



# Swimming Against The Tide

Lessons Learned from Field Research on Violence Against Women in the Solomon Islands and Kiribati



An aerial photograph of a tropical coastline. The water is a vibrant turquoise color, with white sand beaches visible along the shore. The land is a mix of green and brown, suggesting a mix of vegetation and cleared areas. The overall scene is bright and clear, with a high-contrast, almost ethereal quality.

*"I learned to work long hours, which is perhaps a 'bad thing', because I am a single mother. I learned about different personalities and about women and women's issues. I learned to ensure that we did a very good job. I am amazed about all that we, as women, have achieved. All this work on the ground is often immediately forgotten when the results are there. This is not right: it should be remembered!!"*

Coordinator of the Solomon Islands research team, interviewed one year after field implementation of the research



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on Violence Against Women in the  
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The views expressed in this report reflect those of the author. They do not necessarily reflect those of UNFPA.



## Foreword

We are very pleased to share this unique “lessons learned” document as we hope it inspires you to initiate, promote, support and be part of research on violence against women (VAW).

Research on VAW is essential. Evidence of women’s experience with various forms of violence, often at the hands of their partners – including the multiple negative consequences of violence for women, their families and communities – is usually lacking but crucial and the starting point for developing effective national legislation, policies and programmes to prevent and address violence against women.

In the Pacific, limited knowledge exists on the prevalence, causes and consequences of domestic violence – the most common form of violence experienced by women world-wide. In view of this, UNFPA initiated the first ever national representative study on domestic violence in the Pacific in Samoa in 2000. The Samoa study forms part of a UNFPA-supported multi-country study on violence against women in the Pacific and represents Polynesia, one of the three sub-regions of the Pacific. This was followed in 2008 by similar studies in the Solomon Islands and Kiribati, representing Melanesia and Micronesia.

UNFPA is proud to have initiated and supported these three studies in the region, using the research methodology and protocols of the WHO Multi-country Study on Women’s Health and Domestic Violence against Women. The Secretariat of the Pacific Community (SPC) acted as the implementing agency for the three studies whereas NZAid and AusAID generously provided funds in addition to the support provided by UNFPA.

This document is the result of an independent assessment, aimed at documenting the challenges faced and lessons learned in the process of carrying out the research in Solomon Islands and Kiribati. We hope that it provides valuable information for the governments, donors and implementing agencies in the Pacific and beyond who consider undertaking and supporting similar type of national representative research on VAW.

We would appreciate receiving your comments regarding the utility of this document as well as your experiences with research on violence against women.

Dirk Jena  
Director and Representative  
UNFPA Pacific Sub-Regional Office

## Acronyms and abbreviations

AusAID	Australian Agency for International Development
CSPro	Census and Survey Processing System (software for data entry and processing)
DHS	Demographic and Health Survey
DV	Domestic Violence
FWCC	Fiji Women's Crisis Centre
GBV	Gender Based Violence
KANGO	Kiribati Association of Non-government Organizations
KFHSS	Kiribati Family Health and Support Study
MISA	Ministry of Internal and Social Affairs (Kiribati)
MWYCA	Ministry of Women, Youth and Children's Affairs (Solomon Islands)
NGO	Non-Government Organization
NSO	National Statistics Office
NZAID	New Zealand's International Aid and Development Agency
RAK	Reitan Ainen Borotetanti Kamatu (women's fellowship for Kiribati Protestant Church)
RAMSI	Regional Assistance Mission Solomon Islands
RRRT	Regional Rights Resource Team
SFHSS	Samoa Family Health and Safety Study
SI	Solomon Islands
SISC	Solomon Island Support Committee (Committee of stakeholders)
SPC	Secretariat of the Pacific Community
SPSS	Statistical Package for Social Sciences (data analysis software)
TAP	Technical advisory panel
ToR	Terms of reference
UN	United Nations
UNDP	United Nations Development Programme
UNECE	United Nations Economic Commission for Europe
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
VAW	Violence against women
WHO	World Health Organization

# Purpose of this booklet

## The context: increased need for data on violence against women

In the last decade, there has been an enormous increase in the interest in violence against women (VAW) and its measurement by donors, UN agencies and governments around the world; an area that traditionally was the domain of researchers and activists working on VAW.

The increased recognition of the problem, the interest and pressure of political agendas towards (periodic) measurement of VAW indicators at national and regional levels, together with the easy availability of existing instruments to measure VAW, are positive advances that help monitoring and evaluating global and local efforts to eliminate all forms of VAW.

These positive advances, however, are not without risks. The sensitivity of the subject matter makes that its measurement is not only less amenable to quantification compared to people, births and deaths, inventories or goods, but there is a real risk that measurement of VAW jeopardizes safety of participants. This risk may increase further when measurements are done by those who previously have not dealt with measuring sensitive subjects and may not (yet) be fully aware of those risks and of the specific approaches that are recommended to minimize these risks.

It is important to realize that researching VAW is sensitive and often distressing with the potential to create significant risks for women participants, their families and the research field workers involved. But it is the only way to generate certain types of information, such as population-based data on prevalence<sup>1</sup>, incidence, severity, risk factors and consequences, and information that is needed to generate specific recommendations for a multitude of actors on ways to improve efforts to address VAW.

It is foreseen that research activities will continue in the Pacific, like in the rest of the world, as the importance of VAW and its impact on society is increasingly recognized. Governments, NGOs and donors are expected to scale up research and interventions, and countries where data on the prevalence of VAW is not yet available - at this moment still most countries in the Pacific - are likely to identify the need for research in the near future.

## What this booklet intends to do

This booklet summarizes lessons that emerged from the in-depth assessment of the *Socio-cultural Research on Gender-based Violence in Solomon Islands and Kiribati*<sup>2</sup> conducted in 2009 by the same consultant who wrote this booklet. The studies<sup>3</sup> in these two countries were undertaken in 2008 as part of a UNFPA-initiated and supported multi-country study on VAW in the Pacific.

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<sup>1</sup> 'Prevalence' in this context refers to the proportion of the target (at risk) population that experienced violence in a certain period of time (such as in their lifetime, or in the past 12 month). Prevalence rates are thus based on counting people. This differs from incidence/incidents, which is based on counts of events in a certain period of time in the target population. In the context of VAW the term 'frequency' is often used instead of 'incidence' due to the specific nature of domestic violence which makes it difficult to get exact counts.

<sup>2</sup> The official name of this project was '*Socio-cultural Research on Gender based Violence in Solomon Islands and Kiribati*'. 'Violence against women' and 'gender-based violence' (GBV) are overlapping terms. Though they are not exactly the same, they are often used interchangeably. To avoid confusion, the term 'violence against women' is used throughout this document instead of GBV.

<sup>3</sup> The terms 'research' and 'study' are used interchangeably throughout this document

The three countries involved in the multi-country study in the Pacific Region are Samoa (representing Polynesia), Solomon Islands (Melanesia) and Kiribati (Micronesia). The Secretariat of the Pacific Community (SPC) was the implementing agency for all three studies and AusAID provided funds for the latter two in addition to the support provided by UNFPA.

The in-depth assessment in 2009 covering the Solomon Islands and Kiribati aimed to evaluate the process and quality of the research implementation. The assessment occurred following completion of the research, at the time that the research reports with results for both countries were being finalized. The assessment used individual and group interviews with representatives from implementing and donor agencies, NGOs, other stakeholders and project staff, as well as document reviews. It documented challenges faced and lessons learned in the process of carrying out the research, with special attention for the quantitative component of the research and for the transition from research results to policy and interventions.

- This booklet captures a number of context-specific and very practical lessons learned by the research teams in the Solomon Islands and Kiribati in undertaking these comprehensive studies on a sensitive topic. They are worth sharing with others who are considering implementing similar research. They provide hope and give guidance and courage to Pacific Island and other countries keen to undertake a similar study.
- This booklet also gives examples of how in the Solomon Islands and Kiribati the research itself has acted as an intervention and the impact of participation in the research on individuals and institutions.
- This booklet is intended for host governments, donors, implementing agencies and project managers and researchers in particular in the Pacific region, involved in or considering similar research for policy and action.
- It is expected to have a supplementary role, next to other existing protocols, manuals and guidelines for measuring VAW.

In this booklet the lessons learned are grouped around eight major phases/areas of research implementation, as summarized in Box 1.

**Box 1 – Lessons learned are presented around the following areas:**

1. Organization and management of VAW research projects
2. Design of the research
3. Recruitment, training and selection of field workers
4. Field implementation
5. Ethical and safety considerations
6. Data processing and analysis
7. Report writing, dissemination of results and transition to intervention
8. Impact of the research process on individuals and institutions



## What this booklet does not intend to do

The booklet does not have the intention to cover the methodological details of the studies (such as the sampling strategy and field procedures), nor to present results of the studies in the Solomon Islands and Kiribati. For details on this, as well as for more general methods and guidelines for VAW research, please refer<sup>4</sup> to:

- The reports for the studies in the Solomon Islands (2009) and Kiribati (2010);
- The protocol, manuals and ethical and safety guidelines developed for the *WHO Multi-country Study on Women's Health and Domestic Violence Against Women* (this methodology was replicated in the Solomon Islands and Kiribati);
- The more wide-ranging training manual *Researching Violence Against Women, a Practical Guide for Researchers and Activists* by Ellsberg and Heise (2005).

In particular, the WHO guidelines *Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence against Women*, lay out the key principles that should at all times guide research on VAW, such as ensuring absolute privacy when doing interviews with women and maintaining absolute confidentiality of information provided by respondents. It gives among others examples of safe ways to name the survey and explain the content to the community and describes how a high refusal rate and consequently a low prevalence estimate could potentially be used to question the importance of VAW as a legitimate area of concern; and thus undermine the very objectives of such research.

