



SPC  
Secretariat  
of the Pacific  
Community

## **Transforming power relations: *Equal status of women and men at the family level in the Pacific***

*'States Parties shall take all appropriate measures to modify the social and cultural patterns of conduct of men and women, with a view to achieving the elimination of prejudices and customary and all other practices which are based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women.' (CEDAW article 5(a))*

## TRANSFORMING POWER RELATIONS: Equal status of women and men at the family level in the Pacific

Attitudes about the superiority of men and inferiority of women at the household and family level are still very common in the Pacific. Rather than being equal partners, men are still widely considered the 'head of the household' with superior status and decision-making authority and often greater rights and freedoms. While increasing numbers of people are replacing these notions of family hierarchies with notions of equality, there is still a long way to go. The implications of family and household hierarchies and stereotyped roles for men and women are many, including poor health outcomes for women, diminished access of women to economic and political participation, and violence against women. Women's empowerment at the household and family level is critical to their full participation in and contribution to all other spheres of society. Equalising power relations at this most basic unit of society will benefit everyone, from families and communities to entire nations.

### PURPOSE

The aim of this document is to:

- outline some of the recent research findings relating to men's and women's status and decision-making at the household and family level;
- examine the links between women's status in the family and other aspects of their lives;
- examine correlations between intimate partner violence and women's status and decision-making in the household; and
- provide policy recommendations for achieving equality at the household and family level.

This brief compiles and analyses survey data that illustrate attitudes around household and family level equality or inequality between women and men. Although clear trends can be seen, the overall 'Pacific picture' is unavoidably incomplete as much more research is needed. Nonetheless, we hope this brief will contribute to national and regional discussion on the issue of equality of women and men within the family structure as an often under-addressed but critical element of government and institutional policy.

### KEY MESSAGES

- ▶ Decision-making of women at all levels of society is a measure of empowerment.
- ▶ Women's equal status and authority in the family is critical to the strengthening of all other aspects of women's lives and those of their families and communities.
- ▶ Governments must integrate into policy and planning processes issues of household and family equality, including relating to decision-making and sharing of responsibilities.

## HOUSEHOLD HIERARCHIES

Around the world, traditional, religious or introduced notions that men are the head of the household have contributed significantly to poor development outcomes for women for many years. Such social hierarchies have resulted in lower education rates for women and girls, greater burdens on them of unpaid household labour, diminished access to economic and political participation, poor health, and domestic violence, among others.

*'Inequality in the public arena can often start with discriminatory attitudes and practices and unequal power relations between women and men within the family ... The unequal division of labour and responsibilities within households based on unequal power relations also limits women's potential to find the time and develop the skills required for participation in decision-making in wider public forums.'*  
(Beijing Platform for Action, para. 185)

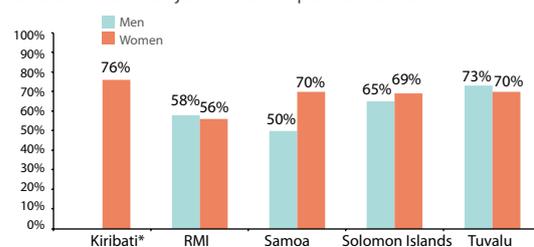
Studies show a very high socialisation in the Pacific of both inequality between women and men in the household (women are expected to 'obey' their husbands rather than being equal partners) and of male violence as a means for resolving disputes.

Between half and three quarters of both men and women agree with at least one 'justification' for intimate partner violence against women (Figure 1). The most common 'justifications' are things like 'disobedience', 'unfaithfulness' and 'neglect of household duties', illustrative of the lack of equal status in the family.

*'It's our culture to hit the women if they don't do their housewife duties. Hitting by us men is a way of making our women become obedient. It happens if a woman doesn't submit to the man, if she's too proud.'*<sup>6</sup>

In Samoa, about 98% per cent of male respondents agreed with the following statement: 'A good wife obeys her husband and does as she is told.'<sup>14</sup> In Kiribati, the majority of men interviewed in a qualitative research agreed that, 'A man should show his wife who is the boss.'<sup>16</sup> This notion suggests that the gendered nature of the home does not simply reflect a gendered division of labour, but rather that the husband is the 'boss' in the relationship and is expected to demonstrate power over his wife.

