

Perceptions and Use of Complementary and Alternative Medicine in American Samoa: A Survey of Health Care Providers

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Abstract

Purpose: American Samoa health care providers' use and perceptions of common complementary and alternative treatments, with a focus on traditional Samoan healing for women diagnosed with breast cancer or cervical cancer, was investigated to inform the development of the first locally produced women's cancer prevention radio drama and the first cancer patient navigator program in the US Territory.

Methods: A 10-item self-administered survey was completed by a total of 47 health care providers employed at the Lyndon B. Johnson Tropical Medical Center and the American Samoa Department of Health Breast and Cervical Cancer Early Detection Program.

Findings: Comprehensive health care is limited in American Samoa, especially cancer treatment. Dissatisfaction or disconnection with Western medicine leads some patients to seek complementary or alternative health care from traditional Samoan healers who provide massage and herbal remedies. Health care providers in American Samoa use and recommend many complementary and alternative medicines (CAM) popular in the United States. The most common CAM recommended to patients is exercise (81%), diet modification (81%), prayer (36%), massage (36%), support group participation (26%), and relaxation techniques (19%). Traditional Samoan healing methods are unique CAM that 19% of mainstream health care providers have used, and 17% have recommended these techniques to patients. Most survey respondents believe traditional Samoan healing methods have a harmful effect on patient quality of life and 72% have advised a patient to discontinue using this type of CAM. While most providers feel that the majority of American Samoan patients use traditional healing methods to complement Western healthcare, 55% are aware of a breast cancer or cervical cancer patient utilizing these techniques as an alternative to hospital treatment. A provider's ethnicity, gender, age and years of professional experience appear to be indicators of different CAM method endorsement and patient consultations concerning CAM use.

Conclusions: CAM use is likely to continue in American Samoa as long as health care deficiencies exist. Most American Samoa health care professionals accept common CAM in the United States, but local providers are more likely to endorse traditional healing methods than their mainland counterparts. Little is known of the impact different CAM have on quality of life, especially amongst cancer patients. The majority of American Samoa health care providers request more information about traditional healing which would facilitate more comprehensive medical documentation and patient care.

Introduction

Cancer treatment is limited to surgery in the United States Territory of American Samoa. Patients who can afford mainstream treatment are referred off-island to Hawai'i for chemotherapy or radiation. Those who cannot afford off-island care remain in American Samoa. In both cases, patients may visit a traditional Samoan healer, a *Fofo* or *Taulasea*, for complementary or alternative therapy. The use of Samoan healers is believed to be motivated by lack of affordable treatment or a distrust or dissatisfaction with hospital care. This results in a competition between the two medical systems with some cancer patients foregoing mainstream medical treatment and utilizing only traditional methods.

In 2009, the American Samoa Community Cancer Coalition investigated local health care providers' use and perceptions of common complementary and alternative treatments with a focus on traditional Samoan healing for women diagnosed with breast cancer or cervical cancer. In particular, the study aimed to determine which common complementary and alternative therapies health care providers endorse; their awareness of cancer patients utilizing traditional Samoan healing methods as complementary or alternative treatment; and their opinions of the safety of indigenous medicine. These and other research findings informed the development of the first locally produced cancer prevention radio drama, *Tasi le Ola* (One Life) and the first cancer patient navigator program in American Samoa.

Complementary and Alternative Medicines

Complementary or alternative medicine (CAM) for cancer is any practice or product that is not thought of as standard medical care based on scientific evidence such as surgery, chemotherapy or radiation therapy. Complementary medicines are used along with standard medical treatments whereas alternative therapies are scientifically unproven remedies and techniques used in place of standard medical treatments.¹⁻⁴ Most patients use complementary therapies along with standard medical therapy, while a minority utilizes only alternative treatments.^{3,4} Complementary therapies have been found to improve patient quality of life,^{1,3,4} patient satisfaction,^{1,4} and the physician-patient relationship,^{4,5} whereas alternative therapies may conflict with mainstream treatments^{1,3} and be potentially harmful.^{1,3-6}