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<sup>4</sup> Full references are given in the back of this booklet



# Background to research on violence against women in the Pacific region

## Why is research on violence against women needed in the Pacific region?

Violence against Women (VAW), and more specifically Gender-based Violence (GBV) is one of the major public health and human rights problems in the world today, also in Pacific Island countries. It is both sustained by and in turn helps to sustain women's unequal status in society. Its serious consequences on women's health and well-being and on that of their families and community compel us to take action.

The violence that women and girls experience occurs most frequently hidden inside the home, at the hands of intimate partners and family members, and is therefore difficult to recognize and document and even harder to prevent.

A lack of understanding of the magnitude of the problem, its causes and consequences, or whether these characteristics are similar or different across cultures and countries, including in the Pacific region, hinders the development of efforts to address it. While much has been done in recent years, it is still an urgent challenge in the Pacific to get VAW more firmly on the political agenda. Many governments and people are still indifferent to the problem and hold the view that VAW is a personal and private matter and even acceptable as control or disciplinary measure. This misconception needs to be challenged with good quality evidence that can bring to the attention the considerable social, economic and health consequences of VAW in Pacific island communities.

## What research on VAW has already been done in the Pacific region?

In the past decade, several studies into VAW have been undertaken in countries in the Pacific region. One of the first studies of VAW in the region - allowing for international comparison - was the Samoa Family Health and Safety Study (SFHSS), which formed part of the earlier mentioned UNFPA-supported multi-country study, co-funded by New Zealand and implemented in 2000 by the SPC with technical support of the World Health Organization (WHO). This study in Samoa was at the same time part of the WHO Multi-country Study on Women's Health and Domestic Violence, using an early version (version 9) of the WHO questionnaire.

More recently, in 2008, similar studies have been done in the Solomon Islands and Kiribati, as part of the project Socio-cultural Research on Gender based Violence and Child Abuse in Melanesia and Micronesia. These three studies which used the same research methodology were designed to estimate prevalence of VAW and to identify country-specific causes, risk factors and consequences of domestic violence (especially partner violence) to enable the development of appropriate policies and programmes for response and intervention.

Besides these three studies conducted in the context of UNFPA projects, the same methodology was used in 2009 by NGOs in two other countries in the Pacific: in Vanuatu the research was implemented by the Vanuatu Women's Center in partnership with the National Statistics Office, and in Tonga it was implemented by the NGO Ma'a Fafine mo e Famili Inc. (MFF - For Women and Families Inc). Other countries in the Pacific are currently also planning to undertake research on VAW in the near future.

## Why replicate the methodology that was developed for the WHO Multi-country Study?

The five countries in the Pacific that have conducted a survey on VAW, all used the methodology that was developed for the WHO Multi-country Study on Women's Health and Domestic Violence (with Samoa effectively being part of this WHO study). This is an enormous strength of these studies because the use of a standard questionnaire and methodology ensures comparability of data between settings and the use of a validated and well tested methodology enhances credibility.

The development of the methodology for the WHO Multi-country Study started in 1997 to address the lack of reliable and comparable data on VAW, its consequences and root causes. Further, it aimed to provide evidence across culturally and geographically diverse countries on:

- The prevalence and frequency of different forms of VAW;
- The health consequences: associations between health outcomes and violence by intimate partners;
- Risk and protective factors for intimate partner violence in different settings; and
- Strategies and services used by women experiencing intimate partner violence.

Other objectives of the WHO Multi-country Study included: providing a model of ethical and methodologically sound research to measure violence cross-culturally; fostering collaboration between women's organizations working on violence, research institutions and government; and raising awareness of the problem among policy makers, health providers, researchers and others.

The WHO Multi-Country Study was one of the first studies to research domestic VAW across countries from a public health and gender-sensitive perspective. The methodology, combining qualitative and quantitative research methodologies, ensures reliable results that are comparable across countries. It further adheres to specific ethical and safety standards, developed for research on VAW, including putting great importance to training and involvement of researchers and interviewers, as well as support for field staff and respondents who need it. Further, it encourages the engagement of a range of actors in the research process to facilitate use of results leading to policy change and intervention. The standardized questionnaire is well-tested and validated for use in many different settings and can be used with minimal adaptation in most settings.

The actual implementation of the WHO Multi-country Study took place between 2000 and 2005. The methodology has become an international standard and example of best practice for research on VAW.

While the Multi-country Study itself has ended, continued research in countries where little is known on VAW is still much needed. The questionnaire and other materials produced for the WHO study are available and the methods are indeed widely replicated by countries and researchers.

Finally, having a pool of persons around the world familiar with the methodology greatly facilitates exchange of expertise and, in the process, the standardization and comparability of results.

# 1 Lessons learned on organization and management of VAW research projects

## Use of external technical resources

The coordination of a complex and sensitive research project like the *'Socio-cultural Research on Gender based Violence in Solomon Islands and Kiribati'* requires multiple levels of expertise: knowledge on project management, finances, logistics, qualitative and quantitative research, VAW, gender, ethics and safety as well as culturally specific knowledge. It would be ideal but also next to impossible to find all these levels of expertise in one and the same person. A fact is that there is still not much expertise on VAW research available in almost any country, which is not surprising given that to date only a limited number of studies of this nature have been conducted.

In the regional<sup>5</sup> and national project teams of the two countries there was indeed lack of expertise on VAW and on research, which caused a number of challenges. To fill the gap in expertise, the Regional Project Coordinator, who coordinated both studies in the Solomon Islands and Kiribati, had early on into the project established a Technical Advisory Panel (TAP) consisting of experts on VAW research around the world, which was formalized with a Terms of Reference (ToR). Any issues that arose could immediately be addressed by email.

Further, expert consultants were hired at crucial stages and/or for specific purposes: In particular for the training of interviewers for both the qualitative and quantitative part in both countries a consultant was hired who was experienced with the WHO methodology in an island country elsewhere. She was later on hired again to lead the data analysis and report writing process. Further an expert with a background on child protection was hired to oversee the child abuse component of the project (more details follow below). Finally, expert support for sampling and data processing was provided by staff of SPC headquarters to NSO and the country research teams.

**LESSON 1.1** Ideally, a project of this complexity should be coordinated by a strong team with project management as well as research and VAW/gender experience. Nevertheless, the experience from the Solomon Islands and Kiribati shows that it is possible to successfully coordinate and implement a difficult project also with staff that has not all the required and desired expertise, provided that adequate support and expertise is provided at all crucial phases. The assessment also showed that important contributing aspects were:

- Dedication, determination and team spirit of project staff;
- Planning-out strategies for areas where capacity is lacking by employing external resources and support to fill gaps; and
- At the same time, building capacity and skills of the project team.

<sup>5</sup> In this context, the terms 'regional coordinator' and 'regional team' refer to the coordinating team that was overseeing the country (national) research teams and the projects in both countries. The regional team was based in Solomon Islands.

**LESSON 1.2** External consultants can be vital to fill gaps of expertise in the project teams and to transfer and translate to the new context lessons from similar research elsewhere. Their ToRs should clearly indicate their precise role and responsibility. It is also constructive that the ToR clarifies upfront how specific contributions will be acknowledged in the outputs (such as reports) of the project.

## Role of stakeholders committee

A stakeholders committee with the appropriate membership and carried by the government is crucial for support to the study implementation, credibility, ownership and use of the results. It should be involved from the beginning and throughout the research process. As an example, the membership composition of the stakeholders committees in the Solomon Islands and Kiribati is presented in Box 2.

### **Box 2 - Membership of the stakeholder committees in Solomon Islands and Kiribati**

#### **Solomon Islands Support Committee (SISC):**

- Government: MWYCA, Ministry of Health (Medical Services and Social Welfare) , Department of Planning & National Aid Coordination, SI National Statistics Office, Ministry of Education, Prime Minister's office, Attorney General's Chamber, Public Solicitor's office, Women Lawyer's Association, Law Reform Commission, RAMSI Law & Justice Programme, Machinery of Government;
- NGOs: Save the Children, Family Support Center, Community Sector Programme, Development Services Exchange, SIPPA, National Council of Women, SICAFOW, Voice Blong Mere, World Vision;
- Donor partners and International Organizations: AusAID, UNFPA, UNICEF, WHO;
- Religious groups: Christian Care Center, SDA Dorcas, United Church, Catholic Women's League, Church of Melanesia (Anglican) Mother's Union, United Church;
- SI Police Force: Community Policing, Sexual Assault Unit, Family Violence Unit.

#### **Kiribati Family Safety Support Committee (KFSSC)**

- Government: Ministry of Health and Medical Services, Ministry of Internal and Social Affairs, Ministry of Finance and Economic Development, Attorney General's Office, Ministry of Education, Police;
- Women NGOs: Reitan Aine Kamatu (RAK), Teitoiningaina Women Association, Crisis Centre or Women's Shelter;
- NGOs: Kiribati Counsellors Association, Alcoholic Awareness and Family Recovery, Kiribati Association of NGOs (KANGO), Tetokatarawa Old Men Association, Kiribati Family Health Association, K-WAN (Kiribati Women's Advocacy Network);
- Local Government: Betio Town Council, Teinainano Urban Council;
- International Organizations: AusAID, UNICEF, WHO;
- Semi-Government Women NGO: AMAK (umbrella Women NGO).



Special mention should be made of the importance of the close involvement of the National Statistics Offices (NSO) in the stakeholders committee, as well as them being a special partner in the project because of their specific experience and expertise with surveys. The NSO has experience with calculating field work budgets, sampling, listing (enumeration of households), calculation of sample weights, questionnaire adaptation and data processing. Depending on the context, they can help out with arranging transport in the field (such as canoes, engines, fuel) as shown in the Solomon Islands, as well as in finding solutions for logistical issues that arise during the fieldwork. Their experience will contribute to the quality of the study and their involvement will enhance enormously the confidence, the credibility of the results and the sense of national ownership. Finally, involvement of NSOs in the research is key to building their capacity in doing research on this sensitive topic, using approaches that are new for NSOs. This is important, especially if the survey will be repeated periodically in the future.