Figure 1. Percentage of women and men (aged 15-49) who agree with at least one or more justification for partner violence



Source: Kiribati Family Health and Support Study, forthcoming; RMI DHS report, 2007; Samoa Family Health and Safety Study, 2007; Solomon Islands DHS report, 2006-2007; Tuvalu DHS report, 2007

\* no data available for I-Kiribati men

*'I found that whenever I disobeyed him, he just hit me.'*<sup>6</sup>

However, there is evidence in some Pacific Island countries and territories (PICTs) that attitudes are changing. While 24% of Kanak women in New Caledonia over 45 years of age believe a man is entitled to beat his partner if she does not do the housework properly, only half as many under 25 years of age think the same.<sup>9</sup> Despite this encouraging change of mindset amongst young people, 19% of Kanak women still excuse a partner's violence when he suspects his spouse of infidelity without there being a significant gap between the age groups. This attitude is much more prevalent amongst rural (21%) compared with urban (6%) women.<sup>9</sup>

Other norms of submission to the husband are also being increasingly questioned: 90% of Kanak women find it normal to question their partner if he comes home late frequently; 76% consider that a woman is entitled to express her opinion in public even if she does not agree with her husband, with young and urban women defending this position more frequently than older and rural-dwelling women. It is also worthy of note that today two-thirds of Kanak women questioned the idea that it is up to the man to make the decisions in the family.<sup>9</sup>

Contributing to these attitude shifts in New Caledonia are French parity laws which seek to ensure an equal balance of men and women in elected political positions, family planning, and better access of women to higher education and salaried employment.<sup>9</sup>

## HEALTH DECISION-MAKING

Achieving good health outcomes requires not only making health services available but also making information available to and empowering both women and men regarding their own health decisions.

Studies show that in the Pacific, many women do not have control over their own health decisions. Women interviewed in demographic and health surveys (DHSs) generally reported joint decision-making for matters relating to their own health care, and fully 24% of Marshallese women, 16% of Tuvaluan women and 17% of Solomon women reported that their husbands make these decisions for them (Figure 2).

Reports of controlling behaviour in matters of women's health-related decisions significantly increase in cases where women have experienced intimate partner violence. In Solomon Islands, 38.5% of abused women (vs. 20% of women who have never been abused) state that their husbands control their access to health care.<sup>5</sup> Kiribati shows some alarming figures: 57% of I-Kiribati women who have never experienced partner violence do not have a say in decisions relating to their own health.<sup>6</sup> This figure reaches a staggering 76% in the case of abused women.

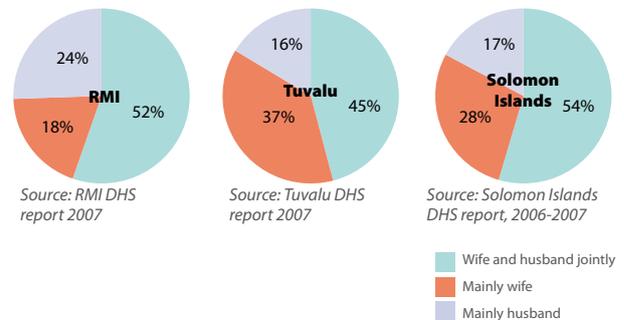
*'States Parties shall take all appropriate measures to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning.'* (CEDAW article 12(1))

In Solomon Islands, Tuvalu and Republic of the Marshall Islands (RMI), older women, women who are employed and women who are more educated are more likely to have higher indicators of empowerment within the family such as participating in household decisions. Similarly, men who are employed, live in urban areas, have higher education and come from wealthy households are more likely to support their wife's equal involvement in household decision-making.<sup>1,2,3</sup>

### KEY POLICY RECOMMENDATIONS

- ▶ *Initiatives to establish gender balance in legislatures can have a direct and positive impact on equality, health and women's empowerment in the household and family sphere. Such initiatives should be accelerated by governments.*
- ▶ *Governments, customary bodies, religious institutions, educators and the media must integrate the elimination of notions of sexual hierarchies into all policies, systems, curricula and programmes.*
- ▶ *Governments must criminalise and punish all acts of violence against women in the home and develop comprehensive laws, policies and strategies to eradicate it.*

Figure 2. Who makes the decisions on women's health care (currently married women aged 15-49)



### KEY POLICY RECOMMENDATIONS

- ▶ *The health sector must integrate equality of women and men at the household level into all policies and programmes in order to achieve strong health outcomes for women. It is not enough to provide services if women do not have the choice and empowerment to access those services.*
- ▶ *Health sector programmes must also address violence against women as a health issue, and its elimination as a critical health strategy.*

## SEXUAL AND REPRODUCTIVE DECISION-MAKING

Women's control over their own bodies is a fundamental human right. Further, international law confirms that equality between men and women requires recognition and protection of their different reproductive functions and needs and that those differences must not disadvantage women in other spheres of life. Women's equal status in family relations, including in sexual and reproductive matters, is a key determinant of the health and social and financial well-being of both men and women.

