

Chapter 11: Risks And Protective Factors For Violence By Husbands And Intimate Partners



Summary of main findings

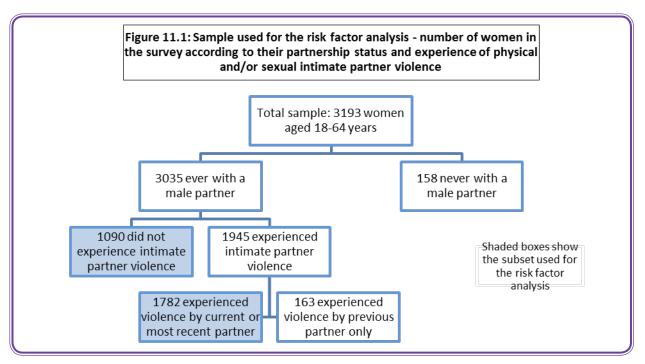
- The most significant risk factors for women experiencing partner violence in Fiji today relate to the behaviour and life history of her husband/partner including: if he drinks alcohol weekly or daily, has affairs with other women, is violent with other men, or was regularly hit or beaten as a child.
- Current risk factors in the woman's background are: if her first sexual experience was forced or coerced, if she grew up in a family where her mother was abused, and if she rarely speaks with members of her family.
- Young women under 25 are currently more at risk from experiencing intimate partner violence, and young men under 35 are more likely to perpetrate violence against their wives/partners.
- Other risk factors during a woman's lifetime are: if she was sexually abused since she turned 15 by someone other than her husband/partner, if she has 5 or more children, and if she lives with her husband's/partner's family.



This chapter begins with a brief description of the method for the statistical analysis of risk and protective factors associated with violence by husbands and intimate partners. Both lifetime and current risk factors are presented. The factors that were found to be the strongest predictors of a woman experiencing partner violence are discussed, in addition to those characteristics that protect women from violence. (See Annex 6 for a glossary of the statistical terms used in this chapter).

11.1 Method for statistical analysis of risk and protective factors

The aim of the statistical analysis is to identify the factors that increase or reduce women's risk of experiencing violence by their husband or intimate partner. The sample group for the analysis includes ever-partnered women who answered questions regarding their experience of physical and/or sexual violence by a husband or intimate partner. Among those women who did experience partner violence in their lifetime, only those subjected to violence by their current or most recent partner were included in the analysis (Figure 11.1).



Twenty-nine potential risk and protective factors were explored in the statistical analysis. These included the following (Tables 11.1 and 11.2 of Annex 1):

Characteristics relating to the woman, such as her age, education level, whether she currently has a partner, her age when she first married, whether she earns her own income, the number of children she has, and her ethnicity. Her other experiences of violence were explored, including whether she had been physically or sexually abused by people other than a husband or intimate partner since she turned 15, whether she had been sexually abused as a child, and whether her first sexual experience was wanted, coerced or forced. The history of violence in her family background was considered, including whether her own mother was physically abused by her mother's husband/ partner. Variables relating to the woman's immediate support network were also explored including the proximity of the woman's family, how often she talks with family members, whether she feels she can count on their support if she needs help or has a problem, and whether or not she lives with her birth family or her husband's/partner's family.



- <u>Characteristics relating to the husband/partner</u>, such as his age, education level, employment status, how frequently he consumes alcohol, whether he has had fights with other men, and whether he has parallel relationships that is, sexual relations with other women while still in an intimate relationship with his wife/partner. The history of violence in his family background was also considered, including whether his mother was physically abused by his mother's husband, and whether he was regularly hit or beaten as a child by someone in his family.
- <u>Household and relationship characteristics</u>, including socio-economic status, age differences between the woman and her husband/partner, and differences in educational levels between them.
- <u>Location</u>, including whether women live in the Central, Eastern, Northern or Western Division of Fiji.

Statistical analysis was used to assess the significance of the association between intimate partner violence and each potential risk or protective factor. This was done to asses risk factors over a woman's <u>lifetime</u>; <u>current</u> risk factors was also identified, based on whether women experienced physical or sexual partner violence in the previous 12 months before the survey. The statistical analysis was done in 2 stages:

- Univariable analysis, where each factor was assessed in isolation. For each variable, its statistical
 significance was calculated (P value), and the effects of each variable were identified in terms of
 odds ratios, relative to a reference category.
- Multivariable analysis, where the aim was to identify those factors that most significantly affect the likelihood of partner violence, after controlling for all the other variables. Variables with P values of more than 0.1 in the univariable analysis were excluded from the multivariable analysis. The final analysis identifies risk factors that have the strongest association with intimate partner violence including: odds ratios for each variable (an estimate of the likelihood that any woman with that particular characteristic will experience partner violence); confidence intervals (which provides a range of error for the odds ratio); and P values, which show the strength of the statistical association with intimate partner violence (Tables 11.1 and 11.2 of Annex 1).