The use of CAM and CAM practitioners is rising in the United States.⁷ Robinson and McGrail⁸ report that over half of all patients requiring health care use some type of complementary or alternative therapy. Cancer patients are more likely than the general population to use CAM,⁹ especially those diagnosed with breast cancer.^{10,11} The prevalence of CAM use amongst breast cancer patients in the US is as high as 80%.¹² The most common reasons US cancer patients utilize CAM therapies are to reduce psychological distress;^{1,3,4,9,11,13} improve quality of life;^{3,4,11-13} gain more control over personal health;^{1,4,7,11,13} manage symptoms and side-effects of treatment;^{1,4,9,11} prevent cancer recurrence;^{3,9,11,13} and to boost the immune system.^{11,13}

Traditional Samoan Healing as CAM

Samoan healers can be classified as CAM practitioners who practice traditional massage (*Fofo*) or who prescribe herbal remedies and have some training in diagnosis and treatment of illnesses of natural or supernatural origins (*Taulasea*). Many traditional Samoan healers are women who treat specific illnesses commonly afflicting women and children.^{14,15} Traditional Samoan herbal remedies have been documented but the medicinal value of most catalogued plants has not been scientifically proven, and dosages are dependent on the illness and the particular healer.¹⁴ Some herbal remedies have been found to cause harmful reactions in cancer patients receiving anesthesia for surgery or undergoing chemotherapy.⁴ Conversely, the benefits of massage therapy are well documented⁴ and include

reduced anxiety,^{4,16} pain, nausea, and fatigue,⁴ and improved immune function, sleep patterns, and quality of life.¹⁶

Some researchers have found CAM use to be motivated by a distrust or dissatisfaction with mainstream, Western medical care and institutions.^{1,7,9,17} According to a 2007 American Samoa health insurance feasibility study¹⁸ commissioned by The Office of the Governor, a large percentage of the population is dissatisfied with current health care services offered at the Territory's only hospital, the Lyndon B. Johnson Tropical Medical Center (LBJ), citing numerous grievances including no medication or treatment available, long wait times, crowding, expensive fees, and poor quality of care. These criticisms, coupled with 61% of the population living below the US Federal Poverty Level,¹⁸ may encourage use of CAM therapies provided by traditional Samoan healers.

CAM use may not always reflect negative attitudes towards conventional medical treatment, but rather an inclination towards self-care,^{7,13,19} holistic treatment,^{7,19} or a desire for therapy compatible with cultural beliefs.^{6,19} In a study of 1,834 Samoans residing in American Samoa, Hawai'i or Los Angeles, 41% had previously sought care from a traditional healer for an illness and of these 67.7% report they would see an indigenous healer for a tumor.⁶ Furthermore, most Samoan women age 40 and older with no personal history of cancer, despite having positive to neutral experiences with Western health care, report they would use traditional Samoan medicine as a complementary or alternative cancer treatment.²⁰

Aitaoto, et al.²¹ explain that Samoans differentiate between *palagi* (white person) illnesses, those that can be explained and cured by Western medicine, and *ma'i Samoa*, illnesses that require traditional Samoan healers. Samoans use traditional remedies and traditional healers for all but the most serious illnesses²² often to treat symptoms. Culture-specific beliefs concerning the interpretation of medical conditions play a key part in determining the choice of appropriate treatment and type of health care provider needed, and they may also hinder cancer screening. Mishra, et al. found that women who said they would seek treatment from a traditional healer if diagnosed with breast cancer were less likely to have a mammogram.²³ Many biomedical conditions can be interpreted as *ma'i Samoa* and traditional healers are sometimes sought for conditions that require opportune evaluation by a trained medical professional such as undiagnosed cancers. Nearly a quarter of American Samoans believe that traditional healers can cure cancer²⁴ so they may be utilized prior to, concurrently, or in lieu of mainstream cancer treatment with potentially serious consequences for morbidity and mortality.⁶