Almost all men from Solomon Islands,<sup>1</sup> RMI<sup>2</sup> and Tuvalu<sup>3</sup> (respectively 92%, 81% and 87%) believe that the decision on how many children to have should be a joint one between husband and wife.

*'The responsibilities that women have to bear and raise children affect their right of access to education, employment and other activities related to their personal development. They also impose inequitable burdens of work on women. The number and spacing of their children have a similar impact on women's lives and also affect their physical and mental health, as well as that of their children. For these reasons, women are entitled to decide on the number and spacing of their children.'* (General recommendation no. 21 of the CEDAW Committee, 13th session, 1994, para. 21)

While a strong majority of men in Solomon Islands, RMI and Tuvalu believe that a woman is free to refuse sex with her husband, there are differing attitudes about a husband's right to retaliate. The majority of men in Solomon Islands believe there is no right to retaliate, while the majority in Tuvalu believe there is. In RMI men are roughly evenly divided on this (Figure 3).

Figure 3. Men's attitudes toward a woman's right to refuse sex with her husband and acceptance of male retaliatory behaviour



Source: Solomon Islands DHS report 2006-2007; RMI DHS report 2007; Tuvalu DHS report 2007

Examples of male retaliatory behaviour when a wife refuses sex include getting angry and reprimanding her, refusing financial support, using force to have sex with her or having sex with another woman. Such behaviour not only defeats the woman's autonomy and control over her body, it reinforces notions of superiority and inferiority in the household, puts both partners at risk of contracting HIV and other sexually transmitted infections and perpetuates men's financial control over women.

In Kiribati, according to qualitative research, most men think that a wife can refuse sex with her husband under various circumstances such as if she does not want to, if she is sick or if he is drunk.<sup>6</sup> In contrast, 76% of women in a quantitative survey responded that they believed that a wife was obliged to have sex with her husband, even if she didn't feel like it.<sup>6</sup> It is possible therefore that in some cases women have internalised this social norm more than men and may learn it from other

female relatives and society in general rather than from their husbands directly.

*'The capacity of men and boys in bringing about changes in attitudes, relationships and access to resources and decision-making which are critical for the promotion of gender equality and the full enjoyment of all human rights by women is to be recognised.'* (Agreed conclusions of the 54th UN Commission on the Status of Women, 2009)

Studies on gender-based violence in Solomon Islands<sup>5</sup> and Kiribati<sup>6</sup> found that women who believe that they can refuse sex under some circumstances are more likely (4 times and 1.8 times, respectively) to experience intimate partner violence than women who believe that a wife cannot refuse sex with her husband under any circumstances. This unusual finding may be explained by international research which suggests that male violence can become normalised as societies become more liberal, with men seeking to cling to and reinforce patriarchal control and authority.

*'If I saw him when he came home [from drinking] and he had a different expression on his face, I knew for sure that although he asked me for sex, and although I did not want to, for sure, he will force himself on me. So because I was scared that he might bash me I agreed, not that I was willing. Just imagine that it was two or three in the morning when you are asleep and your body is not up to it, then he arrives. Sometimes he would come in and I didn't know, he would remove my clothes and try to have sex with me.'*<sup>5</sup>

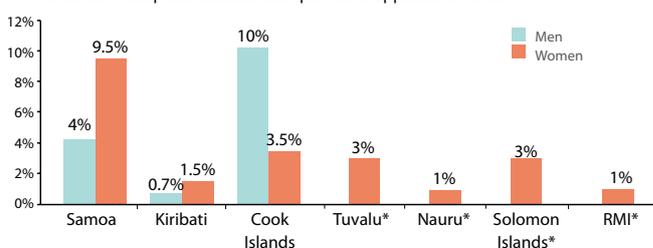
### Negotiating safer sex

In Solomon Islands,<sup>1</sup> RMI<sup>2</sup> and Tuvalu,<sup>3</sup> almost all men and women agree that a woman is justified in refusing to have sexual intercourse with her husband if she knows he has a sexually transmitted disease. An exception was in the Western Province of Solomon Islands, where less than 50% of men thought it was justifiable for a wife to refuse sex or to negotiate safer sex.

While both men and women report making decisions on contraceptive use in Kiribati, Cook Islands and Samoa, there seems to be a tendency to attribute more responsibility for this decision to women.<sup>12</sup> This is particularly the case in Kiribati, where 80% of the I-Kiribati women surveyed and 65% of the men replied that women decide contraceptive use within the couple.