11.2 What factors increase women's lifetime risk of domestic violence?

The multi-variable analysis showed that 12 factors are the strongest predictors of whether women experience physical or sexual violence from a husband/partner in her lifetime. These include characteristics in the women's background, the husband's background, and other factors (Box 11.1).

Factors relating to the background and characteristics of the woman:

Significant factors in the woman's background include the following (Table 11.1 of Annex 1):

- Women who were sexually abused since they turned 15 by men other than their husbands/partners are 4.6 times more likely to experience partner abuse than women who had not been sexually abused by other men; 86% of women who were sexually abused by others have also experienced partner violence.
- Women with 5 or more children are twice as likely to experience partner violence, and women with 3-4 children are about 1¹/₂ times more likely, compared with those who have no children.
- Women whose mothers were beaten are about 1¹/₂ times more likely to experience partner violence, compared with those whose mothers were not beaten; 77% of those whose mothers were beaten have also experienced partner violence themselves.
- Women whose first sexual experience was coerced are about 1¹/₄ times more likely to experience partner violence, compared with those who wanted their first sexual experience.
- Women who are living with their husband's family are 1¼ times more likely to experience partner violence compared with those who are not.



Box 11.1: Lifetime risk factors for physical or sexual partner violence	
Factors in her background	Factors in her husband's/partner's background
She was sexually abused since she turned 15 years	He has sexual relationships with other women when
old by someone other than her husband	he is still in a relationship with her
She has 5 or more children	He has fights with other men
Her mother was hit by the mother's husband or	He was hit or beaten regularly when he was a child
boyfriend	
Her first sexual experience was coerced	He drinks alcohol weekly or daily
She lives with his family	
Other factors	
Ethnicity, lower socio-economic cluster and location (higher prevalence in the Eastern Division)	

Source: Table 11.1 of Annex 1.

Factors relating to the behaviour and life history of her husband/partner:

Significant factors are as follows (Table 11.1 of Annex 1):

- Women whose husbands/partners have parallel relationships with another woman are 3½ times more likely to have been subjected to physical or sexual partner violence; 87% of these women have experienced partner violence in their lifetime.
- Women whose husbands have been involved in fights with other men are almost 3 times more likely to physically or sexually assault their wives and partners, compared with those whose husbands have no history of violence with other men; 88% of women in relationships with men who fight with other men have been subjected to domestic violence.
- Women whose husbands were regularly beaten as children are 2¼ times more likely to physically or sexually abuse their wives, compared with men who had not been hit by other family members when they were boys; 81% of women in relationships with men who were beaten as children have been subjected to domestic violence.
- Women whose husbands drink alcohol weekly or daily are about 1³/₄ times more likely to perpetrate domestic violence, compared with those whose husbands/partners drink alcohol less than once a week; 77% of women with husbands/partners who drink frequently have experienced partner violence in their lifetime.

Other risk factors:

Three other factors emerge as being significant predictors of whether a woman will experience partner violence during her lifetime:

- Indo-Fijian women are about half as likely to experience partner violence as i-Taukei women, and those from other ethnic groups combined.
- Women from the lowest socio-economic cluster are 1³/₄ times more likely to experience partner violence than those from the highest socio-economic cluster.
- Women in the Eastern Division are about twice as likely to experience violence during their lifetime as those in the Central Division, women in the Northern Division are about 1¹/₂ times more likely, and those in the Western Division are about 1³/₄ times more likely.

11.3 What factors increase women's risk of domestic violence today?

Twelve factors are strong predictors of whether women are <u>currently</u> experiencing physical or sexual violence from a husband/partner; as noted above, these have been identified based on whether women experienced physical or sexual partner violence in the previous 12 months before the survey. Although there is some overlap with the lifetime risk factors mentioned above, there are also some key differences (Box 11.2).