**LESSON 1.3** Stakeholder committees are essential in supporting and steering the research implementation as well as the dissemination phase. Appropriate membership is crucial and should include high level government members, NGOs, service agencies and international aid agencies. It is further key for the success and credibility of the survey to include the National Statistics Office (NSO) not only in the stakeholder committee but as a partner during all stages of the project.

**LESSON 1.4** In both countries the committees were formalized with ToRs. For the committees to be most effective and to maintain their commitment they should meet regularly and the project teams should employ mechanisms to update, discuss and solve issues with the help of stakeholders such as the fortnightly stock-takings during the fieldwork.



## 2 Lessons learned on design of the research

### Adherence to WHO methodology and protocols

In general, when conducting research on VAW, a number of factors exist that complicate efforts to produce reliably comparable data, such as the complex terminological and definitional issues used around VAW, as well as differences in cultural, historical and legal understandings of VAW. Data comparability is further complicated by different data collections methods; different sampling methods; and within the same method, different approaches to asking the same questions which can result in varying responses.

Due to the complex and sensitive nature of the subject matter in combination with diverse contexts, no methodology can offer an ideal 'one size fits all'. Nevertheless, out of the need for comparable data, there is a general consensus that it is best to build on known models of 'best practice', such as the method developed by WHO.

The *WHO Multi-country Study on Women's Health and Domestic Violence* was developed in response to a need to collect data on VAW in countries where such data was lacking. It was designed to provide data in a comparable way and applicable to different cultures and geographical areas with a minimum of adaptation.

Both countries, the Solomon Islands and Kiribati, involved in the assessment (as well as three other countries in the Pacific region: Samoa, Tonga and Vanuatu) followed the methodology of the WHO Study. This included aspects such as the establishment of a stakeholders committee, the use of the three-week training curriculum for interviewers, the field monitoring and quality control procedures and the ethical and safety procedures.

In the studies in the Solomon Islands and Kiribati, the main deviations in terms of adherence to the WHO methodology were the following:

- Use of a national representative sample of women (instead of one or two regional samples as proposed in the WHO protocol, because in most countries resources will not suffice for a national sample). A well-designed nationally representative sample is actually superior to regional samples, and the only way to produce national level data.
- The addition of a set of questions on child abuse (this will be elaborated below).
- The development of a data entry system using CSPro software, instead of the data entry system in EpiData that was developed for the WHO study. This was due to the familiarity of NSOs with CSPro (this will be elaborated further below).

The assessment showed that these alterations in the methodology are unlikely to have compromised the comparability of the data on VAW.

Like the majority of countries in the WHO study (with the exception of Samoa) the studies did not include surveys of men because generally the mandate was to focus on VAW, and in the Solomon Islands and Kiribati also on child abuse.

**LESSON 2.1** All known VAW research in the Pacific Region (to date in five different countries) successfully applied the same methodology; they replicated the methods for the WHO Multi-country Study on Women's Health and Domestic Violence. Future research in the Pacific should preferably use the same methodology for reasons of credibility, comparability and to be able to build on and share existing experience and expertise in the region.

**LESSON 2.2** There are a number of reasons why future studies may consider including surveys of men, who usually are the perpetrators but sometimes also victims/survivors of violence. It will be useful to understand their experiences and, when they are perpetrators, to hear their side of the story. This will enhance our understanding of the problem and its possible solutions. It should be realized, however, that this will considerably increase complexity and resources, in particular because of the need of a separate sample (men should not be interviewed in the same households or even in the same communities as women), a different group of (male) interviewers, etc.

## Translation and adaptation of standardized questionnaire

In Kiribati and the Solomon Islands, the WHO generic questionnaire (Version 10) was used with only a few minor changes to make the questionnaire more culturally appropriate. The adaptations of the questionnaire were based on discussions with the stakeholders committees and were reviewed by the TAP, to ensure that new/altered questions were placed correctly in the questionnaire, did not interrupt the question flow, did collect the data desired, and would not be missed if questionnaire filters and skips are followed.

Adaptations were appropriate and a couple of questions were included to capture unique aspects of the local context, such as on ethnicity, religious affiliation and specific features of partnership formation (e.g. related to bride-price). Further, new response categories for a few of the existing questions were included. This was in particular to cover relevant answer options for perpetrators of non-partner violence (e.g. 'militants' were added as a category in the Solomon Islands study).

In terms of adaption of the questionnaire, the project teams considered it an advantage to have been able to draw on the expertise of several persons who worked on the original WHO questionnaire so that they were even able to apply some modifications that the original authors recommend but that have not (yet) been formally documented<sup>6</sup>.

The one noteworthy difference with the original WHO questionnaire was that the questionnaire in the Solomon Islands and Kiribati included a short module to measure child abuse in the households of the respondents. This was considered desirable by one of the donor partners because child abuse had been identified as a major problem and its inclusion in the questionnaire was expected to provide information about the association between VAW and child abuse in the same household.

The questions of child abuse were newly developed and modelled on the partner abuse questions. For ethical and safety reasons children should not be interviewed in their households on their experiences

<sup>6</sup> One example of such a modification is the deletion of original question 716 on the timing of the relationship and the violence experience, which had not yielded useful results in most countries where it was applied.

of domestic violence. Therefore, the new child abuse module was developed to be administered to the same female respondent who answered the other sections of the questionnaire. The child abuse module enquired about domestic violence experiences of her children.

As a positive finding, the questions on child abuse achieved relatively high disclosure of child abuse and women rarely refused to answer them. Because the questions were new and not validated, areas for improvement were identified, as mentioned in the full assessment report (to be considered in case the module would be used some other time or in a different context).

It is of relevance to point out that the consultant who was hired for the child abuse component had a strong background in child protection. To minimize the potential negative effects of administering the child abuse module, the consultant had developed a special protocol, with instructions on where to refer a child who was considered to be seriously at risk. Further, she closely worked with the interviewers throughout the process. While the assessment did not find evidence of serious issues caused by including the child abuse questions, it is important to stress that a similar context and level of support will be rarely the case and generally inclusion of child abuse questions in a survey on VAW is discouraged, even when children themselves are not interviewed. This is particularly so because there are far-reaching methodological, ethical and safety issues as well as in most cases legal implications of doing this.



Firstly, the validity of the results on child abuse by asking questions to mothers about the experience of their children is questionable. Other methods exist, that are however outside the scope of a VAW study (such as the UNICEF studies specifically developed for this purpose).

Secondly, the interviewer will encounter serious ethical dilemmas if she will find out that a child is at risk/in danger, as in most contexts she would need to inform respondents in advance about limits associated with confidentiality in this regards; in many countries cases of child abuse would by law need to be reported to the appropriate authorities (note that such a law was not yet in place in these two countries). Further, the interviewer would need to be able to offer acceptable follow-up interventions.

Finally, adding an additional module on any subject would have the potential downside of compromising the flow and length of the questionnaire, and thus the quality and comparability of VAW data.

**LESSON 2.3** In terms of adaptation of the questionnaire: for reasons of comparability, countries should keep the changes to a minimum (except for capturing unique aspects of the local context) and avoid adding more questions to the standard core questionnaire, unless essential.

**LESSON 2.4** It is crucial to allocate sufficient time and resources to properly translate and pre-test the questionnaire, well in advance of the interviewer training, and only fine-tune the translation during interviewer training (otherwise, precious time during training will be spent towards long discussions about translation and wording). Print the final questionnaire as late as possible to be able to incorporate last minute corrections.

**LESSON 2.5** There is no evidence that inclusion of child abuse questions had major adverse effects in the Solomon Islands and Kiribati. This could be attributed to close involvement of an experienced child protection expert, the dedicated training and protocols developed around the child abuse module, as well as to the absence of legal requirements to report child abuse. Nevertheless, such a context and level of support is exceptional and countries should be extremely cautious to use questions on child abuse in a survey on VAW, because of the complex methodological, legal, ethical and safety issues.

## Value of formative research

A formative (qualitative) research component can provide additional data on dimensions for understanding VAW, clarify issues that were raised by survey findings and collect context information to better understand local gender norms, values and customs.

Qualitative research in both countries took place after the quantitative survey. This was appropriate. For the research report, the results of the qualitative phase of the study were used to inform the interpretation of the quantitative results and the results added real life stories and a human face to the numbers in the report. However, a wealth of data, in particular data collected from support agencies had not yet been analysed and thus was not reflected in the reports. This is unfortunate because, these unused data can potentially be useful for understanding and improving prevention and response activities.

Finally, much of the formative research was on men. Getting data from men is crucial to learn about experiences and viewpoints of men. This will be even more important when a survey on men cannot be done. An emerging hypothesis is that for men, the use and control of violence – in both the private and public sphere – is a critical feature of their social identity and sense of manhood. Further, we also need to learn from the many men who are not violent. Men are essential as part of the solution and need to be involved and engaged in effective prevention of and response to VAW.

**LESSON 2.6** It is essential that before embarking on qualitative research the project should have sufficient clarity about the purpose and the type of information that is being sought; for example to collect context information that cannot be collected with a questionnaire or clarify survey findings. Furthermore, it will generally be useful to collect narratives to illustrate the quantitative results and give them a human face. It is important to plan in advance how to analyze and use the results and to allocate adequate resources for this.

**LESSON 2.7** It is important to include in the qualitative research a substantial component focussing on men, to learn about and from their experiences and viewpoints. This is particularly relevant if quantitative research will be done with female respondents only.