The range of reasons for men and women not wanting to use contraception is wide, including personal choice, alcohol/drug consumption, lack of availability of contraceptives, embarrassment, lack of knowledge, religion, desire to have children and health concerns. In some cases, partner opposition is the barrier to contraceptive use (Figure 4).

Figure 4. Men (20-54 years old) and women (15-49 years old) not wanting to use contraception because their partner is opposed to its use



Source: UNFPA Research Papers in Population & Reproductive Health Series: Reproductive Health Knowledge and Services in Samoa (2002:26), Reproductive Health Knowledge and Services in Cook Islands (2002:24), Reproductive Health Knowledge and Services in Kiribati (2002:25); Nauru DHS report, 2007; Tuvalu DHS report, 2007; Solomon Islands DHS report, 2006-2007; RMI DHS report, 2007

\* no data available for men

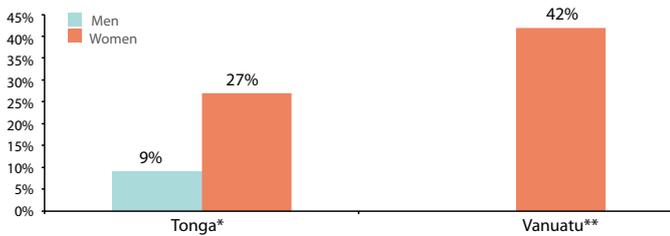
While much more research is required on the reasons of men and women for having unprotected sex, some studies show very high rates of women not using condoms because their partner didn't want to, with much lower figures for men (Figure 5), reflecting less independence for women in making their own healthy sexual choices.

Women who had experienced intimate partner violence were significantly more likely to have a partner who refused to use or tried to stop her from using a method of family planning (Figure 6). This supports earlier evidence that women who have experienced partner violence are more likely to encounter controlling behaviour by a partner, in this case over their own reproductive health choices.

*A patient was provided with an IUD but was concerned about her husband's reaction, as he did not support contraception:*

*'She came back [to the hospital] a couple of days later with big black eyes ... [She] explained that he had demanded sex but she had her period. He insisted on looking at her and saw the string and beat her up badly. She came back to the hospital and asked us to take it out, otherwise she felt that her husband would kill her.'*<sup>6</sup>

Figure 5. Respondents having not used condoms at last sex because their partner didn't want to



Source: Second Generation HIV Surveillance in Antenatal Clinic Attendees and Youth, Tonga (2008:25); Second Generation Surveillance of Antenatal Women, STI Clinic Clients and Youth, Vanuatu (2008:11)

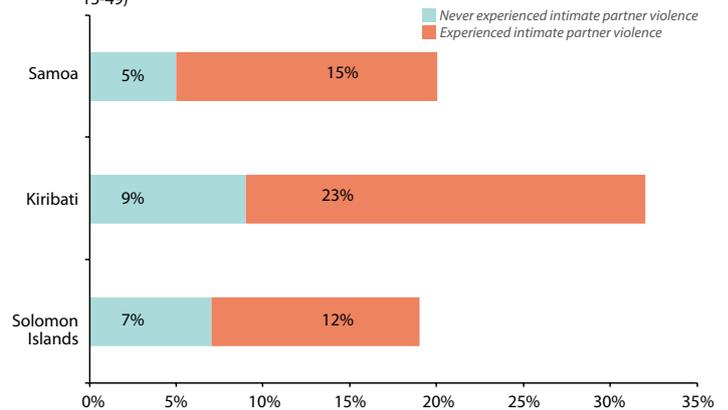
\* Tonga's figures are based on a female and male population sample aged between 15 and 24 who reported not using condoms at last sexual intercourse.

\*\* Vanuatu's female population sample refers to antenatal women aged 15-49 years. No figures are available for ni-Vanuatu men

Similarly, in French Polynesia women whose partners display controlling behaviour over contraception use are over two times more likely (35% vs. 14%) to be victims of intimate partner violence.<sup>8</sup>

Women experiencing intimate partner violence in Samoa were much more likely to use female methods of contraception that do not require partner cooperation such as oral contraceptives, injectables, implants, IUDs and female sterilisation. Condoms are the main source of protection against sexually transmitted infections. If women are obliged to rely on female methods because they cannot depend on their partners' cooperation, they will be at greater risk of acquiring sexually transmitted infections.<sup>4</sup>

Figure 6. 'Partner ever tried to stop family planning' (currently partnered women aged 15-49)



Source: Solomon Islands Family Health and Safety Study, 2009; Samoa Family Health and Safety Study, 2007; Kiribati Family Health and Support Study, forthcoming

## KEY POLICY RECOMMENDATION

► *Women's equality and empowerment within the home should be promoted as a core element of health programmes targeting reproductive health.*

## SOCIAL DECISION-MAKING

When women and men enjoy equality, social decisions are made independently or jointly. Socially controlling behaviour, on the other hand, is a way of maintaining dominance and often puts women at risk of exclusion and isolation.