Factors relating to the background and characteristics of the woman:

Significant factors in the women's background include the following (Table 11.2 of Annex 1):

- Women whose first sexual experience was coerced or forced are about 1³/₄ times more likely to
 experience partner violence, compared with those who wanted their first sexual experience.
- Women whose mothers were beaten are $1^2/_3$ times more likely to experience partner violence themselves, compared with those whose mothers were not beaten.
- Women who rarely talk with members of their family (less than once a week) are $1^{1/3}$ times more likely to experience partner violence, compared with those who see or talk with family members at least once a week.
- Women who are currently married or in an intimate relationship are about 8 times more likely to experience violence, compared with those who are no longer married or in intimate relationships, either because they have separated or divorced from their husbands/partners, or because they are widowed.
- Young women aged below 24 are significantly more likely to be living with partner violence now, compared with older women. The likelihood that women will be subjected to physical or sexual violence reduces steadily until women turn 50, when it drops off markedly(Table 11.2 of Annex 1).

Box 11.2: Current risk factors for physical or sexual partner violence	
Factors in her background	Factors in her husband's/partner's background
Her first sexual experience was coerced or forced	He drinks alcohol weekly or daily
Her mother was hit by the mother's husband or	He has sexual relationships with other women
boyfriend	when he is still in a relationship with her
She rarely talks with members of her family	He has fights with other men
She is currently married or in an intimate	He was hit or beaten regularly when he was a
relationship	child
She is young	He is young
Other factors	
Ethnicity and lower socio-economic cluster	

Source: Table 11.2 of Annex 1.

Factors relating to the behaviour and life history of her husband/partner:

Men's behaviours that increase women's risk during their lifetime are the same as those that increase women's current risk of experiencing partner violence, although the odds vary somewhat compared with lifetime risk factors (Box 11.2 and Table 11.2 of Annex 1):

- Women whose husbands drink alcohol weekly or daily are twice as likely to experience domestic violence, compared with women whose husbands/partners drink alcohol less than once a week.
- Women whose husbands/partners have parallel relationships are almost twice as likely to be subjected to physical or sexual partner violence, compared with those whose husbands/partners who are faithful.
- Women whose husbands/partners have been involved in fights with other men are about 1³/₄ times more likely to experience domestic violence, compared with those whose husbands do not fight with other men.
- Women whose husbands were regularly beaten as children are 1½ times more likely to be living with domestic violence, compared with women whose husbands were not hit when they were boys.
- Young men aged below 35 are more likely than other age groups to perpetrate partner violence; those aged over 45 are least likely to do so.



Other risk factors:

Two other factors are significant predictors of whether a woman will be experiencing partner violence now:

- I-Taukei women are about 1½ times more likely to be experiencing physical or sexual partner violence now, compared to Indo-Fijian women. Women from other ethnic groups are also about 1½ times more likely to experience partner violence as Indo-Fijian women.
- Women from the lowest socio-economic group are $1^2/_3$ times more likely to experience partner violence than those from the highest socio-economic group.

11.4 Discussion of findings

Exploring the factors that increase and reduce women's risk of experiencing intimate partner violence may help to identify the most effective approaches for preventing this serious problem. The risk factors identified above have important implications for all stakeholders who aim to effectively prevent and respond to the problem of violence against women. However, it is very important not to misconstrue any one factor as the cause of violence against women. As stated in the United Nations Declaration on the Elimination of Violence against Women, violence against women is the result of "unequal power relations between men and women" (UN 1993: preamble). Nevertheless, the findings on risk and protective factors give strong pointers to attitudes, beliefs and behaviours that need to change to strengthen prevention strategies on violence against women, particularly those factors that relate to the <u>current</u> risk of violence.

11.4.1 What factors are protecting women from partner violence now?

Leaving the violent relationship

By far the strongest protective factor to emerge from the statistical analysis is the finding that women who have separated or divorced from their husbands/partners and women who are widowed are at significantly lower risk of experiencing physical or sexual partner violence in the 12 months before the survey. This may seem self-evident, given the very high prevalence rates in Fiji, with 64% of all ever-partnered women having suffered from physical or sexual abuse in their lifetime and 24% in the previous 12 months (Figure 4.1). However, it is a very important finding from a prevention perspective, because it demonstrates that that the violence usually stops when women leave the relationship; only 7% of previously-partnered women experienced partner violence in the year before the survey, compared with 28% of those who were currently partnered (Table 11.2 of Annex 1). Given the significance of intergenerational risk factors – in other words, a history of violence in one's birth family (see the discussion below) – separation from the perpetrator can also be expected to have an important primary prevention impact for the children of women living with domestic violence.