Doctors and CAM

Most US physicians feel they lack knowledge of CAM safety or efficacy²⁵ so it is not surprising that less than one quarter of CAM users report receiving information about complementary treatments from a physician or nurse.³ Lack of CAM knowledge leads the majority of doctors to discourage its use; however 81% of physicians want more education on CAM therapies.²⁵

Personal experience is a predictor of CAM acceptance and more frequent patient referrals amongst US physicians. The Jump, et al. study found that although most physicians feel the majority of CAM therapies are not legitimate medical practice, two-thirds had referred patients for at least one complementary therapy. As CAM is becoming more mainstreamed into the medical school curriculum,

physicians practicing less than 10 years are more likely to feel most complementary treatments are legitimate. The majority of physicians feel that massage can be an effective CAM whereas less than one-quarter regard herbal remedies and traditional medicine as effective.⁵ Consequently, massage is one of the most common CAM referrals while a minority of doctors prescribes herbal remedies or traditional therapies.^{5,26}

Most physicians are unaware of the CAM therapies their patients use.^{1,5,8,27-29} Common reasons patients do not disclose their CAM use to a physician include not being asked,^{8,30} perceived disinterest or negative response,^{9,13,28,30} and the belief that CAM therapy is irrelevant to mainstream treatment.^{8,28} In a study of women recently diagnosed with breast cancer in the United States, Adler and Fosket²⁸ found 54% disclosed their CAM use to their physicians; however 94% discussed their mainstream treatment with their CAM practitioner. With the growing acceptance and use of CAM, patients are becoming more willing to discuss their use especially when asked by a doctor,⁴ and more patients are coming to expect their family physician to have knowledge of CAM;^{11,31} refer them to CAM; or to offer CAM treatment.³¹ Lack of communication between CAM practitioners and physicians and CAM users and physicians may present obstacles to patient care including patients delaying or avoiding mainstream medical care, incorrect diagnoses, medication interference, and harmful reactions to treatment.^{6,27,31} Both physicians and CAM practitioners should be made aware of the potential benefits and limitations of each other's treatments.^{4,32}

Methods

In February 2009, 43 health care professionals, 13 women and 30 men, employed at LBJ Hospital, and 4 female staff from the American Samoa Department of Health Breast and Cervical Cancer Early Detection Program (BCCEDP) completed a 10-item, self-administered survey at a weekly hospital in-service training. Survey items were adapted from an instrument developed by Jump and colleagues or based on focus group and interview findings and were approved by the American Samoa Institutional Review Board affiliated with the American Samoa Community College and Land Grant. Respondents were given a pen and a \$2 hospital cafeteria coupon for their participation.

Data was analyzed in terms of respondents' gender, age, years of professional experience and ethnicity and reported in rounded up whole number percentages to uncover possible patterns that may influence provider-patient communication concerning CAM use.

Results

Most survey respondents were 40 years of age or older (66%). The majority were Samoan (47%) while 26% were Caucasian, 21% Asian, and 6% were other Pacific Islanders. Half had 11 years or less experience in the medical/health care field (76% women, 33% men) and half had more than 11 years experience (24% women, 66% men); one respondent did not provide this information. Forty-seven percent were doctors/specialists (29% women, 57% men) and 53% were other health care providers including nurses, physicians' assistants, medical officers, and health educators (71% women, 43% men). Most respondents saw 10-29 women age 40 or older, the main target population for breast and cervical cancer screening, weekly. However, male respondents were more likely to see 50 or more female patients a week.

The most commonly used CAM were also the most frequent methods providers recommended to patients. The top CAM used and recommended by health care providers in American Samoa were exercise, diet modification, prayer, massage, support group participation, and relaxation techniques. Nineteen percent had visited a Samoan healer for CAM and 17% had recommended this to a patient. Only 9% of respondents reported no personal CAM use and 4% had never recommended a patient use a CAM. Respondents used more forms of CAM than they had recommended to patients with one exception; support group participation was recommended more often than it was personally used.

