

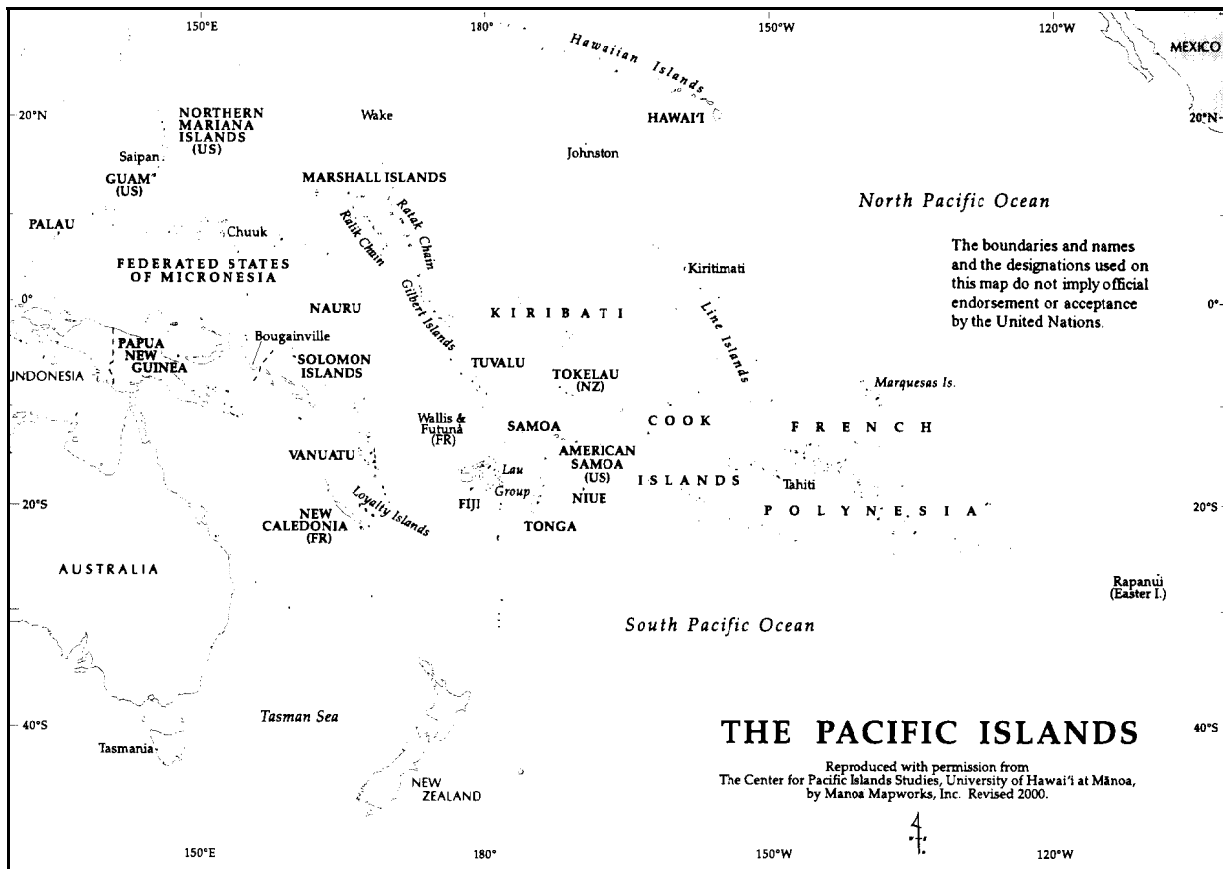
Untangling the Myths and Realities of Fertility and Mortality in the Pacific Islands

Overall, trends are positive

By Peter Pirie*

Until the 1950s, information about the levels of fertility and mortality in the Pacific islands ([see map on page 6](#)) was fragmentary and much of it was anecdotal, but there was quite a lot of it. In that era, vital registration systems and periodic population censuses were the major sources of information on fertility and mortality, and the extent of these depended on the priority that each colonial administration was prepared to give to them and to the magnitude of the task. For instance, in better developed colonies such as Fiji, vital registration and a census sequence were long established, but in the larger Melanesian societies — Papua New Guinea, Solomon Islands and Vanuatu ([see map](#)) — little had been attempted and knowledge

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The boundaries and names and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

of the size of the population, let alone the fertility and mortality situation, was uncertain. Metropolitan systems were transported intact, as far as possible, in the societies administered by France and the United States of America. Even in territories where vital statistics existed, they were known to be incomplete and censuses did not include the questions necessary to establish fertility and mortality levels.