This finding also highlights the importance of counselling to re-build women's self-esteem, confidence and knowledge of their human and legal rights. FWCC's Counsellors have observed that women who are very vulnerable – both emotionally and financially – may tend to fall into other relationships where violent patterns are repeated. However, women who take longer before choosing another partner may be more alert to the early warning signs of violence, including controlling behaviours and emotional abuse. Many community and church leaders and institutions such as the Family Court continue to advise women to reconcile with their violent husbands and partners, without putting in place steps to stop the violence or informing women of their rights and the full range of options available. Service-providers need to be aware of this finding when they provide counselling to survivors, to enable women to make their own informed decisions about whether they leave a relationship temporarily or permanently.



Socio-economic status

Higher socio-economic status emerges as a protective factor over a woman's lifetime and currently; conversely lower socio-economic status and poverty is a risk factor. However, it must be emphasised that women from higher socio-economic groups nevertheless experience partner violence at rates much higher than the global average prevalence of 30% (WHO 2013: 16). Moreover, poverty as a risk factor has less impact on a woman's likelihood of experiencing violence that the characteristics in her background or her husband's/partner's behaviour. Nevertheless, it is useful to consider this finding in relation to women's options if they are faced with domestic violence: the poorer a woman is, the fewer options she has, and this has a direct impact on her ability to make a decision to leave the violent relationship, which has the strongest protective and preventative impact. On the other hand, few have the resources to support themselves and their children, and women from all socio-economic groups have

little financial autonomy, with very high degrees of financial enmeshment and dependence (see Chapter 9).

Education

Education does appear to have some protective impact on both a woman's lifetime and current experience of partner violence. However, the association between partner violence and education level is only statistically significant for univariable analysis, and not for the multivariable analysis which controlled for all other factors or variables. This suggests that there is enormous potential for preventing violence against women and girls through interventions targeted at young people through the education



system; however, the potential for primary prevention has not yet been fully realised.

Women's support networks

It is interesting to note the factors that neither increased nor reduced women's risk of violence. Although living with the husband's/partner's relatives significantly increases women's likelihood of experiencing partner violence over her lifetime, living with her own relatives does <u>not</u> necessarily protect women. This is true for both lifetime and current experience of partner violence, with 30% of women living with their own families subjected to partner abuse in the 12 months before the survey. Being in frequent contact with her birth family (at least once a week) does not protect women from violence; nor does living close by to her birth family. A woman's belief about whether she can count on her family members for support if she needs help or has a problem also has no protective impact.

One factor relating to women's support networks does have a slight protective effect: women who talk at least once a week with family members are less likely to experience physical or sexual violence. All these finding highlights the need to inform and educate community and family members on how to support women living with violence, including by focusing on the importance of not losing contact with them – since a key feature of domestic violence is that women become progressively isolated, as the husband/partner exerts more power and control over her mobility and freedom of association.



Location

Location emerges as a key protective factor over a woman's lifetime, but not for her <u>current</u> risk of partner violence. In other words, although women in the Eastern Division have a much greater likelihood of experiencing violence in their lifetime compared with those from the Central and Western Divisions, women from all locations are currently being subjected to violence at about the same rates. Historically, FWCC has had less focus and impact in the Eastern Division. Lack of access to a range of services and the impact of traditional and conservative social structures have also made it harder for women to deal with and escape from partner violence.

11.4.2 Gender inequality

Risk factors that increase women's likelihood of experiencing intimate partner violence are directly related to social norms that reinforce gender inequality in Fiji society, as well as to norms and practices that condone violence. Looking at the predictors in the background of husbands/partners, most relate to the behaviours of men and the social construction of masculinity; whereas most of the risk factors in the women's background relate to acts of abuse that she has already suffered, or factors in her context that are beyond her control.

Risk factors in both the woman's background and those of her husband/partner can only be addressed if gender equality is promoted and progressively achieved, particularly changing attitudes and mindsets on women's human rights and their equal value as human beings – including changing men's attitudes that they are entitled to dictate when to have sex and with whom. The implication of all these findings is that social norms around gender relations, men's entitlements and sexual abuse need to be tackled head-on in order to prevent intimate partner violence.

Sexual abuse increases women's vulnerability to domestic violence.

Sexual abuse emerges as the most important risk factor in the background of the woman, over her lifetime and currently. This includes sexual abuse by someone other than her husband, and whether

her first sexual experience was coerced or forced. This tells us a lot about gender relations and women's status in Fiji. Women who have been sexually abused are blamed and stigmatised by the community; the assumption is that somehow the woman has brought it upon herself. Women themselves internalise this blame, suffering from low self-esteem and self-confidence as a result, and this increases their vulnerability to physical and sexual partner violence.