### 3 Lessons learned on recruitment, training and selection of field workers

#### Recruitment and selection of field workers

As is known from the wealth of previous experience with research on VAW, the recruitment, training and selection of field workers (i.e. interviewers, field supervisors and editors) is critical because the quality of the results depends on it.

Following the WHO ethical and safety recommendations, all field workers in both countries were women and more were recruited and trained than used in the field. According to the NSOs it was a first for both countries to work with only women interviewers.

Box 3 summarizes the process of recruitment and selection for the Solomon Islands and Kiribati and shows how the project team had learned from the experience in the first country to avoid mistakes in the second country. As a consequence recruitment and selection was handled much better in Kiribati than in the Solomon Islands.

#### **BOX 3 - Recruitment and selection of field staff in Solomon Islands and Kiribati**

In the **Solomon Islands**, the positions for interviewers ('field researchers') were advertised in the local daily newspaper, though in practice interviewers came into the study through a number of ways: some were interviewed for the job; some were brought in by others. The three-week interviewer training started with a large pool of 95 trainees. Every three days some were dismissed. The elimination procedure caused stress to the trainees. After the training, the pool had reduced from 75 to 45 (with five spare interviewers). The elderly and vocal women leaders of NGOs were least suitable to be interviewers, because they were very opinionated, and at the same time not literate enough. The best interviewers were the younger, better educated women. Many of the dismissed women were not happy about the process and threatened to discourage communities to participate in the study.

In **Kiribati** recruitment of field workers was done through newspaper and radio announcements, which resulted in 250 applicants. A test (including an NSO test on household listing, involving mathematics) was part of the screening. Sixty women were recruited for the three-week training and after the training 34 field workers were retained. In contrast with the process in Solomon Islands, interviewers were told at the beginning that they could be dismissed without reason given. The trainees had signed in advance a form indicating that they understood and agreed on the process. Dismissal was not done on a daily basis but at two key moments: the first time that trainees were dismissed was at the end of the first week, and the final selection was made at the end following the pilot. Those who were not used for the field were told they were reserves. This caused less bitterness.

**LESSON 3.1** A well-conducted recruitment process, including a well-designed screening procedure, is essential to get good quality interviewers. Initial selection criteria should further include whether interviewers can be away from home for extended periods of time, physical fitness (especially for difficult geographical terrains) and positive attitudes, such as the ability to deal with difficult team dynamics and field logistics.

**LESSON 3.2** Always recruit more field workers/trainees than required because some trainees may not be adequate and others may want to withdraw from the job. It appeared most practical to have selection moments at fixed points during the training with the final selection after the pilot. It is important to clarify and agree on the selection process from the beginning so that everybody knows that not all can be hired and that some may be kept as reserves if others drop out.

## Training of field workers

In both countries, the three-week training schedule, as proposed in the WHO protocol, was adhered to. In general, interviewer training was considered to be long and tiring but everybody interviewed in the assessment agreed that the training cannot be shorter. Further, there was consensus that training was the most important aspect for the success of the study.

In practice, the training of all field workers - interviewers, field supervisors and editors - needed to continue during early stages of fieldwork to make sure they did their task well.

The field workers felt that consistency checks (which are part of field editor training) should ideally be taught to every interviewer to achieve a better understanding of the questionnaire. They agreed that thorough familiarization with the questionnaire and its structure was crucial to get the necessary information from the respondents.

Furthermore, it was considered useful for supervisors to conduct some interviews themselves (during the pilot) to feel how it is to interview and to deal with women's reactions. This experience would make them better supervisors.

In general, the WHO manuals recommend to the extent possible to involve in the training of field workers the rest of the research team, including data processing staff. The assessment showed the importance of involving the data manager/data entry supervisor early on in the research process and in particular in the interviewer training.

Such involvement from the beginning is very beneficial for the research for the following reasons:

- The data manager will be familiarized with the questionnaire early on and thus will be better positioned to assist in identifying design issues with the questionnaire, as well as coding and editing issues;

- The field workers will have the opportunity during their training to learn from the data manager the procedures around the flow of the questionnaires and in particular how to complete and organize the materials (questionnaires, field monitoring forms and all related documents) that need to be sent back from each cluster<sup>7</sup>.
- A data manager who through involvement in the training understands the field procedures from the point of view of the field workers/interviewers will be able to better understand issues in the field when they arise. This will facilitate feedback during the fieldwork (e.g. when during data entry it is discovered that interviewers make errors in completing the questionnaire).

**LESSON 3.3** Three week training of field workers/interviewers (with one week dedicated to pilot/practice) is essential not only to cover the training curriculum - including gender and violence sensitization and ethical and safety guidelines as well as technical matters around questionnaire and fieldwork - but also to establish team building and sense of ownership and commitment.

**LESSON 3.4** It is essential that the data entry manager participates during the entire interviewer training. This will contribute to his/her understanding of the questionnaire and field procedures; it will help to identify design/coding errors in questionnaire at an early stage; and facilitates appropriate feedback from data manager (via central project team) to interviewers during field work.

**LESSON 3.5** In the surveys in the Solomon Islands and Kiribati the refusal rate was very low. Once respondents start the interview, in almost all cases they completed it. Women appear to be willing to share experiences during the interview. Interviewers mentioned that their training had been crucial in given them the right skills to achieve this. These skills include for example creating a safe space and an empathic atmosphere in which women felt comfortable to share experiences that they usually kept silent.

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<sup>7</sup> A cluster is usually a village, community or ward. The term comes from 'cluster sampling' where each cluster is selected from a sampling frame. A cluster is often identical to an 'enumeration area' (as used in the census). At a next stage the sample households are selected from all the households in a cluster. A detailed explanation of sampling is beyond this document.



## 4 Lessons learned on field implementation

### Field teams, logistics and communication with central coordinating team

Both in the Solomon Islands and in Kiribati, field teams were formed immediately after the training; most field teams comprised of five (ranging from four to six) persons, including one field supervisor and one field editor.

In both countries, older mature women with people skills were selected as field supervisors and younger women who understood the questionnaire well were selected as interviewers and field editors. The field supervisors received additional training to give some psychological support to the field teams and, if needed and on a voluntary basis, to council respondents. The field editor was not only responsible for daily field editing of the questionnaire and other quality control measures, but also for assisting the whole field team with enumeration of the households in each cluster (usually with the help of a local guide). Further, she had to select the households to visit from the list of households per cluster, applying the method she had learned in the training.

The fieldwork in the **Solomon Islands** was extremely complex and long, approximately six months. Field teams were away for four weeks to two months at a time before coming back to the capital for a one-week break. The six month period in the field was felt as very long or rather too long. It also had a negative impact on the interviewers' families. The latter was the cause of dropouts halfway the fieldwork for which replacements needed to be found.

In the Solomon Islands, field teams contacted the central project office approximately every second day but sometimes less frequent due to lack of ways to establish communication. The coordinating team at the central office kept track of the whereabouts of all field teams and they updated their listing of field team movements on a weekly basis.

In the beginning, the national project team made several supervisory field visits to correct mistakes or boost the morale of the field teams. The project team however stated during the assessment that it would have been better if they would have made more field supervisory visits, but that they could not do so due to heavy workload.

In terms of field conditions, the field teams in the Solomon Islands were facing very complicated logistics, mountainous areas, rough seas and areas that were only accessible by foot. It was therefore not surprising that there were some ten dropouts halfway through the fieldwork. A new supply of field staff was brought in from the University, most had been involved in surveys conducted by NSO. The new recruits received only two week training. Because of the shorter training they were not employed as interviewers but as field editors, while the original editors went on to work as interviewers, so that they had a change of tasks. These original editors were also able to further train the new editors while in the field.

In terms of safety related to the logistically difficult situation, it is worth mentioning that in the Solomon Islands life jackets, shoes and watches were purchased for the field teams, in addition to the standard rain coats, torches, backpacks, that were usually provided in surveys.

The trucks, boats and canoes and their drivers were provided by NSO. This was very useful because the drivers knew the enumeration areas and were familiar with survey activities. It should however also be mentioned that partly because the NSO drivers had their own work programme there were frequent delays in the arrival of transport and fuel (sometimes several days!).

The supervisor questionnaire (which was administered in one household per cluster) and the field monitoring forms were considered very good and useful to discover which interviewers had issues. As an example, in the Solomon Islands by using the monitoring forms it was discovered that one particular interviewer had many more refusals than others. The reason for this appeared to be her different accent and looks. As a solution she got to do different activities: instead of interviewing she was asked to perform editing tasks.

In **Kiribati**, the fieldwork was much shorter, about eight to nine weeks. None of the field workers felt this was too long. The logistics was much easier. Each interviewer finished on average four interviews per day. In small teams the field supervisor also conducted interviews. There were no dropouts of field staff.

In Kiribati, communication between field teams and the central project office was easier than in the Solomon Islands. The project office was always reachable by phone, and for a large part of the field work the project office was physically nearby, on South Tarawa where most of the Kiribati population lives. In the outer islands the field teams had phones and radio communication. They contacted the central office every week according to a time table or whenever needed.

The travel to the sampled communities on the small islands in Kiribati was much easier compared to travel in the Solomon Islands. Means of transport used were plane, car, motorbike and boat. Interviewers could stay in guest houses or their own homes (the latter in South Tarawa where the largest part of the sample was).

**LESSON 4.1** In both Kiribati and the Solomon Islands, the field teams comprised of five (between four to six persons), including supervisor and field editors; this team size worked well. Field team supervisors were usually older and selected for maturity and communication skills, while interviewers and editors were usually younger.

**LESSON 4.2** Complexity of field logistics should not be underestimated but will vary between different geographical and cultural contexts and consequently duration of fieldwork can be very variable. Nevertheless, countries/research teams should be cautioned against having such a long time in the field as in the Solomon Islands, and strategies must be employed to address this, such as more interviewers, more breaks, better logistics in terms of timely provision of fuel and transport, etc.