Women were more likely to have used massage, participated in support groups and used relaxation techniques than men. Providers under age 40 or with 11 years or less experience were more likely to have used diet modification, exercise, relaxation techniques, and participated in support groups than their older, more experienced counterparts. Older respondents were nearly four times more likely to have used herbal remedies and were somewhat more likely to have used massage as CAM. Prayer use corresponded with more years of professional experience but not with increased age. Samoan health care providers were most likely to have used Samoan healers, herbal remedies and prayer as CAM. Samoan and Asian respondents were notably less likely to have used relaxation techniques and to have participated in support groups. Samoan and Caucasian respondents were twice as likely to have used massage as Asians respondents. Caucasian and Asian respondents were somewhat more likely to have used exercise and diet modification.

Men were twice as likely to recommend herbal remedies and more likely than women to encourage prayer. Older and more experienced providers were more likely to recommend prayer, Samoan healers and herbal remedies, whereas their younger, less experienced colleagues are more apt to encourage diet modification. Younger age correlated with more massage and relaxation technique referrals. Less professional experience, but not age, was linked to recommending exercise. Samoan providers were the least likely to recommend diet modification, exercise, relaxation techniques, and support group participation to patients as CAM. On the other hand, indigenous health care professionals were four times as likely as Caucasians to recommend a patient seek a traditional Samoan healer, and 18% have encouraged herbal remedy use. Caucasian providers were the most likely to recommend diet, exercise, and massage, while Asian respondents were the largest advocates of support groups.

The great majority of respondents have asked a patient if they are using traditional Samoan healing as CAM for any illness or symptoms and most have had a patient disclose their use of Samoan healing as CAM. Nearly three-quarters of respondents have advised a patient to stop using traditional Samoan healing methods. Female providers, Samoans, and those with more professional experience are more likely to have asked a patient about traditional CAM use and to discourage it. Caucasians providers were the mostly likely to have had a patient disclose traditional Samoan healing use as CAM, however they are the ethnic group least likely to recommend its discontinuation.

Providers feel most American Samoans use traditional healing chiefly as complementary healthcare. However, more than half of respondents are aware of a breast cancer or cervical cancer patient who has used these techniques as an alternative to hospital treatment.

Men, Samoans, Asians, and respondents older than 40 years and with more professional experience were more likely to be aware of a breast cancer or cervical cancer patient using traditional healing as CAM.

Health care providers are nearly equally divided on whether traditional Samoan healing practices usually have a harmful or helpful impact on patient quality of life. Smaller percentages believed traditional medicine tends to have a neutral, a neutral to harmful, or both a harmful and a helpful impact. Nine percent did not respond to this question.

Most local health care providers are interested in learning more about traditional Samoan healing methods, especially women, younger and less experienced professionals, and Caucasians.

Discussion

Common CAM methods in the United States are also the most used and recommended by health care providers in American Samoa including diet modification, exercise, prayer, and massage. Similar to mainland studies, those surveyed have used more types of CAM than they have recommended to their patients and they tend to recommend methods they have personally used. Knowledge of and mainstream acceptance of different CAM may influence provider consultations and recommendations. With 70% of respondents stating they would like more information about indigenous treatments, it is not surprising that traditional Samoan healer use and herbal remedies are infrequently used and recommended to patients. On the other hand, massage is a popular CAM amongst American Samoa health care providers, possibly because of its documented benefits and availability from local practitioners besides traditional healers. Several chose not to judge traditional Samoan healing methods as harmful, neutral or helpful which likely reflects lack of knowledge of or experience with these CAM.

The greatest differences in types of CAM used and recommended are between ethnic groups. Samoan and Asian providers differ most on types of CAM used while Samoans and Caucasians vary most on types of CAM recommended to patients. Years of professional experience, age and gender appear to have less impact on provider CAM use and endorsement. The majority of health care providers in the Territory are Samoan. This group is the most likely to recommend a patient see a traditional Samoan healer who could provide massage or an herbal remedy as CAM and they are least likely to recommend more mainstream CAM such as diet modification and exercise.