In the early 1950s, the Department of Demography at the Australian National University decided to undertake a regionwide project to study the populations of the South Pacific islands. Norma McArthur undertook this task and by 1956 she had completed a series of country monographs (McArthur, 1956). In the course of the fieldwork, several governments were persuaded to take population censuses simultaneously and to include a wider range of questions than previously had been attempted, including two that would enable the derivation of fertility levels. As far as can be determined, these were the first censuses in the Pacific islands to be designed by a demographer rather than someone experienced in public administration. These achievements, together with her body of publications on Pacific populations, entitle her to be recognized as the doyen of South Pacific demography. One of the purposes of McArthur's (1967: xv) work in the Pacific was, as she put it, to discredit a myth "still echoing faintly in the halls of learning and authority", namely, the theory that the post-contact decline of population was due to "psychological causes", a concept associated with the anthropologist Pitt-Rivers (1927). This was but one of the myths concerning Pacific populations; there were, and still are, others.

The myth of sexual paradise

The earliest and one of the most durable myths was initiated early in the process of European contact. Although the Portuguese, Spanish and Dutch were the first European navigators to sail in Pacific waters, their accounts of contacts with the inhabitants were reticent. Not so with the French and British explorers. British Captain Samuel Wallis made landfall in Tahiti in 1767 and was followed a year later by the French explorer, Louis de Bougainville. Both were captivated by the beauty of the island and its people, and their reports were widely publicized at home. Wallis stayed a month and, having arrived in bad health, was restored by the massages of Tahitian women. One of his party (Robertson) records being offered "two very handsome Young Ladys" and this crew has been accused of introducing gonorrhoea to Tahiti, an all too likely possibility (Snow and Waine, 1979:43-46). Bougainville (1771) dubbed Tahiti "La Nouvelle Cythere", Cythere being the birthplace of the ancient Greek goddess of

love. The 1755 work of French philosopher Rousseau (1915), in which he put forward the view that primitive cultures were noble compared with civilizations which were debasing and corrupt, was in Bougainville's mind as he enviously surveyed the Tahitians' way of life. Tahiti seemed to be proof that Rousseau's argument was valid.

Accounts of the Tahitian "discovery" inflamed the Western European imagination to the extent that it has never completely recovered. The Pacific islands became firmly fixed in their collective mythology as places as close to Paradise as can be found on Earth. Artists and writers such as Paul Gauguin, Herman Melville and Somerset Maugham, among a host of others, capitalized on the myth and embellished it. Few noticed that the early explorers were considerably less enthusiastic about some of the other Pacific islands which they came upon.

More importantly, this long-standing myth has led to a somewhat light-hearted approach to the Pacific islands and their development, a feeling that the problems of such a paradise do not have to be taken seriously. All are still bathed in the sexy, rosy glow generated two centuries ago by Tahiti. But there are now 21 separate political units and not one of them closely resembles another. This is a result of their different physical characteristics, build, size and spread; the origins of their first settlement and subsequent local evolution; the nature of their contact with foreign explorers and their subsequent colonial experience; the intensity with which they were affected and developed; and the variety of their contemporary experience. The reality is that it is now very difficult to make generalizations about them and any that are made must be qualified by exceptions. This is actually true of most of the world, but too often the Pacific islands are lumped together in ways that outrage fact.

As a preparation for doing fieldwork in Samoa, the author read Mead's 1928 work *Coming of Age in Samoa*. It gives an attractive picture of Samoan village life, but portrays a society where sexual activity begins at adolescence and is essentially guilt-free. What he actually found in Samoa was very different. Young unmarried Samoan women are relentlessly supervised, to a degree seldom achieved outside of Islam. Not only are their parents involved, but also their usually more alert and knowing brothers. Of course, accidents do happen and Samoans are not ones to cry over milk already spilt, but there is a pervasive concern with female virginity, expressed in its highest form with the institution of the *taupou*, usually translated as "ceremonial virgin". Samoa did not seem to be the same place that Mead had described.

Mead's main informants were students in a residential girls' school, sent there for the very purpose of protecting their virtue until they were chosen as brides. Nevertheless, she found them to be well informed to the point of prudence and willing to discuss sexual matters, punctuated no doubt during, and most certainly afterwards, with great hilarity. To them, Mead would have seemed exotic and impressive — someone who would appreciate the ingenuity they used in satisfying her curiosity. She probably concluded that they were more experienced than they actually were.