The notion that women are less worthy or damaged after they have been forced or coerced to have sex highlights the very low

How women feel about rape:

"She feels that he is more powerful, and that she is now worth nothing. She thinks her life has been ruined because she was raped." (Participants at an FWCC workshop, describing how a woman feels about herself after rape.)

status of women and how perceptions of their value are tied to their bodies and their virginity. FWCC Counsellors have countless examples of women who were forced to marry the men who raped them, or who coerced her to have sex the first time; often, they come to the centre to report physical violence, and after several counselling sessions they disclose that they were raped and forced into marriage. The view of the community and society is that after rape, she is no longer good enough for any other man, apart from the perpetrator. In addition, the perpetrator – now her husband – has established extraordinarily unequal power relations from the outset.



Although this survey has shown that most women have a strong sense of their sexual autonomy (Chapter 6), it is also very clear that men who perpetrate domestic violence do not respect this. The power imposed over women through the use of rape and sexual coercion is reflected in another lifetime risk factor, with women's risk of domestic violence increasing steadily with the number of children she has. Having many children can be an outcome of violence and control, due to women's lack of reproductive rights – such as the power to negotiate sex and to make decisions and choices about when to have a baby and the use of contraception. Furthermore, when a woman has many children, it is even more difficult for her to leave the violent relationship, support her children, and find someone in the family or community who will take her in.

Unequal gender relations and social constructions of masculinity fuel domestic violence

The strong association between men having extra-marital affairs (parallel relationships) and perpetrating domestic violence is an important finding that underlines men's sense of privilege including entitlement to sex. Engaging in multiple sexual relationships is clearly seen as more acceptable for men than women, and is also seen as a "manly" thing to do. FWCC Counsellors recount many cases where clients

have challenged men over having affairs with other women; this often leads to the angry reply that it is none of her business, and he can do as he likes, in addition to violent attacks. In other cases, FWCC Counsellors have found that men's extra-marital affairs are associated with violence because he feels guilty. There are also examples of men using extra-marital affairs to push their wife out of the marital home; in these situations, men argue that they didn't chase their wife away – rather, she left him because she would not put up with his infidelity.

Infidelity is an expression of masculinity:

"The same notions of masculinity that condone male infidelity also tend to support male violence or control." (WHO 2005: 69)

When women refuse to have sex, it is not uncommon for men to threaten that he can go elsewhere if she doesn't give him what he wants. Family and community members will often advise women to just accept men's infidelity, telling women to "just wait, he'll come back".⁷ Many other studies have also found that men who are violent towards their wives and partners are more likely to have multiple sexual partners (SPC 2009: 149; SPC 2010: 173; VWC 2011: 175; and WHO 2005: 69).

Men fighting with other men is also a significant predictor of the risk of domestic violence and is another key part of the social construction of masculinity in Fiji. It is closely linked to a social acceptance of violence as form of conflict resolution, and points to poor communication and negotiation skills. This risk factor has also been found in other studies in the Pacific region (SPC 2009: 139; SPC 2010: 169; VWC 2011: 173).

Unequal gender relations, domestic violence and tolerance for violence are learned

A history of intergenerational violence in the woman's family is an important predictor for lifetime and current partner violence. When a girl grows up in a family where her mother is beaten, she learns that violence is a "normal" part of relationships between women and men. According to FWCC Counsellors, girls growing up in this type of environment often have low self-esteem, and low expectations about relationships. Violence against women by their husbands has also been condoned by some Christian churches as a legitimate form of punishment or discipline – a fact which points once again to the very low status and power of women.

Men's violence against women is seen as a legitimate form of "discipline":

"I waited until I was not angry, and beat her with 'love', to teach her." (Participants at an FWCC workshop, describing a common statement made by men in community education workshops.)

⁷ Workshop with FWCC staff, September 2012.



Another aspect of learned behaviour is the general tolerance for violence in the community including through corporal punishment in the family and schools. Several of the attitudes discussed in Chapter 6 show that there is a high level of tolerance for violence, as do the findings on non-partner violence reported in Chapter 5. The risk factors discussed above reinforce these earlier findings.

In addition, two other predictors point to a high tolerance for violence. First, the fact that women are at greater risk of partner violence if they live with their husband's/partner's family (a lifetime risk)

underlines women's powerless and oppression in a social context where violence is condoned. Second, men who were hit or beaten regularly as children are more likely to perpetrate intimate partner violence, and this is both a lifetime and current risk. Being hit regularly as a child, and learning that power in family relationships is maintained by violence, is another integral part of the social construction of masculinity.