A health care provider's ethnicity, gender and years of professional experience may also forecast different patient consultations on CAM use. The majority of providers have consulted with a patient on their Samoan healing use, but nearly all have had a patient disclose traditional CAM use. Thus, it appears that some patients offer this information unprompted despite most providers discouraging traditional CAM use. Most Caucasian health care providers at LBJ are fulfilling two year or shorter contracts and therefore have little experience in American Samoa. This lack of knowledge may be why Caucasians are the most likely to have a patient disclose traditional Samoan healing use, the least likely to discourage this form of CAM, and why all Caucasian respondents request more information on Samoan healing methods.

Nearly two-thirds of providers surveyed believe most patients use traditional healing methods to complement hospital treatment, and more than half were aware of a breast cancer or cervical cancer patient using this complementary therapy. Similarly, over half of providers are aware of a cancer patient utilizing Samoan medicine instead of Western medical treatment, but only 17% feel most patients use traditional healing as an alternative to mainstream care. This could mean breast cancer and cervical cancer patients are more likely than the general population to seek alternative care from a Samoan healer for a period after diagnosis but the majority of these patients return to the hospital for treatment. This notion may be further supported by 11% of providers believing traditional healing is used as both complementary and alternative therapy.

Perhaps because Samoan medicine includes widely accepted massage and less accepted herbal remedies, providers are divided on the impact traditional healing methods have on patient quality of life. Yet, the largest percentage feels the effects are usually harmful, and nearly three out of four respondents have advised a patient to stop using traditional healing methods. However, it is unknown if any patient CAM use, including traditional healing, is systematically documented in American Samoa so their effects can be proven.

This study not only provided insights into health care providers use and perceptions of CAM, it also informed the development of a cancer prevention radio drama and highlighted the need for a cancer patient navigator program. The most common CAM providers have used and recommended were highlighted in the plot of the radio drama to motivate patient-provider discussions. Previous focus group and concurrent interview data was compared to the survey results to confirm that breast and cervical cancer patients utilize traditional healing methods as complementary or alternative therapies. This became a central behavior-change conflict in the drama with the heroine disclosing her traditional alternative medicine use to friends and doctors only after mainstream cancer treatment was no longer viable. And, the acceptance of traditional Samoan healing practices as CAM amongst nearly a third of providers of Samoan ethnicity revealed the need for a cancer patient navigator program to document and track both mainstream and traditional CAM use and to act as a liaison between traditional healers and medical professionals. The limitations of this study are those inherent to survey research, notably self-reported data are subject to recall and desirability bias. Respondents may have underreported their CAM use or referrals due to lack of mainstream medical community acceptance. A limited list of common CAM was assessed, although respondents had the option to write in other modalities. There may have been some confusion in assessing traditional healing as a separate CAM from massage or herbal remedies. To pinpoint traditional Samoan healing methods provided by indigenous practitioners as a CAM, it was listed separately from massage and herbal remedies. The convenience sample obtained at a morning hospital in-service training afforded access to many health care professionals but those not on duty that day or not in attendance were not captured.

CAM use is likely to continue in American Samoa as long as health care deficiencies and culture-specific beliefs about illness exist. A provider's ethnicity may be the strongest indicator of more or less CAM acceptance which, in turn, influences the content of patient consultations. Many Samoans use traditional healing methods and these unique CAM are used and recommended by nearly one-fifth

of local health care providers. Therefore health professionals in American Samoa should be better informed about the efficacy of different CAM and encouraged to document patient CAM use, especially concerning less known traditional methods.

Disclosure

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Table 1.— American Samoa Health Care Provider CAM Survey Results