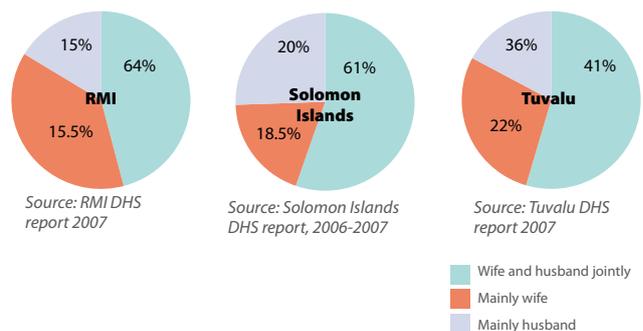
Demographic and health surveys show that decision-making regarding visits to the wife's family or relatives tends to be shared between husbands and wives, although in up to a fifth of families this decision is made mainly by the husband (Figure 7).

Research in the French territories reveals high rates of male control over women's social behaviour (Figure 8).

Male controlling behaviour often takes on the form of limiting access to support networks and isolating victims, making women in violent family situations particularly vulnerable. In Solomon Islands, 32% of women who experience partner violence state that their partner keeps them from seeing their friends,<sup>5</sup> and in Kiribati insisting on knowing at all times where wives or female partners are is seen as a normal and acceptable part of local culture (Figure 9).<sup>6</sup>

*'My first husband doesn't allow me to go and talk with other people, even within the family like my brothers and sisters. When they come to visit me and he sees us talking or laughing he just comes directly to me and hits me or drags me away from my relatives. He does not respect my relatives.'*<sup>5</sup>

Figure 7. Who makes the decisions on visits to wife's family or relatives (currently married women aged 15-49)

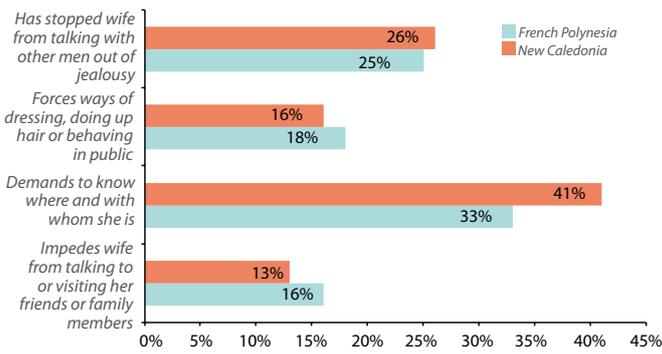


Source: RMI DHS report 2007

Source: Solomon Islands DHS report, 2006-2007

Source: Tuvalu DHS report 2007

Figure 8. Women's experience of control by partner over social decision-making in French Polynesia and New Caledonia (age 18-60)

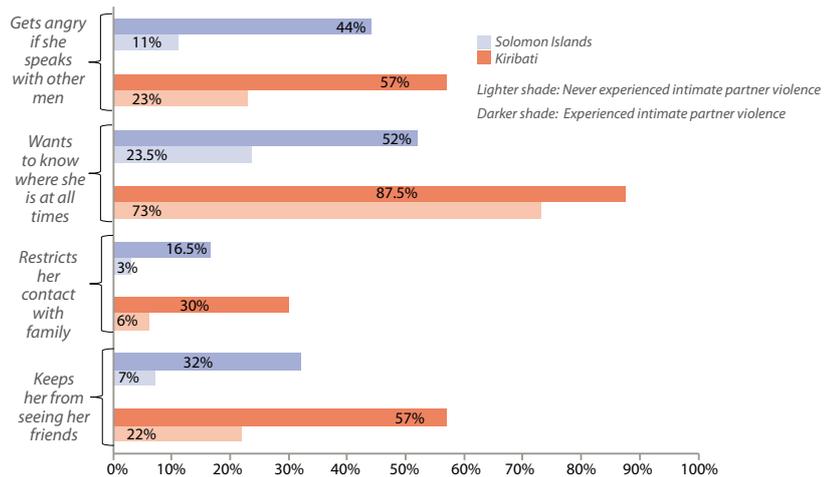


Source: Les violences envers les femmes en Polynésie française, Ministère de la Santé, de la Fonction Publique, de la Rénovation de l'Administration et Direction de la Santé, 2003; Enquête Santé, Conditions de Vie et de Sécurité des femmes calédoniennes, INSERM, 2002