The mortality myths

Another durable myth concerns the effect of contact between Pacific islanders and Europeans. When the first explorers moved into the South Pacific, they found that the vast area was free of the diseases that periodically decimated their own populations. The region apparently was free, at least until they arrived, of bubonic plague, smallpox, tuberculosis, cholera, dysentery, yellow fever, leprosy, syphilis, influenza, measles, whooping cough, diphtheria, scarlet fever, typhus, typhoid fever and gonorrhoea, to name some of the more destructive diseases. Several diseases specific to tropical areas, such as trypanosomiasis, or "sleeping sickness", also were absent. The exception was malaria, but this was confined then, as it still is, to western Melanesia.

There were some other diseases that Pacific islanders are known to have had, but they were few. One was yaws, a treponematosis like syphilis, but transmitted non-sexually from moist skin to moist skin in tropical rainforest climates. Filariasis, a mosquito-borne disease that leads to elephantiasis, is another, but both are slowly debilitating rather than swiftly fatal. There is no record of then unknown diseases being transmitted by islanders to the visiting ships' crews, the infection being recorded as massively in the other direction. Not too much later, visiting crews began receiving back some of the diseases that they had originally bestowed on the people of the region. Consequently, the major causes of death before contact must have been very different from the pattern familiar to European crews. It seems unlikely that the usual bacterial or viral diseases, obstructed in their dispersal by the oceanic distances, could have figured prominently.

What of the other possible causes? High fatalities in wars are sometimes cited, but this should be considered another myth. By most accounts, traditional warfare in Pacific cultures before contact seems to have been a rather protocol-laden affair, in which causing massive fatalities among the enemy was not the main objective. Europeans of the era were

not noted for their pacifism and their conflicts then were remarkable, not only for their direct loss of life but also for the vast numbers who died incidentally of wounds, disease, or starvation. Yet enough of them survived this experience, plus the normal toll of infectious disease, to show overall some recurring population increase. For warfare to assume the role of scourge in Pacific populations lacking the usual raft of contagious diseases would imply a perpetual bloodbath. The most awesome and mortal battles that survive in oral legend in the Pacific seem to be those occurring after contact, when some traditional leaders, fired by an alien monarchic ambition, had collected a few European consultants and the odd musket. There is little evidence that pre-contact conflicts were responsible for exceptional mortality, let alone the unusually high losses that might have compensated for the absence of recurring epidemic mortality.

It is rather difficult to suggest other possible explanations or possible causes of death that might offset those which are known to have been diminished. The region has its share of weather, climatic and geophysical disasters, but is not exceptional in this respect; usually the environment is among the world's more benign. Could it be that most Pacific islanders finally died on their mats of heart attack, cancer, or stroke? Demographers find such a possibility hard to accept, for it is at odds with the theory of demographic transition, which assumes that the collective lot of a pre-transitional population was usually a swift, nasty and early end. Norma McArthur (1977:273), for one, wrote that that possibility "strains credibility" when this author first put it forward, but no one has been able to come up with a more convincing alternative.

The situation found by the first Europeans to arrive was changed dramatically by the introduction of diseases that raised mortality in all populations, although to varying degrees. In some areas, where gonorrhea spread freely, fertility also was depressed. Population numbers declined, and, by the end of the nineteenth century, anthropologists, politicians and doctors were predicting that Pacific island races would die out from a combination of introduced disease and psychological causes induced by the contact with superior cultures — namely, of course, their own. But, while several populations declined to minute fractions of their former numbers, notably in the Marquesas and Mariana Islands, others, such as that of Samoa, had stabilized by the middle of the nineteenth century and, as natural immunities built up, began to show recurring increases in some years. By the 1930s, it had become obvious to even the most obtuse observer that most island populations were surging back. It also was observed that, while psychological depression might be the cause of some mortality, most populations would benefit from some medical care.

The reality of the post-war fertility bulge

The censuses taken in the 1950s and 1960s, most under Norma McArthur's general direction, showed dramatic rates of population growth in Polynesian populations and some growth in Micronesia and in Fiji. Total fertility rates, a surrogate for approximate completed family size, exceeded 7 children per woman in a few instances, with levels between 6.0 and 6.9 being quite common (see table 1).