**LESSON 4.3** It is essential to have regular contact between field team and central coordinating team. Experience shows that in particular in first weeks in the field a lot of trouble shooting is needed, both around data collection (e.g. correcting errors in interviews and clearing up confusion with certain questions in the questionnaires) as well as due to challenging team dynamics. Flexibility in the schedule is important to allow feedback, briefings on progress and further ongoing training in the field.

**LESSON 4.4** Do not underestimate the effect of moral support and the importance of supervisory (monitoring) field visits and plan sufficient resources in central project team for that. These visits should start early on, and should focus on solving difficulties with the interviews and questionnaire, as well as provide opportunities for counselling and support. The assessment showed that these monitoring visits from the central office were highly appreciated and resulted in feeling supported, improved morale and good relationships within field teams and between field teams and central project staff.

## Establishing contact with communities

To announce the survey in the Solomon Islands, letters had been sent out to all provincial governors, but not to the communities themselves. The national project team considered that the safety and confidentiality of respondents would be best served by giving as little publicity as possible; therefore they had not followed the usual procedure of announcing by radio that a survey was going to take place. As a consequence, at local level, community chiefs were not aware of the visits of field teams. In practice this was sometimes a disadvantage.

In general, upon reaching a community, the field team would meet with the community leader, show an official letter of introduction and explain the survey using the 'safe name' (which does not reveal that the survey includes questions on VAW). The field team would also explain that only certain respondents were selected. While in general there were no major issues with establishing contact with communities, the central project team afterwards judged that it would have been more helpful and time would have been saved if they had followed the usual procedure of NSO (including announcing the survey by radio), provided that the 'safe name' would have been used.

Examples of specific context-specific experiences with contacting communities are given in Box 4.

### Box 4 - Examples of experiences with contacting communities

Field teams in **Solomon Islands** had to deal, among others, with witchcraft and black magic. In Guadalcanal Vulolo, when entering a certain area the team was stopped by snakes and an eagle. They felt that it meant they could not go further and that they could not enter the village. Instead of giving up they gave the letters for the community to their local guides. These guides explained the survey and managed to convince the selected women to come down from the village to meet the field team to be interviewed. The team was proud to have managed to finish their work in that 'inaccessible' cluster in this way, without physically having been in the village.

In **Kiribati**, the issues in the field were of a completely different nature and the main issue that the teams encountered in the communities was that they were very often expected to attend *maneaba* activities (social community events); especially religious events. To limit this, the central project team had to impose a decision: the teams were instructed that if it was an all-island activity the field workers were allowed to attend, but they were not allowed to attend all religious activities. There were simply too many of such activities. Nevertheless it remained a tough instruction to follow because the Kiribati culture does not allow refusing such an invitation, especially if the invitation came from elders. The field workers also noted that the *maneaba* activities were generally very helpful to socialize and connect to the community. However on the downside, they also involved spending extra money e.g. contributions in the form of tobacco.

LESSON 4.5 To facilitate establishing contact with communities, it may generally be useful to announce a survey following the usual procedure of NSO, provided that the 'safe name' will be used and the subject matter of the survey will not be revealed.

LESSON 4.6 Assistance of local NSO staff is very useful in the field implementation and to get access to communities, especially in geographically complex areas where they are familiar with the area and the communities, as was in the case of the Solomon Islands. The local NSO staff were, however, not shown the questionnaires or informed about the real topic of the survey. This was appropriate for reasons of confidentiality and safety.



## 5 Lessons learned on ethical and safety considerations

### Ensuring confidentiality and safety of respondents

Researching VAW gives rise to numerous ethical and safety considerations and research teams have an obligation to address these issues in their research. They include safety measures in view of the increased risk to both researchers and respondents, the need to minimize distress to respondents, the need to prepare adequate support for respondents and interviewers, and informed consent and confidentiality. WHO argues that research on VAW should only be undertaken if these issues can be addressed and if the research will genuinely inform policy development for change.

An extremely important safety measure is the external presentation of the research projects in both countries: the 'safe name', as mentioned before. During the field implementation the studies never referred to as studies on VAW, but the 'Solomon Islands Family Health and Safety Study' and the 'Kiribati Family Health and Support Study' respectively. These names helped the field teams to describe the survey to the community without risking the safety of respondents or their own. It also enabled the respondents to explain the survey to others safely.

Normally in VAW surveys, as part of the informed consent procedures, interviewers inform respondents before the interview about the nature of the survey and among other things stress the need to find a private setting and time for the interview.

While the safe name usually 'worked well' there were also some instances in particular in small communities that rumours about the topics (especially the sexual nature of some questions) were quickly spread. In general, except in one occasion in Kiribati, no instances of violence due to participation in the survey had come to the attention of the research team (see citation below).

*"On that island after the interview the woman was beaten because she did not want to reveal the questions [to her husband]. She ran away in the middle of the night. When we saw her the next day she said she was not happy and that our work will cause her separation from her husband who is very jealous. This is the only incident that we heard of someone being beaten because of the survey."*

Interviewer in Kiribati

A special situation for the Solomon Islands and Kiribati was that interviewers had to swear an oath of confidentiality for the magistrate (this was routinely being done for all surveys conducted by the NSOs, as required by the Statistics Act). The fact that interviewers had sworn an oath could have been added to the scripted informed consent as it may help reassuring women that anything that they say will be kept private. In reality it was not included in the informed consent because the idea to include it had only come up afterwards.

The Solomon Island interviewers generally did not find it hard to speak with women privately in their own house and they stated that no interviewer had been forced to give up a questionnaire.

Some examples of strategies that interviewers found useful for discouraging husbands from listening into the interviews and making them leave the scene:

- Interviewers had materials (UNFPA family planning leaflets, female condoms) in their bags that they pulled out as soon as a husband appeared,
- Interviewers changed the conversation to menstruation/periods ('that women's thing') and family planning,
- Interviewers carried a dummy questionnaire (with many of the same questions but without the sensitive sections) which they could show in case the husband, or someone else, insisted in seeing the questionnaire.

In Kiribati it was sometimes harder to achieve meeting the respondent in private, but interviewers often persisted and managed to achieve this (see citations below).

*"We met with an angry man who did not want us to talk with his wife. We made a plan with the respondent to hide. We met at the sport complex. We finished the interview because the husband did not find us. This is a difficult way to do the work. But we always managed to finish every interview."*

Interviewer in Kiribati

*"This woman always accompanied her husband. It took us three days to find her. She knew we were looking for her. She approached our car and we did the interview in the car."*

Field supervisor in Kiribati

**LESSON 5.1** The fact that interviewers had sworn an oath was not only useful to be able to assure the respondents that everything they said would be confidential but interviewers stated that it was also useful to convince inquisitive husbands and others that they were not allowed to show the questionnaire or give any information on the topics addressed by the survey. The interviewers used the arguments that they could lose their job, or that they could be penalized.

**LESSON 5.2** Useful strategies to discourage husbands from listening in were the use of other health information leaflets, changing to subjects like menstruation and having a back-up dummy questionnaire without sensitive questions to show if needed.

## Ensuring safety of the field teams

In particular the circumstances in the Solomon Islands were arduous for the field teams, with physical impact such as exhaustion and stress as well as other potential risks to physical safety of the field team members. Teams had to travel rough seas, and difficult mountainous terrains. As mentioned, life jackets, shoes and watches were purchased for the field teams, in addition to the usually in surveys provided rain coats, torches, backpacks.

Some areas were particularly risky in terms of potential (sexual) harassment and assaults, in particular in the Solomon Islands. Examples were that clothing and underwear were stolen at night; there were threats of sexual harassment that the field team supervisor managed to 'buy off' with money; there were instances in which men openly masturbated when field staff was bathing in the river. In one region an interviewer who belonged to a different ethnicity had to be transferred to another field team because of the real threats of sexual assault. In some provinces male guides protected the women from harassment.

It was also mentioned before that the field teams in the Solomon Islands had to deal with witchcraft and black magic.

**LESSON 5.3** Safety and physical risk should be a core consideration in interviewer safety. This is important because interviewers are women and in many settings women may be socially and physically more vulnerable and less able to defend themselves in the event of a sexual or physical attack. In preparing for the field work researchers should consider this and where appropriate make contingency plans, though the reality is that there will always be situations that cannot be predicted or planned for. It may be necessary to work in pairs, use an escort or conduct the field work at certain times. It should be realized that this can have methodological and data quality implications.

## Support for respondents

Following the recommendations in the WHO ethical and safety guidelines, interviewers in both countries carried small leaflets with information on possible providers of support. These were given to women after the interview and women could refer to them in case of need. The leaflets contained addresses and phone numbers of:

- In the Solomon Islands: Christian Care Center, Family Support Center, Police and Social Welfare.
- In Kiribati: the research project office, Police, Crisis Center, community island worker.

The organizations listed on the leaflet had been informed beforehand and were committed to provide support as needed.

In the **Solomon Islands**, the reality was that outside the capital, local support services often did not exist and the services on the leaflets were not realistic or appropriate. Perhaps more effort could have been made to identify the most appropriate and accessible resources for each area, e.g. church-based resources or health services, as appropriate. Having said that, even if such an inventory had been possible, it is doubtful whether they could have delivered appropriate services, because it should be recognized that at the time of the survey, training on VAW for local service providers had not yet taken place.

In practice hardly any use had been made of the support services offered. The research team had heard of only one single case, in Honiara, where the police was called to intervene. This was the case of a father who had taken a breastfeeding child away from the mother.

Field team supervisors who were selected for their maturity and who had received some basic counselling training (mainly to be used vis-a-vis their team members) occasionally were called in to give support to respondents.