'States Parties shall take all appropriate measures to eliminate discrimination against women in all matters relating to marriage and family relations (CEDAW article 16(1))

'He forbids me from seeing my family and communicating with my friends.'<sup>6</sup>

Figure 9. Women in Kiribati and Solomon Islands reporting controlling behaviour by partner according to their experience of physical and/or sexual partner violence (currently partnered women aged 15-49)



Source: Kiribati Family Health and Support Study, forthcoming; Solomon Islands Family Health and Safety Study, 2009

### KEY POLICY RECOMMENDATION

► Governments, customary bodies, religious institutions, educators and the media must integrate the elimination of notions of male dominance over women's social choices into all policies, systems, curricula and programmes.

## FINANCIAL DECISION-MAKING

In a cash economy, household financial resources are a vital means of survival, comfort and security. Family members may contribute differently to household finances, for example through formal or informal sector income, or by carrying out unpaid household labour that gives other family members the time and freedom to earn an income outside the home. While spouses or partners may choose to manage finances in different ways, equality in the family requires equal levels of empowerment over financial control and decision-making. Conversely, male financial controlling behaviour can be a way of exerting authority over women and restricting their independence and autonomy.

Demographic and health surveys conducted in Solomon Islands,<sup>1</sup> RMI<sup>2</sup> and Tuvalu<sup>3</sup> show that the control of cash earnings is largely thought by both men and women to be a joint

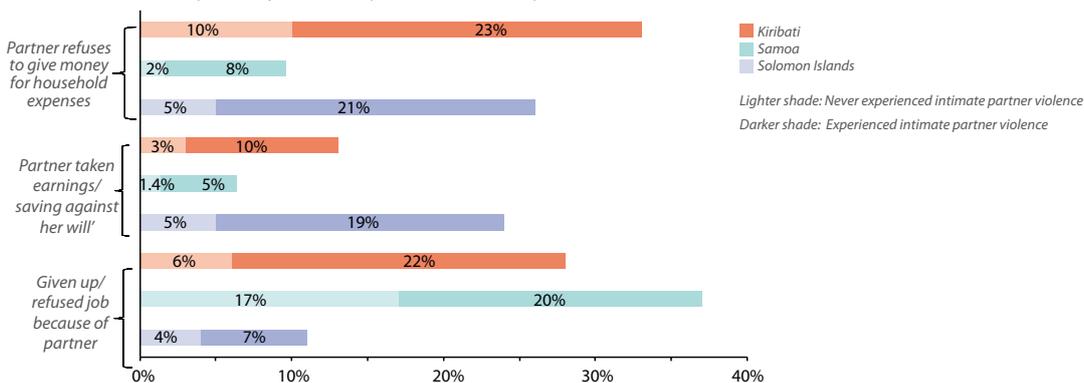
responsibility. There are some exceptions to this; for example, while 63% of men in Tuvalu believe that decisions on how the wife's cash earnings are used should be shared between husband and wife, only 38% believe the decision on the use of the husband's cash earnings should be joint, with a third seeing this as the wife's decision and 22% seeing it as the husband's.

Generally speaking, younger women appear more independent in making decisions on how their cash earnings are spent. In RMI, urban women are two times more likely than rural women to make their own financial decisions (32% and 16%, respectively), whereas joint decisions are more common in rural areas.<sup>2</sup>

Contrary to these generally positive findings, however, women who experience intimate partner violence are significantly more likely to experience financially controlling behaviour by their partners (Figure 10).

'My earnings at my little shop couldn't profit as he'd steal money to spend on drinking.'<sup>6</sup>

Figure 10. Women aged 15-49 who have ever experienced financially controlling behaviour from their current husband/partner, by women's experiences of intimate partner violence



Source: Samoa Family Health and Safety Study, 2007; Solomon Islands Family Health and Safety Study, 2009; Kiribati Family Health and Support Study, forthcoming

*'He does not provide for me to do the household chores [...] So I have to beg my uncles to give me money to pay for these things. I feel very shy and small when doing this but I have to. [...] Then I have bad thoughts like selling myself to get money to buy food or things for the home.'*<sup>5</sup>

In French Polynesia, men often oppose their wives having a job out of 'jealousy'. One quarter of women reported their spouse/partner displaying this trait, and this figure reaches over 40% amongst 18–24 year olds. This 'jealousy' is not to be solely understood as sexual possessiveness but also as unwillingness to see their partners enjoy a good social standing or one that is better than theirs. Tactics used include harassing their partners at their work place, using psychological abuse and at times using physical violence.<sup>8</sup>

*'States Parties shall take all appropriate measures to eliminate discrimination against women in the field of employment in order to ensure, on a basis of equality of men and women, the same rights, in particular the right to work as an inalienable right of all human beings.'* (CEDAW article 11(1))

On the whole, men and women tend to report that decision-making on major household purchases as well as daily household needs is a joint responsibility.<sup>1,2,3</sup> However 72% of Tuvaluan men think that the responsibility of purchasing

everyday domestic goods lies with women.<sup>3</sup> This may reflect attitudes that household management is a woman's responsibility rather than a shared obligation.