Item	Responses	All (n=47)	Women (n=17)	Men (n=30)	<40 years (n=16)	≥40 years (n=31)	≤11 years experience (n=23)*	>11 years experience (n=23)*	Samoa (n=22)	Caucasian (n=12)	Asian (n=10)			
Aside from mainstream Western medical treatments, which of the following complementary methods have you personally used to treat an illness or alleviate symptoms?	Diet modification	38, 81%	14, 80%	24, 80%	15, 94%	23, 74%	21, 91%	16, 70%	16, 73%	11, 92%	9, 90%			
	Prayer	21, 45%	8, 47%	13, 43%	7, 44%	14, 45%	9, 39%	11, 48%	12, 55%	3, 25%	4, 40%			
	Herbal remedy	8, 17%	3, 18%	5, 17%	1, 6%	7, 23%	4, 17%	4, 17%	4, 17%	6, 27%	1, 8%	1, 10%		
	Exercise	39, 83%	14, 82%	25, 83%	14, 88%	25, 81%	20, 87%	18, 78%	17, 77%	10, 83%	10, 100%			
	Massage	18, 38%	9, 53%	9, 30%	5, 31%	13, 42%	8, 35%	10, 44%	9, 41%	5, 42%	2, 20%			
	Support group participation	10, 21%	5, 29%	5, 17%	4, 25%	6, 19%	7, 30%	3, 13%	4, 18%	4, 33%	2, 20%			
	Relaxation technique	10, 21%	5, 29%	5, 17%	5, 31%	5, 16%	6, 26%	4, 17%	3, 14%	5, 42%	1, 10%			
	Traditional Samoan healing/healer	9, 19%	3, 18%	6, 20%	3, 19%	6, 19%	4, 17%	5, 22%	6, 27%	2, 17%	0, 0%			
	Other	1, 2%	1, 6%	0, 0%	0, 0%	1, 3%	1, 3%	1, 4%	0, 0%	0, 0%	1, 8%	0, 0%		
	None	4, 9%	1, 6%	3, 10%	1, 6%	3, 10%	2, 9%	2, 9%	2, 9%	2, 9%	1, 8%	0, 0%		
	No response	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%		
	Which of the following complementary methods have you recommended to a patient to treat an illness or alleviate symptoms?	Diet modification	38, 81%	14, 82%	24, 80%	14, 88%	24, 77%	22, 96%	16, 70%	15, 68%	11, 92%	9, 90%		
		Prayer	17, 36%	5, 29%	12, 40%	5, 31%	12, 39%	7, 30%	10, 44%	9, 41%	5, 42%	3, 30%		
Herbal remedy		5, 11%	1, 6%	3, 13%	1, 6%	4, 13%	2, 9%	3, 13%	4, 18%	0, 0%	1, 10%			
Exercise		38, 81%	13, 77%	25, 83%	13, 81%	25, 81%	20, 87%	18, 78%	14, 64%	12, 100%	9, 90%			
Massage		17, 36%	6, 35%	11, 37%	7, 44%	10, 32%	8, 35%	9, 39%	7, 32%	6, 50%	3, 30%			
Support group participation		12, 26%	6, 35%	6, 20%	4, 25%	8, 26%	6, 26%	6, 26%	4, 18%	3, 25%	4, 40%			
Relaxation technique		9, 19%	2, 12%	7, 23%	4, 25%	5, 16%	4, 17%	5, 22%	3, 14%	3, 25%	2, 20%			
Traditional Samoan healing/healer		8, 17%	2, 12%	6, 20%	2, 13%	6, 19%	3, 13%	5, 22%	7, 32%	1, 8%	0, 0%			
Other		1, 2%	0, 0%	1, 3%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%			
None		2, 4%	1, 6%	1, 3%	1, 6%	2, 6%	0, 0%	2, 9%	2, 9%	0, 0%	0, 0%			
No response		1, 2%	0, 0%	1, 3%	1, 6%	0, 0%	0, 0%	0, 0%	1, 5%	0, 0%	0, 0%			
Have you ever asked a patient if she/he is using traditional Samoan healing methods to treat an illness or symptoms?		Yes	42, 89%	15, 88%	27, 90%	16, 100%	26, 84%	20, 87%	21, 91%	21, 96%	11, 92%	9, 90%		
		No	5, 11%	2, 12%	3, 10%	0, 0%	5, 16%	3, 13%	2, 9%	1, 4%	1, 8%	1, 10%		
	No response	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%			
	Has a patient ever told you she/he is using traditional Samoan healing methods to treat an illness or symptoms?	Yes	45, 96%	16, 94%	29, 97%	15, 94%	30, 97%	22, 96%	22, 96%	21, 96%	12, 100%	9, 90%		
		No	2, 4%	1, 6%	1, 3%	1, 6%	1, 3%	1, 4%	1, 4%	1, 4%	0, 0%	1, 10%		
		No response	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%		
		Have you ever advised a patient to stop using traditional Samoan healing methods?	Yes	34, 72%	14, 82%	20, 67%	14, 88%	20, 65%	19, 83%	15, 65%	19, 86%	7, 58%	7, 70%	
			No	12, 26%	3, 18%	9, 30%	2, 12%	10, 32%	4, 17%	7, 30%	2, 9%	5, 42%	3, 30%	
			No response	1, 2%	0, 0%	1, 3%	0, 0%	1, 3%	0, 0%	1, 4%	1, 5%	0, 0%	0, 0%	
			Are you aware of a breast cancer or cervical cancer patient who has used traditional Samoan healing methods along with (at the same time as) Western medical treatment?	Yes	26, 55%	7, 41%	19, 63%	5, 31%	21, 68%	9, 39%	17, 74%	14, 64%	3, 25%	7, 70%
				No	21, 45%	10, 59%	11, 37%	11, 68%	10, 32%	14, 61%	6, 26%	8, 36%	9, 75%	3, 30%
				No response	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%