In **Kiribati**, in the outer islands proper support mechanisms for women were also unavailable. There were social welfare officers workers on outer islands (in the island council office) but they lacked the training and resources to properly help. Field supervisors were allowed to take on counselling task if they felt up to it, which they used on a few occasions only. Sometimes the field staff advised the women to go to the local church.

The citation below shows an example of a situation in which the responded needed help and the interviewer attempted to offer support.

*“This woman had scars on her head and body. She had mentioned that the missionary had been trying to help her to leave the island. But when the plane came, she could not leave because of black magic applied by her husband. She told the missionary she loved her husband very much but she knows he is bad. She really needed help. The interviewer in my team warned her supervisor who went to the local council and reported to the assistant welfare officer of the island.”*

Field worker in Kiribati

**LESSON 5.4** Though in practice respondents did not often make use of the support services mentioned in the leaflet offered by the field workers, leaflets with information of support services should be as much as possible be adapted to local situation. Where they do not exist, every effort should be made to think of other alternative solutions for support, such as the local church.

**LESSON 5.5** Field team supervisors used their counselling skills only in a few occasions to support a respondent (this was on voluntary basis and not encouraged). As part of better preparation for fieldwork in areas where specialized services do not exist, field worker training can include more basic counselling and skills to better respond to respondents (while maintaining the principle that they should not take the role of counsellors). This can also strengthen data collection.

**LESSON 5.6** There was ample evidence that respondents actually felt supported, valued and worthy by simply being listened to. They expressed this at the end of the interview when interviewers took the time to discuss other matters and to thank the respondents for their contribution. This in turn, also helped the interviewers with overcoming the sense of helplessness that they often felt when listening to painful stories without being able to offer much in return.

## Support for field teams

Field diaries, as used in some study sites in the WHO Multi-country Study, were usually not kept by field workers; interviewers simply stated that they had 'no time to write'.

In the Solomon Islands and Kiribati, the field team supervisors had the role to look after the welfare of the team members. The field workers confirmed that they felt that their safety and welfare was looked after, though most felt that for their moral support they benefitted more from debriefing breaks, relaxation and field visits by the central project team.

In both countries, a final debriefing with three trained counsellors was held for the entire group of interviewers. Individual counselling was offered to all interviewers who wanted counselling after the larger debriefing (though this offer was not used).

The debriefing provided an opportunity for the field team members to tell stories that were very meaningful to them and to help them to feel that their voices were heard by the country project team and the regional coordinating team. The final debriefing was a time of sharing experiences and emotions, letting off stress, valuing each other and apologizing for any rough words used during times of high stress, as well as thanking each other for the support that the field and central project team members had given each other throughout the research period.



LESSON 5.7 Fellow field team members and especially field team supervisors are a key support for field workers. They all, especially the field team supervisors, need to be able to respond effectively when needed. To achieve this it could be considered to give special training in recognizing and responding to trauma.

LESSON 5.8 Interviewers tremendously value debriefing breaks and visits by central project team and resources should be planned for this. This is especially important in the beginning of the field work when field team members are still working out internal relationships and team dynamics.

LESSON 5.9 A final debriefing with the field teams should be planned for and should be done as soon as possible after the fieldwork has ended, even if there are still other teams in the field. The value of such debriefing cannot be underestimated, also because of the impact that participating in the research has on field workers (see also later), which makes it different from other routine surveys.

## 6 Lessons learned on data processing and analysis

### Data processing

The data processing for the studies in both countries was done by the National Statistics Offices, in close collaboration with the data processor expert from SPC headquarters. This expert assisted in the development of data entry screens using CPro, instead of the programme developed by WHO<sup>8</sup>. Furthermore, she trained the data managers of both countries who subsequently mutually shared experiences and skills across country settings.

In the Solomon Islands five persons and in Kiribati four persons were entering the data. Data entry teams were supervised by the data managers from the NSOs of each country. All data were 100 percent double entered, as required by the WHO protocol.

### Weighting and data analysis

In the surveys in the Solomon Islands and Kiribati, household and person weights (to adjust for actual distribution of households in the population, and for the probability of being selected within a household, respectively) had been calculated for every record by the statisticians involved in the sampling plan. In the CPro software the final weights were calculated through batch edit and put in the data set.

In the studies in the Solomon Islands and Kiribati, different persons were involved in each of the following procedures: sampling, weight calculation, data entry management and data analysis. Such a situation may lead to oversights with the potential to challenge the data quality. When there is not a person who is clearly overseeing all procedures in the process there is a real risk that the next person in the process is not informed or aware of what the previous person has done. This actually happened as became clear during the assessment: sample weights had not been used in the analysis and subsequently the results presented in the report were not weighted, as they should have been.

Another point worth mentioning is that it cannot be ignored that a huge amount of data (information) has been collected both qualitative and quantitative, more than will ever be put in reports. Mechanisms should be developed to make these data available to interested researchers for further analysis. In the Solomon Islands a draft proposal for 'terms of use of results and data' was developed.

**LESSON 6.1** The project coordinating staff should make sure they have a good basic understanding and overview of all data processing and analysis steps from the beginning, even if they do not have all technical skills themselves. Further, it is crucial that the data manager is part of the process and project activities from the beginning, and involved in questionnaire adaptation, sampling, interviewer training, and after data processing, involved in data analysis. This will ensure continuity and quality and helps ensuring for example that sampling weights will be used properly in the analysis and the report.

<sup>8</sup> CPro is commonly used for DHS and known by most NSOs. At the time of writing this publication a number of other countries in the world replicating the WHO methodology have also applied CPro for data entry and CPro is likely to remain the programme of choice and should be encouraged for this purpose in the future.

LESSON 6.2 It is important for data quality to start data entry as soon as possible. This will ensure that systematic and/or other serious errors are discovered shortly after they occur. In this way prompt feedback to the field and timely correction of errors can be achieved.

LESSON 6.3 A data entry system was developed using CPro. This worked well, in particular because the data base structure was kept the same as in the WHO study, through maintaining the same variable names and values (refer to the codebook developed for the WHO study). A consistent database structure facilitates enormously the use of existing data analysis syntax files (developed for SPSS) which can be used after minor adaptation. This experience should guide the choice of data entry software and procedures in future surveys in other countries.

LESSON 6.4 Since the same data entry expert (SPC) was involved in setting up and conducting training in the data entry system in a number of countries conducting VAW research in the Pacific, a network of data processing experts has now been formed that could be tapped for future research in the region. Such collaboration will ensure that data entry and analysis procedures remain consistent, transferable and of good quality.

LESSON 6.5 It is important that from the start guidelines and formal rules are developed on ownership and use of the data and results (the draft rules as developed for the Solomon Islands may serve as an example).

## 7 Lessons learned on report writing, dissemination of results and transition to intervention

### The report writing process

The report writing for the Solomon Islands and Kiribati had been participatory, which was very important to ensure ownership. The process of writing was led by an international consultant (the same person who conducted the training of interviewers for both the qualitative and quantitative components); with intensive involvement of the national research teams (among others through discussions of results and their interpretation, collection of local background information for the 'introduction' and the 'cultural context', etc).

In both countries, before the finalization of the report, a two-day stakeholder consultation was called during which the results and recommendations were discussed and modified to include comments and viewpoints as expressed by the stakeholders.

For national ownership it is further important that the government endorses the results at an early stage. Box 5 gives examples of steps in this process for Kiribati.

#### Box 5 - Examples of phases in the collaborative process of report writing and taking national ownership of the data - Kiribati

- In **Kiribati** the draft results were presented at an early stage to a stakeholders meeting which included very conservative men/chiefs of the provinces. These chiefs were very sceptical, defensive and at first did not want to accept the results. The team broke the results down in detail so that the chiefs could understand them in a simple way and in the end they responded assenting. It was crucial that the National Statistician was present at this workshop to verify and confirm the veracity of the data and to explain them to the elderly men.
- The draft report was at an early stage endorsed by the Kiribati cabinet.
- The President of Kiribati had the information early on and accepted it, released the initial findings on 3rd Dec 2008, during the 16 Days of Activism; as a champion he was behind it and convinced the others.

It should be said that the final reports for both countries are very detailed, dense and rather technical, therefore not very accessible for a general audience (which is usually the case with scientific reports). Therefore, both countries also produced small and colourful twelve-page booklets in which the summary results are presented in an easy accessible way, useful for dissemination activities for a variety of audiences.

**LESSON 7.1** The stakeholders committee should be consulted at crucial stages of the write-up of results to ensure that everybody involved understands and takes ownership of the results and contributes to interpretation and recommendations. This also contributes to legitimacy of the findings.

**LESSON 7.2** Besides the full report, it is very helpful to have a summary report in simple language for the general public, with colourful and easily understandable graphic presentations of the results.

**LESSON 7.3** To ensure national ownership and for maximum impact an agreement on authorship and logos should be made early on. Authorship should be preferably corporate (e.g. government with implementing agency). All contributors should be acknowledged properly with name and contribution. Acknowledgements should ideally include the names of all field workers (but it should be noted that in the reports of the studies in the Solomon Islands and Kiribati it was elected not to do so for the safety of the field workers).

## Dissemination of results – Kiribati

Only the Kiribati experience is described here because the dissemination process in this country had just gone underway at the time of the assessment of the project (while in the Solomon Islands the project had not yet reached this stage at the time of the assessment).

Preceding dissemination the stakeholder committee members had received training on gender and VAW (organized by the Fiji Women Crisis Center). Subsequently they participated in a workshop conducted by UNFPA to prepare the dissemination materials based on the study findings, working on different factsheets for different target audiences, as well as on the communication strategy including how to deal with sensitive questions. After this the committee did a try out to test the information/fact sheets.

Kiribati had also established two 'awareness teams' of each about 14 members from the stakeholders committee (including representatives from NSO, police, law, churches and project staff). The awareness teams conducted their first awareness workshops in non-sampled communities, for reasons of safety and confidentiality. The first awareness workshops were held with community leaders and church leaders and were also used to stimulate follow up action.