However, it is important to remember that some of the men who were beaten when they were boys are <u>not</u> physically abusing their wives and partners, and that not all women who grew up in families where the mother was beaten are currently in violent relationships themselves. This is a positive finding which confirms that new behaviour patterns can be established and nurtured based on an understanding of equality and human rights. Conversely, some of the men who were not beaten as children are now physically abusing their wives and partners – in these cases, the violent behaviour has also been learned, based on pervasive gender inequality and a general tolerance for violence in Fiji society.

11.4.2 Alcohol abuse

Having a husband who drinks alcohol weekly or daily is a significant lifetime and current predictor of women's risk of intimate partner violence. There is no doubt that excessive and frequent use of alcohol is a factor in contributing to men's use of violence. However, this should not be confused with the <u>causes</u> of violence (see boxes). Moreover, the interplay between alcohol and domestic violence is more complex than it may seem at first glance.

Men's violence against women reinforces gender norms:

"When a woman is subjected to violence for transgressing social norms governing female sexuality and family roles, for example, the violence is not only individual but, through its punitive and controlling functions, also reinforces prevailing gender norms. Acts of violence against women cannot be attributed solely to individual psychological factors or socio -economic conditions ... Explanations for violence that focus primarily on individual behaviours and personal histories, such as alcohol abuse or a history of exposure to violence, overlook the broader impact of systemic gender inequality and women's subordination. Efforts to uncover the factors that are associated with violence against women should therefore be situated within this larger social context of power relations." (UN 2006: 29)

Among the 2829 women who answered questions on their husband's/partner's alcohol consumption, 22% said that he drinks alcohol weekly or daily, and the remaining 78% said that he drinks occasionally, such as 1-3 times a month, or less than once a month. This means that about 1 in 5 men are drinking alcohol weekly or daily.

FWCC Counsellors note that alcohol consumption by the husband/partner can result in arguments about money; women transgressing social norms, by arguing with her husband and questioning his drinking, can be a factor associated with a violent attack. Moreover, being drunk is widely used as an excuse for bad behaviour, and community members will generally be more forgiving if the man is drunk when a violent incident occurs. Being physically or sexually violent while drunk feeds into a common myth that men cannot control their behaviour.



Moreover, the survey findings show that 65% of women have been beaten by husbands/partners who do <u>not</u> drink frequently (compared with 76% who drink daily or weekly, Table 11.1 of Annex 1). FWCC client statistics show that of 586 new cases of women seeking assistance with domestic violence in

2011, only 57 women (less than 10%) indicated that alcohol was involved. In the vast majority of these cases, extra-marital affairs by the husband was a major factor.⁸

Addressing alcohol consumption is a sound strategy for its own sake, given the public health costs and the range of damaging social effects on families and communities. Moreover, 29% of women in the survey said that drunkenness by their husband or partner was a factor related to violent incidents, and it ranks among the top 3 factors identified by women living with violence (Figure 6.5). Excessive drinking by men has been strongly associated with partner violence in almost every setting where research has been undertaken on violence against women, including in the Pacific region (Heise 2011: 46; SPC 2009: 144; SPC 2010: 171; VWC 2011: 173; and WHO 2010: 21). A recent evidence-based review of prevention efforts indicates that lowering the rates of binge drinking in high-income countries can reduce the overall level and severity of partner violence, and that alcohol use can be a good entry point for discussing marital relations, given that both women and men associate men's excessive drinking with

Alcohol is a factor but not a cause of domestic violence:

"It is totally wrong to think alcohol is the cause of the violence. ... The causes of domestic violence have to do with the fact that the man believes he has power over the woman and can treat her badly if he wants to. Some men have less control over themselves when they are drunk, and that is why they lash out. But they know that about themselves when they start drinking. They can choose not to drink because they know they become violent when they do. Drunkenness is no excuse for brutal behaviour." (FWCC 1992: 8)

domestic violence (Heise 2011: xiii, 46). Nevertheless, with so many predictors pointing to unequal gender relations, reducing alcohol consumption by itself is unlikely to be effective as a primary prevention strategy in Fiji. Other predictors all point to men's sense of entitlement and privilege and women's lower social status, in addition to a high tolerance for violence. These norms and expectations also need to be addressed in the context of any alcohol reduction program that is designed with the aim of reducing or preventing violence.