Are you aware of a breast cancer or cervical cancer patient who has used traditional Samoan healing methods in place of (instead of) Western medical treatment?	Yes	26, 55%	6, 35%	20, 67%	5, 31%	21, 68%	9, 39%	17, 74%	12, 55%	5, 42%	7, 70%
	No	21, 45%	11, 65%	10, 33%	11, 69%	10, 32%	14, 61%	6, 26%	10, 45%	7, 58%	3, 30%
	No response	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%
In my opinion, patients in American Samoa most often use traditional Samoan healing practices as ...	Complementary medicine	34, 72%	12, 70%	22, 73%	13, 81%	21, 68%	16, 69%	17, 74%	16, 73%	8, 67%	7, 70%
	Alternative medicine	8, 17%	3, 18%	5, 17%	3, 19%	5, 16%	5, 22%	3, 13%	4, 18%	3, 25%	1, 10%
	Both complementary and alternative medicine	5, 11%	2, 12%	3, 10%	0, 0%	5, 16%	2, 9%	3, 13%	2, 9%	1, 8%	2, 20%
In my opinion, what effect do traditional Samoan healing practices usually have on a patient's quality of life ...	No response	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%
	A harmful effect	17, 36%	7, 41%	10, 33%	6, 38%	11, 35%	10, 43%	7, 30%	8, 36%	4, 33%	4, 40%
	A neutral effect	7, 15%	2, 12%	5, 17%	3, 19%	4, 13%	5, 22%	2, 9%	3, 14%	1, 8%	3, 30%
	A helpful effect	14, 30%	4, 24%	10, 33%	5, 31%	9, 29%	5, 22%	9, 39%	5, 23%	4, 33%	3, 30%
	A neutral to harmful effect	2, 4%	1, 6%	1, 3%	0, 0%	2, 6%	0, 0%	2, 9%	2, 9%	0, 0%	0, 0%
	A neutral to helpful effect	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%
	A harmful and helpful effect	3, 6%	2, 12%	1, 3%	1, 6%	2, 6%	2, 9%	1, 4%	2, 9%	2, 9%	1, 8%
Are you interested in learning more about traditional Samoan healing methods?	No response	4, 9%	1, 6%	3, 10%	1, 6%	3, 10%	1, 4%	2, 9%	2, 9%	2, 17%	0, 0%
	Yes	33, 70%	13, 76%	20, 67%	13, 81%	20, 64%	19, 83%	14, 61%	14, 64%	12, 100%	6, 60%
	No	14, 30%	4, 24%	10, 33%	3, 19%	11, 36%	4, 17%	9, 39%	8, 36%	0, 0%	4, 40%
No response	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	0, 0%	

*One of the 47 survey participants did not provide information about their years of professional health care experience.

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