**LESSON 7.4** For dissemination of results it has shown to be helpful that complex results are broken down in simple terms. It is also important that specific presentations and materials with different focus are prepared for different target audiences. It is suggested that a clear press release is developed in advance, to make sure results are not misrepresented by journalists. It is particularly recommended to not use ranking such as 'country X is the highest in the world'. That is what sticks most, but does not reflect the truth and may put people off. Moreover, journalists will either highlight or even challenge the ranking and this distracts from tackling the real issues.

**LESSON 7.5** In the dissemination messages it should be avoided to present men in general as abusers as this will invite resistance and ignores the fact that men are sometimes also victims and that not all men are perpetrators. It is better to focus on positive messages and use champions, role models for change - men as part of the solution. Moreover, it is a good idea to focus on collective accountability in addition to individual accountability of the perpetrator, indicating that communities as a whole need to change.

## Transition to intervention

It should be highlighted that a very constructive feature of the project was that the studies were not conducted as stand-alone activities, but that they were part of an ongoing process, a movement, with the results immediately being fed into the process of dissemination and intervention.

In both countries, by building on the momentum created by the research and report, doors were opened for joint programming and development of interventions. In 2009, with the help of international consultants, long-term national action plans for the elimination of VAW were being developed in both countries; further in the Solomon Islands also a national policy on eliminating VAW was being developed. A number of the concrete changes that were already beginning to take place are mentioned in section 8 below. And this is only the beginning!

**LESSON 7.6** Donors should make sure that research projects of this kind should be formulated as a first step in a longer term programme, including also a process to develop interventions. Moreover, they should allocate funding for the transition phase to intervention as part of the package to make sure that results are effectively used for action.

## 8 Lessons learned on impact of the research process on individuals and institutions

### Impact on project staff and field workers

Throughout the assessment, at all levels the persons that were interviewed confirmed that the survey in itself had been a huge (national) capacity building exercise.

The regional and national project teams learned to deal with many challenges including working in two geographically-spread and culturally diverse countries with associated needs to consult, keeping people informed, and organizing systems for data collection in logistically complex situations; working with two development partners providing funding, one implementation agency, two host governments, and at least three advisory committees.

All fieldworkers who were interviewed for the assessment reinforced that in the final balance they had enjoyed the experience, learned much from beginning to end and many were transformed personally and/or professionally by having participated in this exercise. Using the research experience as a tool for positive change was viewed as a means of coping with trauma and hardship associated with the fieldwork. The interviewers' feedback suggested that the positive benefits from being involved in the research outweighed the many negative aspects that they also reported. Most of the interviewers found it enlightening to have made friends among each other from different customs, and to have had the opportunity to get to know new places in their own country. The majority confirmed that this project is benefitting their career, some went on to work in other surveys or census activities for NSO, others confirmed that they developed and increased commitment within their own communities or that they wanted to continue working on women's issues. An example of the latter is that some field workers in the Solomon Islands had started a new organization to work on women's rights and awareness creation. They appreciated that they had learned about safety, about dealing with (future) partners and husbands and about condoms. See Box 6 for some citations on the impact of the research process on personal change.

#### **Box 6 - Citations by a number of field workers in the Solomon Islands and Kiribati, on the impact of the research process and on personal change:**

- "I now speak out when I see child abuse. I am more prepared to take risks if I can increase a person's happiness. I tend to listen more to my own daughter. Before, it was straight discipline."
- "Before doing this work we did not know we have the same rights as men. Now we voice our problems. In the past we whipped our children to teach them. Now we know there are limits."
- "I learned a lot. Many women have similar problems to my own, such as drunken husbands. There is something I must do. I have discussed with my husband and he now drinks less. He is more responsible. I also no longer accept violence."
- "We now know our rights and places to refer to when we face violence. We know now how to choose the right husband. We are ready to offer help to others who need it. We can interfere with neighbours when there are problems. We now know it is also our business."

- “For me violence was normal, until reading and learning about it. Now even my husband is scared to say anything because now I am an advocate. Going home puts me back in my place, but now I defend myself. I talk back even in front of my children because they should learn that violence is not normal. My mother was bashed up. My brothers said when they grow up they would bash up their father, but now they are bashing up their wives. They say ‘she is asking for it’. My husband says: ‘what has this project turned you into?’ But now it is much fairer. Tasks in the house are more equally divided. He says ‘This is not the woman I married’. He does not have a choice now.”

Also individual members of the stakeholder committees bear witness to having been transformed. One person reflected upon the deep personal dilemmas that had surfaced with this transformation because her personal environment did not understand or accept the transformation. She explained the painful situation of how her personal situation at home made it impossible be a truly role model (see citation below).

*“We (in the stakeholders committee) know what violence is and our rights as women. We, the members of the group that conducts dissemination workshops, are regarded as role models. I feel that before we are able to go out [to disseminate] we have the responsibility to practice it in our own homes; so that we can talk from our hearts. We will be more effective in this way. In my case, I tried to talk to my husband. At home he is the boss and I at home I do obey him. I cannot change this. However I am also a working woman and I do no longer accept that he makes a scene at my work. So he thinks I changed overnight. As a consequence I have more problems now at home. I am in the middle of it. Therefore I doubt that it is the right time for me to be part of the dissemination activities. I cannot play this role if I myself cannot practice my rights at home...”*

Representative of a religious women's NGO

## Impact at institutional level

Changes have also already been reported at the institutional level, within governmental and non-governmental organizations, as well as at the policy level as a result of the research process and the dissemination of research results.

Only very shortly after the studies were finished, and even before the reports with results were officially out, the results were already feeding into governmental activities, both in the Solomon Islands and Kiribati.

To illustrate this for the Solomon Islands Government, the Permanent Secretary, when interviewed for the assessment, stated that even before the results of the study were published, these results were already having an impact in the following areas:

- Evidence-based legal reform was being undertaken by the Law Reform Commission (incorporating sexual assault and VAW in the penal code), assisted by RRRT.

- Results of the study were feeding into a national policy and national plan of action addressing VAW and in August 2009 a UNFPA project-funded consultant had started working on this through a consultative process with all stakeholders, including a consultation component at provincial level.
- Training with dissemination teams had been conducted on how to disseminate the research findings among various target groups in the country.
- A team had gone to one of the provinces to work on informal shelter training (FWCC).
- The existing 'National women's policy' would be revised into a 'women and gender equality policy' (in September 2009 a consultant started working on this) and the VAW policy will anchor in this.



In Kiribati, the Secretary, during the interview for the assessment, also gave several examples of how the study already had an impact:

- The President himself is involved as champion, by expressing grave concern and committing to ongoing work to prevent violence.
- The great effectiveness of the national project research team was facilitated by the fact that key persons in the project team are peers of the Members of Parliament.
- The VAW work is Government-based. It is an advantage that it is based in the Ministry of Internal and Social Affairs, because this Ministry covers local government, rural planning and development, women, youth, sports, civil registration, culture, churches and NGOs.
- Work on an evidence-based Plan of Action (as part of the project) has started.

- Churches are involved in dissemination: sermons on Sunday mention VAW; women, men and youth church organizations are being briefed on GBV/VAW and starting internal programmes to combat VAW in their communities, etc.

In Kiribati, it is clear that already more people are aware that services are available for women who experience domestic violence, especially those provided by the police. Nowadays people are making positive comments about the police; the new recruits are getting domestic violence (DV) training as part of their curriculum together with human rights. DV registers have been set up in all police units (this started before the study was finished – funded by NZAID). The results of the study can back up these activities and make them more concrete.

Below are some citations by police officers illustrating the recent transformations:

*“It used to be our practice to correct our wives. The results [of the study] were not surprising to us. Bashing and beating is high here compared to other places.”*

*“The launch [of the study results] was at the President’s office. The President himself was concerned. He did an appeal to all officials to not beat their wives. We as police officers have to be cautious.”*

*“Before [the awareness building on DV] the ladies would not report because the police would send them back home. Now the police takes it more serious and the case proceeds to court. Before this, DV was not a police case but a private matter.”*

Police officers who were member of the stakeholder committee, Kiribati

**LESSON 8.1** The involvement in the study has been a huge capacity building exercise at many levels such as in technical /research related areas, in how to deal with sensitive women issues, and in collaborative processes working with other agencies and internationally.

**LESSON 8.2** As in similar research in other countries, interviewers and other participants in the studies in the Solomon Islands and Kiribati all mentioned how their involvement in the study was a transformative process personally and / or professionally. Several former interviewers went on to set up their own NGOs to create awareness and help women; others went on working in other research.

**LESSON 8.3** Both in Kiribati and the Solomon Islands, because of the research, at institutional level new skills and experiences were gained, collaborative processes were strengthened and brought to a new level, bringing together established and newly formed teams to work towards a common goal, awareness was created, and results were being put in action already shortly after they had come out.

## Concluding remarks

There is overwhelming evidence that the studies in the Solomon Islands and Kiribati have generally been carried out appropriately and effectively. There is an overriding sense of achievement, all field workers came back safely and intact, a phenomenal job was done and an enormous amount of data was collected with high response rates and disclosure rates. Respondents generally felt satisfied, relieved and valued after the interview for having been able to share their stories. It cannot be ignored that there were many issues and challenges and that lessons have been learned that should be taken into consideration for future work.

It should be mentioned that the success is largely thanks to the regional and country research teams who had effectively mobilized stakeholders and achieved buy-in from many levels, and -- when they realized they did not have all the technical and gender background in the team -- knew how to tap expert support all along the process of the project. Important contributions were made by a number of technical advisors, representatives from donors, and expert consultants throughout the process.