11.4.3 Ethnicity

The risk factor analysis confirms the findings from Chapter 4 on lower prevalence rates for women of Indo-Fijian background, compared with i-Taukei women and those from all other ethnic groups combined. These are very challenging findings and they expose a common myth that there is less violence against women in i-Taukei communities. The findings raise several questions, which could be pursued through future research and dialogue:

- Is there a higher tolerance for violence in general among i-Taukei communities? If so, what cultural and social factors contribute to the normalisation of violence, and how can these norms be changed?
- Is the prevalence of partner violence lower in Indo-Fijian communities because women are more likely to internalise attitudes about unequal power relations, and are they therefore less likely to challenge prevailing social norms and practices relating to women's traditional roles and status and other aspects of gender inequality?
- Why are i-Taukei women less likely to report the violence to people outside their families and communities, and more likely to report to hospitals; and why are Indo-Fijian women more likely to report to formal agencies such as the police and courts?
- What are the implications of the survey findings for prevention strategies, and for ensuring that women from all ethnic backgrounds can access services and family and community support when needed?

8 FWCC client statistics for 2011.



11.4.4 Age

Being young (under 24) is a significant <u>current</u> risk factor for women experiencing partner violence; and younger men (under 35) are more likely to perpetrate violence. These findings accord with FWCC's counselling and community education experience, which provides further insights into why young women are at significantly higher risk than older women.

Violence begins very early in intimate relationships in Fiji, as men establish their power by using both physical and sexual force. FWCC staff have noted that binge drinking occurs more frequently among men under 35; this may also be contributing to the higher risk of partner violence among young women and men. Men tend to have a much more active social life when they are younger; and young women who question the time and money associated with this may be beaten.

As women age in a relationship, they often adapt their behaviour to suit their husband's/partner's preferences and needs. For example, they may question him less, and they narrow their circle of friends. By adapting in this way, women seek to actively avoid situations that challenge his authority or that have been associated with physical violence. However, FWCC's counselling experience and the survey findings demonstrate that emotional violence and controlling behaviours do not reduce as women age, and in some cases they are even more intense.

Similar findings regarding the increased risk of young people were demonstrated in the WHO multicountry study (WHO 2005: 32-33). However, age is a much stronger predictor of intimate partner violence in Fiji than in other Pacific countries (SPC 2009: 149; SPC 2010: 173; VWC 2011: 175). The findings point to the need for specific and targeted interventions to prevent violence among young people, including through the education system.



Chapter 12: International Comparisons Of Prevalence



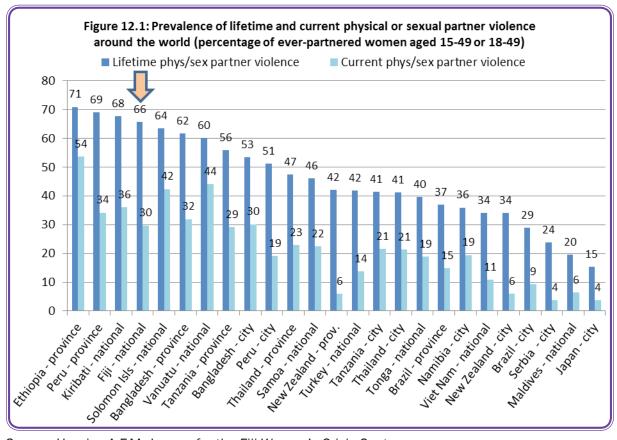
Summary of main findings

- Fiji has the 4th highest prevalence of physical and/or sexual partner violence over a woman's lifetime, compared with 20 countries that have used the WHO research methodology.
- Six Pacific Island countries have undertaken national research studies using the WHO methodology. Women in all 6 countries experience very high rates of both partner and non-partner violence compared with global averages.



This chapter presents a series of graphs which compare prevalence rates for partner and non-partner violence against women and girls. Comparisons are presented with 24 sites in 20 countries globally, and with 5 other countries in the Pacific region. All these countries have undertaken national, urban or provincial prevalence studies using the WHO methodology.

Prevalence rates in this chapter have been recalculated to use a consistent age range of 15-49 or 18-49 (in Fiji's case) to enable valid comparison. Consequently prevalence rates for Fiji presented in this chapter are slightly higher than those presented in Chapter 4, due to the lower prevalence rates among women in Fiji aged over 49 (see Table 12.1 of Annex 1).