## KEY POLICY RECOMMENDATIONS

- ▶ *Governments must condemn male financial control over women in the household, ensure their equal enjoyment of the right to work, value the economic contributions of unpaid labour and child rearing in systems of national accounts, and accord the same weight to financial and non-financial contributions to household property in all family law systems.*
- ▶ *The education sector should integrate household financial management into school curricula for both girls and boys.*
- ▶ *Governments, educators and the media should promote the equal sharing between women and men of unpaid domestic labour, household management and child rearing.*

## DECISION-MAKING ON LAND

Women's current status in relation to ownership, management and access to land is a vastly under-researched topic in the Pacific. Land is a precious resource to both men and women and decision-making regarding land is an important aspect of empowerment.

Most PICT legal systems do not guarantee equality to both spouses in the ownership, acquisition, management, administration, enjoyment and disposition of property.<sup>11</sup> Property rights are largely determined by legally protected customary rules that often disadvantage women. This can reach extremes as illustrated by Tonga, where women are not legally allowed to own or inherit land, and by Kiribati and Tuvalu, where sons are favoured over daughters in relation to both land and rights to important resources such as fishponds.<sup>11</sup>

*'States Parties shall take all appropriate measures to eliminate discrimination against women in all matters relating to marriage and family relations and in particular shall ensure, on a basis of equality of men and women: [...] the same rights for both spouses in respect of the ownership, acquisition, management, administration, enjoyment and disposition of property...'* (CEDAW article 16(h))

Even in matrilineal land tenure systems where women are typically thought to enjoy greater decision-making power, their involvement has often become limited. For instance, in North Pentecost (Vanuatu), where matrilineal land tenure systems are in place, matrilineality merely means that land may pass through the women's line, but men have control over the land. Indeed, while land is passed through the mother, maternal uncles act as land 'administrators'. Women may be consulted in land matters, but the final decision rests with the men.<sup>7</sup>

*'In matters concerning decision-making on different issues, it is the men who make decisions when it was normally the practice that women's views were sought before decisions were made. Some women are more concerned with taking care of the family, feeding their pigs, weaving mats and tending their gardens.'* (woman in Vanuatu)<sup>7</sup>

In other matrilineal contexts such as RMI, where a tradition of delegating duties to male relatives (*māan maroñron*) exists, the relationship between men and women of the same matrilineage operates in a more complementary and reciprocal manner, with men and women occupying different but complementary roles as joint stewards of lineage property and interests.<sup>7</sup>

This situation resembles that of the matrilineal provinces of Guadalcanal, Isabel and Makira in Solomon Islands, where women traditionally owned land while a male child or brother was appointed as the spokesperson for all land-related issues. In the past, women and men had shared responsibilities in decision-making mechanisms and processes. But recent shifts have led to changes in family and social structures, which have affected the position of women as landowners in matrilineal societies.<sup>7</sup>

*'Even if I am a land owner, I am seen as a nobody, only good for home making and baby rearing.'* (woman in Solomon Islands)<sup>7</sup>

The erosion of matrilineal land tenure practices, which were once empowering for women, has been caused by several factors:

- Missionary and colonial contact, which greatly reduced women's customary status;
- The impact of large-scale extractive industries on land and resource management systems;
- Introduction of the cash economy, triggering a change from communitarianism to individualism;

- Women's exclusion from modern decision-making systems and structures such as parliaments; and
- Manipulation of land legislation as well as customary practices and ideologies so that a male bias is adopted, increasingly marginalising women.<sup>7</sup>

These have affected the attitudes and behaviours of men, who increasingly make decisions without consulting or involving women.

*'In the distant past, within the traditional setup of 'Are'are society [Malaita, Solomon Islands], we women were on an equal footing with men. We participated equally in feasts and brideprice transactions and we participated equally with men in the decision-making processes. But just in the last hundred years, during the Second World War and the colonial era, our status has dropped dramatically in comparison [to] that of our men.'*

#### KEY POLICY RECOMMENDATIONS:

- ▶ *A great deal more research is needed in the Pacific on women's land rights, including methods for protecting and enhancing traditional systems that empowered both men and women as equal partners.*
- ▶ *Constitutional and legislative reforms are required across the Pacific to ensure equality of women and men with respect to land and resources.*
- ▶ *All land reform programmes and policies should include women's land rights as a core objective.*



*Decision-making of women at all levels of society is a measure of empowerment.*

For further information, contact Treva Braun, Gender Equality Adviser (teab@spc.int).