In an environment that largely denied, or at best was ignorant about the widespread existence of VAW, and where many questioned the importance or even the feasibility of research on VAW, the country project teams were 'swimming against the tide'. Entering unknown territory and using approaches for surveys on sensitive topics that they had not used before, with due consideration for ethics and safety, they managed to bring the research to a good end. They could do so because they were able to successfully access, involve and use mentors and technical experts for all kinds of moral and technical support, to develop structures and links and maintained relationships and were able to learn by doing, which is very much in line with the capacity building goal of the project and could serve as a model for the rest of the Pacific.

It should be flagged that the studies were not conducted as a stand-alone activity, but they were part of an ongoing process, a movement, and action-research in the best sense of the word. The researchers and fieldworkers developed an increased understanding and commitment to work on reducing VAW. Further the results were immediately fed into the process of dissemination and intervention. In this sense the project can serve as a best practice model for researching VAW not only as a data collection activity but as a participatory approach with capacity and awareness building throughout the process, with collaboration between partners at many levels, that was able to bridge the gap and address the transition between research and intervention.

Even the most critical among the project partners who admitted that they initially had serious doubts about the feasibility of the project, now say that they have seen it is possible, as shown in the citation below.

*"As government statistician with lots of experience in many surveys I was convinced this would fail. But to my surprise it was very successful. This was due to the way the interviewers were well trained and knew how to present themselves. The training was very different from other training, also very long. [...] Now that we are going to carry out a DHS survey with the violence module we want to employ the same girls."*

Government Statistician, Kiribati



In both countries, there is a now basic broad understanding of the meaning and implication of the findings and the need to keep the momentum going and move forward. The huge political buy-in paved the way for action. The project is unique and commendable in that besides the research component, one year of dissemination and interventions is also part of the project.

Donors and implementing agencies are urged to follow a similar research-to-intervention model when funding and implementing similar projects, to ensure that research results will be put to use in policies, programmes and concrete interventions.

Finally, the value of having the experience and a pool of trained persons now in the region should not be overlooked and hopefully put to use to assist future projects in other countries.

## References

- Ellsberg, M., Heise, L. (2005) *Researching Violence Against Women: A Practical Guide for Researchers and Activists*, PATH, World Health Organization. Available at [http://www.who.int/gender/documents/women\\_and\\_girls/9241546476/en/index.html](http://www.who.int/gender/documents/women_and_girls/9241546476/en/index.html)
- Garcia-Moreno, C., Jansen, H.A.F.M., Ellsberg, M., Heise, L., and Watts, C. (2005) *WHO Multi-country Study on Women's Health and Domestic Violence against Women*. Initial results on prevalence, health outcomes and women's responses. World Health Organization, Geneva, Switzerland. Available at [http://www.who.int/gender/violence/who\\_multicountry\\_study/en/index.html](http://www.who.int/gender/violence/who_multicountry_study/en/index.html)
- Garcia-Moreno, C., Watts, C., Jansen, H., Ellsberg, M., and Heise, L. (2003) Responding to violence against women: WHO's Multi-country Study on Women's Health and Domestic Violence. *Health and Human Rights*. 6, 113-127.
- Government of the Republic Of Kiribati (2010) *Kiribati Family Health and Support Study: A study on violence against women and children*.
- Jansen, H.A.F.M. (2009) *Socio-cultural Research on Gender based Violence in the Pacific: Solomon Islands and Kiribati. An independent assessment, with focus on lessons learned; based on site visits, July-August 2009*. UNFPA report. Unpublished document.
- Jansen, H.A.F.M., Watts, C., Ellsberg, M., Heise, L., and Garcia-Moreno, C. (2004) Interviewer Training in the WHO Multi-Country Study on Women's Health and Domestic Violence. *Violence Against Women*, 10(7), 831-849.
- Secretariat of the Pacific Community for Ministry of Women, Youth & Children's Affairs (2009) *Solomon Islands Family Health and Safety Study: A study on violence against women and children*. Available at [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)
- Secretariat of the Pacific Community, United Nations Population fund, Government of Samoa (2007) *The Samoa Family Health and Safety Study*. Available at [http://www.spc.int/hdp/AC/hdp\\_publications\\_gender.html](http://www.spc.int/hdp/AC/hdp_publications_gender.html)
- World Health Organization (2001). *Putting women first: Ethical and Safety Recommendations for Research on Domestic Violence against Women*. WHO, Geneva, Switzerland WHO/FCH/GWH/01.1. Available at [http://whqlibdoc.who.int/hq/2001/WHO\\_FCH\\_GWH\\_01.1.pdf](http://whqlibdoc.who.int/hq/2001/WHO_FCH_GWH_01.1.pdf)
- World Health Organization (2004) *WHO Multi-Country Study on Women's Health and Domestic Violence: Study Protocol*. World Health Organization, Geneva, Switzerland.
- World Health Organization (2003) *WHO Multi-Country Study On Women's Health And Life Experiences. Core Questionnaire (Version 10) and accompanying training materials and data entry system for WHO study*. World Health Organization, Geneva, Switzerland.

# ANNEX I - Persons interviewed for the assessment

## **Persons met in Suva, Fiji**

### UNFPA Pacific Sub-Regional Office

Dr. Annette Sachs Robertson, Deputy Director and Deputy Representative  
Ms. Riet Groenen, Gender Adviser  
Ms. Lorna Rolls, Assistant Representative  
Ms. Lily Uruvaru, Programme Assistant

### UNICEF

Ms. Johanna Eriksson-Takyo, Chief of Child Protection Programme

### Former Solomon Island Project Staff

Ms. Alice Rore, (former) National Researcher for Solomon Islands GBVCA Research (currently doing postgraduate studies at USP)

## **Persons met in Honiara, Solomon Islands**

### Government

Ms. Ethel Sigimanu, Permanent Secretary, Ministry of Women, Youth and Children Affairs  
Mr. Nick Gagahe, Government Statistician, National Statistics Office

### WHO

Dr. William Adu-Krow, Country Liaison Officer, Solomon Islands

### UNFPA

Ms. Polini Boseto-McNeil, National Programme Officer, UNFPA  
Mr. Shepherd Lapo, Local Security Assistant, UNFPA

### SPC (Secretariat of the Pacific Community) regional and national project staff

Ms. Mia Rimon, Regional Project Coordinator, Socio-Cultural Research on Gender-Based Violence and Child Abuse in Micronesia and Melanesia  
Ms. Lilian Sauni, (former) Regional Researcher (currently coordinating SPC malaria program in Solomon Islands)  
Ms. Pionie Boso, SI Country Coordinator for the survey (coordinating field teams and finances for the teams)

### Former field workers Solomon Islands research

Ms. Joylin Ta'aru, supervisor  
Ms. Veronica Esibaea, editor 2nd group  
Ms. Adriana Kirio, editor 2nd group  
Ms. Lisa Kope, editor, supervisor, interviewer  
Ms. Dorothy Siau, editor, interviewer  
Ms. Ruth Ririo, editor, interviewer

### Others

Ms. Sharyn Titchener, consultant for child abuse component, UNICEF

Ms. Edwina Kotoisuva, Fiji Women's Crisis Center (who was in SI to co-facilitate a workshop)  
Dr. Helen Johnson, University of Queensland, Brisbane, Australia , consultant working on Solomon Islands Plan of Action for prevention of and response to VAW

### **Persons met in South Tarawa, Kiribati**

#### Government

Honorable Minister Amberoti Nikora, (former) Ministry of Internal and Social Affairs (MISA)  
Mr. Rikiaua Takeke, Secretary, (former) Ministry of Internal and Social Affairs, Bairiki  
Mr. Tekena Tiroa, Republic Statistician (Ministry of Finance)  
Mr. Teurakai Ukenio, Acting Director, Community Development Services Division (CDS) of Ministry of Internal and Social Affairs (MISA)

#### Project Staff

Ms. Maere Tekanene , Country Coordinator GBVCA Research Kiribati, office of CDS  
Ms. Eretia Monite, (former) National Researcher, Kiribati  
Ms. Teamita Tabokai, Project Administrative Officer

#### Former Field workers Kiribati research

Ms. Bwaaree Taorobwa, editor  
Ms. Koobuti Bonteman, editor  
Ms. Emma Paul, editor  
Ms. Tiebane Uriam, team supervisor  
Ms. Angiua Tekanene, team supervisor  
Ms. Katerishika Jitendra, editor  
Ms. Taungare Tianera, interviewer  
Ms. Tannako Basaam, qualitative interviewer  
Ms. Kianu Tebau, editor

#### UNICEF/UNFPA/UNDP

Ms. Aren Ueara-Teannaki, UN Affairs Officer, Kiribati (former acting Deputy Director CDS)

#### Members of Stakeholders committee

Sister Maria Theresa, Director AAFR (Alcohol Awareness and Family Recovery)  
Mr. Kaitama "Toroto", Chairperson AAFR  
Mr. Kabuaua Uatao, Community Policing Officer, Police Sergeant, Betio police station  
Mr. Teunaia Ieremia, DVSO Unit, Police Constable, Betio police station  
Ms. Tamarawa Teoiaki , Coordinator RAK (Women's fellowship for Kiribati's protestant church)  
Ms. Anne Kautu, Acting Senior Women Development Officer AMAK (umbrella women NGO)

### **Persons interviewed by telephone**

Ms. Linda Petersen, Manager, Human Development Programme, SPC - Secretariat of the Pacific Community (in Noumea, New Caledonia)  
Ms. Leilua Taulealo, data processing expert, SPC (in Noumea, New Caledonia)  
Dr. Janet Fanslow, Social and Community Health, University of Auckland, member of Technical Advisory Panel, international consultant who assessed project during early phase (in Auckland, New Zealand)  
Ms. Emma Fulu, international consultant for training of interviewers for quantitative and qualitative research, data analysis and report writing for both Solomon Islands and Kiribati (in Melbourne, Australia)







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