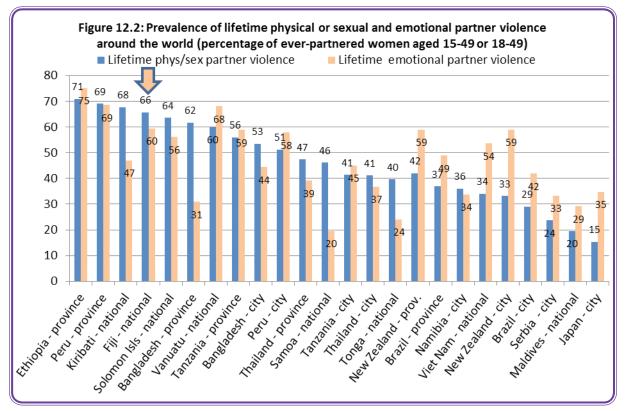


12.1 Global comparisons

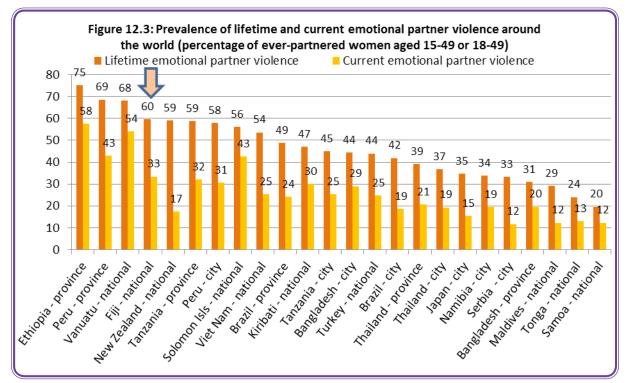
Source: Henrica A.F.M. Jansen for the Fiji Women's Crisis Centre.

Among all the study sites that have undertaken research into the prevalence of intimate partner violence against women using the WHO methodology, Fiji has the 4th highest prevalence globally at 66%. Three countries have higher rates of lifetime prevalence of physical and/or sexual partner violence: Ethiopia, Peru and Kiribati. Five countries have higher <u>current</u> rates of prevalence than Fiji, including provincial Ethiopia, provincial Peru, Kiribati, Solomon Islands, and provincial Bangladesh (Figure 12.1).





Source: Henrica A.F.M. Jansen for the Fiji Women's Crisis Centre.



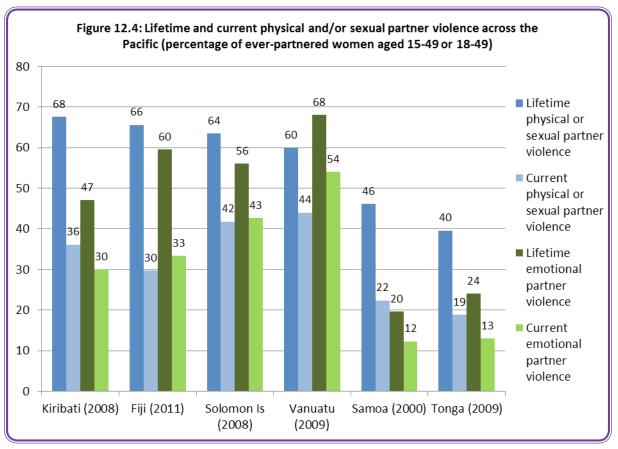
Source: Henrica A.F.M. Jansen for the Fiji Women's Crisis Centre.



Similarly, only 3 countries in the world have higher lifetime prevalence rates for emotional partner violence than Fiji: provincial Ethiopia, provincial Peru and Vanuatu (Figures 12.2 and 12.3). Figure 12.3 compares lifetime and current rates of emotional partner violence; Fiji is again among the top 5 in the world, with current prevalence rates exceeded only by Ethiopia, Peru, Vanuatu and the Solomon Islands (Figure 12.3).

12.2 Pacific comparisons

Intimate partner violence is extremely high in Melanesia, although the highest prevalence is in Kiribati with 68% of women experiencing physical and/or sexual violence in their lifetime, compared with 66% in Fiji, 64% in the Solomon Islands, 60% in Vanuatu, 46% in Samoa and 40% in Tonga. Lifetime experience of emotional partner violence is highest in Vanuatu (68%), followed by Fiji at 60%, Solomon Islands at 56%, Kiribati at 47%, Tonga at 24% and Samoa at 20% (Figure 12.4).



Source: Henrica A.F.M. Jansen et. al. 2013: 139.

Current rates of physical and/or sexual intimate partner violence are also extremely high in all Pacific countries, particularly in Vanuatu (with the highest current prevalence of 44%), Solomon Islands (42%), Kiribati (36%) and Fiji (30%). This compares with 22% in Samoa and 19% in Tonga (Figure 12.4). Current rates of emotional partner violence are also highest in Vanuatu (54%), followed by Solomon Islands (43%), Fiji (33%), Kiribati (30%), Tonga (13%) and Samoa (12%) (Figure 12.4).