## REFERENCES

- <sup>1</sup> Demographic and Health Survey, Solomon Islands, 2006–2007 ([http://www.spc.int/sdp/index.php?option=com\\_docman&task=cat\\_view&gid=46&Itemid=42](http://www.spc.int/sdp/index.php?option=com_docman&task=cat_view&gid=46&Itemid=42))
- <sup>2</sup> Demographic and Health Survey, Republic of the Marshall Islands, 2007 ([http://www.spc.int/sdp/index.php?option=com\\_docman&task=cat\\_view&gid=46&Itemid=42](http://www.spc.int/sdp/index.php?option=com_docman&task=cat_view&gid=46&Itemid=42))
- <sup>3</sup> Demographic and Health Survey, Tuvalu, 2007 ([http://www.spc.int/sdp/index.php?option=com\\_docman&task=cat\\_view&gid=46&Itemid=42](http://www.spc.int/sdp/index.php?option=com_docman&task=cat_view&gid=46&Itemid=42))
- <sup>4</sup> Family Health and Safety Study, Samoa, 2007 ([http://www.spc.int/hdp/index.php?option=com\\_docman&task=cat\\_view&gid=41&Itemid=44](http://www.spc.int/hdp/index.php?option=com_docman&task=cat_view&gid=41&Itemid=44))
- <sup>5</sup> Family Health and Safety Study: A Study on Violence against Women and Children, Solomon Islands, 2009 ([http://www.spc.int/hdp/index.php?option=com\\_docman&task=cat\\_view&gid=39&Itemid=44](http://www.spc.int/hdp/index.php?option=com_docman&task=cat_view&gid=39&Itemid=44))
- <sup>6</sup> Family Health and Support Study: A Study on Violence against Women and Children, Kiribati, forthcoming
- <sup>7</sup> Huffer, E. (ed.) 2008. *Land and women: The matrilineal factor. The Cases of the Republic of the Marshall Islands, Solomon Islands and Vanuatu*. Suva, Fiji: Pacific Islands Forum Secretariat. (<http://www.forumsec.org.fj/resources/uploads/attachments/documents/Land%20and%20Women.pdf>)
- <sup>8</sup> Jaspard, M., Brown, E. and Pourette, D. 2004. *Les violences envers les femmes dans le cadre du couple en Polynésie française*. *Espace, Populations, Sociétés* 2:325-341
- <sup>9</sup> Salomon, C. and Hamelin, C. 2008. *Challenging violence: Kanak women renegotiating gender relations in New Caledonia*. *The Asia Pacific Journal of Anthropology* 9:1.
- <sup>10</sup> Second Generation HIV Surveillance Surveys (<http://www.spc.int/hiv/downloads/second-generation-surveillance-surveys/>)
- <sup>11</sup> UNDP-Pacific Centre and UNIFEM Pacific. 2006. *Translating CEDAW into law: CEDAW legislative compliance in nine Pacific island countries* (<http://pacific.unifem.org/index.php?p=92>)
- <sup>12</sup> UNFPA Research Papers in Population and Reproductive Health Series: *Reproductive Health Knowledge and Services* ([http://pacific.unfpa.org/pubs/pub\\_usp.htm](http://pacific.unfpa.org/pubs/pub_usp.htm))



*'States Parties shall take all appropriate measures to modify the social and cultural patterns of conduct of men and women, with a view to achieving the elimination of prejudices and customary and all other practices which are based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women.'*  
(CEDAW article 5(a))



## CONTACT DETAILS

Secretariat of the Pacific Community

---

SPC Headquarters  
BP D5  
98848 Noumea Cedex,  
New Caledonia  
Telephone: +687 26 20 00  
Fax: +687 26 38 18

SPC Suva Regional Office  
Private Mail Bag,  
Suva,  
Fiji Islands  
Telephone: +679 337 0733  
Fax: +679 377 0021

SPC Regional Office North Pacific  
PO Box Q,  
Kolonias, Pohnpei, FM 96941,  
Federated States of Micronesia  
Telephone: +691 320 7523  
Fax: +691 320 2725

---

Email: [spc@spc.int](mailto:spc@spc.int)  
Website: [www.spc.int](http://www.spc.int)