealth. This dual instrumentalization simultaneously positions vegetables as objects of trade that may generate wealth for farmers and as objects of health that may accrue nutrition to combat chronic sickness. I introduce the notion of subjunctive health to analyze people's preoccupation with vegetables, even when these are rarely eaten. In Samoa, subjunctive health frames the consumption of vegetables in several ways: as if vegetables were both plentiful and essential to a proper meal, as if people were not healthy before imported vegetables were introduced, as if it were possible to sustain one's family through gardening alone. The subjunctive highlights how health is constructed as aspirational, relying on an as if logic that entangles economic and nutritional conditions. It operates through the daily acts of nourishing one's family to erase from view those biocolonial processes that generated an environment in which chronic diseases flourish. [biocolonialism; vegetables; prevention; Oceania; health; subjunctive; care; nourishment]

## NOTES

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- Samoa's colonial history contrasts with that of American Samoa, which remains an unincorporated territory of the United States.
- 2. I use the language of adoption in reference to two families with whom I lived throughout my fieldwork periods, recognizing that using fictive kin relations to describe relations with interlocuters has a long history in anthropology's uncritical and colonial past. I do so following what is normative for cultural anthropologists working in Oceania, to honor specific sets of relations that I became entwined in over the course of a decade (West 2016; Aini and West 2018; West and Aini 2018; Wentworth and Kalsrap 2020), positioned as a child within a family that was then responsible for my care and proper socialization (Throop 2010). My continued use of the term reflects my ongoing commitments to those particular families and to the maintenance of reciprocal relations.
- 3. People describe gardens as fa'ato'aga (a garden for growing everything) or ma'umaga (a garden dedicated to taro).
- 4. Village life is governed by a group of titled family leaders, known as matai. These titles are bestowed on individuals for their histories of service to the family, including agricultural service, and increasingly to overseas family members for their service through

- remittances. For a more in-depth analysis of Samoan *matai* governance, see Alessandro Duranti (1994).
- 5. In 2020, one hundred tālā was about forty U.S. dollars. This rough conversion was the same during fieldwork in 2017. One hundred tālā would not be sufficient to cover household groceries for an urban family for a week.

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