As part of the author's research in Samoa, the 1956 census results had to be used to make a population projection. This experience taught a valuable lesson: that the words, "if present trends continue", are among the most dangerous in the social sciences. The results were electrifying. "Present trends" implied a growth rate of 3.6 per cent annually, which would have led to a total population of 195,000 by 1976 — an increase of 101 per cent in 20 years. The census taken in 1976 had counted a total of only 152,000 people. Apparently, the trends had not continued and 43,000 people had "evaporated". But what had really happened? Well, it was something that should have been foreseen.

When assisting with the checking and editing of census schedules, the author's attention was drawn to one which showed a woman stating that she had given birth to 24 children. This was either a mistake or many of the children were adopted, a not uncommon situation. When enquiries were made to the woman in person, she produced a new list of all her children, in chronological order of their birth, and was able to discuss each one, including birth dates and which were multiple births. There were two sets of twins. Yes, she had some adopted children, but they were not on the list because she knew that was not what was wanted. Each was as precious as her own children and she did not distinguish between them and those she bore herself. She did not think 24 was too many; after all, she had had four husbands, all of whom were either dead or had departed.

When asked what her children were doing now, she said the two youngest were living at home and attending high school; six were in New Zealand, of whom two were at university; Five were in Pago Pago, American Samoa; two were in Honolulu; and another two were somewhere near Los Angeles. One of the girls had married a German and lived abroad. Another five had jobs in the capital city, Apia, but often came to visit. That added up to only 23; the one not mentioned had died — a fact confirmed by checking the census schedule. Several had come from overseas to visit, but had returned to their jobs and always sent money if unable to come.

Table 1. Indices of fertility in Pacific island countries and territories

Country/territory	Year	0-14 years	Crude birth rate		Ranked by latest total fertility rate				Decrease
			per 1,000		Latest		Former		
			%	Year	Rate	Year	Rate	Year	
Palau	1995	28.2	90-95	23	1995	2.8	1973	4.3	1.4
New Caledonia	1996	30.6	1995	22	1995	2.8	1967	5.6	1.5
French Polynesia	1996	34.1	1995	23	1995	2.9	1967	6.3	1.6
Fiji	1996	43.1	1995	25	1990	3.2	1976	4.0	1.3
Tuvalu	1991	33.3	91-95	28	1995	3.3	1973	4.3	0.9
Cook Islands	1996	34.5	91-95	25	1991	3.3	1966	7.6	1.8
Northern Mariana Islands	1995	24.3	91-95	28	1995	3.4	1980	4.6	1.5
Niue	1996	37.0	91-95	15	1991	3.5	1967	6.3	1.5
Guam	1990	32.8	1995	28	1995	3.6	1970	4.7	0.8
Tonga	1996	40.6	91-94	28	1995	4.2	1966	6.8	1.0
Kiribati	1995	41.1	1995	32	1995	4.5	1973	4.3	+ 0.2
American Samoa	1990	39.0	91-95	34	1990	4.5	1974	4.9	0.5
Wallis and Futuna	1996	38.1	90-95	25	1990	4.6	1969	6.9	1.4
Papua New Guinea	1990	40.6	1990	34	1991	4.7	1966	6.2	0.8
Samoa	1991	35.8	91-95	29	1992	4.8	1971	6.3	1.0
Nauru	1992	41.7	92-95	23	1991	4.9	1966	7.0	1.1
Micronesia (Federated States of)	1994	43.5	1994	31	1994	4.9	1973	6.9	1.2
Vanuatu	1989	43.2	1989	38	1989	5.3	1967	6.3	0.7
Tokelau	1996	41.7	91-95	32	1996	5.7	1961	5.8	0.5
Marshall Islands	1988	47.9	1994	43	1994	5.7	1980	7.9	1.8
Solomon Islands ^a	1986	43.8	1986	42	1989	5.8	1970	6.6	0.7

Source: South Pacific Commission (1998). *Pacific Island Populations: Report Prepared by the South Pacific Commission for the International Conference on Population and Development, 5-13 September 1994, Cairo* (Revised edition, Noumea).

^a Excludes North Solomons Province.

What had been encountered was a spectacular prototype of a system which has since become fundamental to the economy and way of life in Samoa and which accounted for the lost 43,000. Nearly half of all Samoans now live overseas and their remittances greatly exceed the total export income of their home country. In 1956, in contrast, less than 4 per cent of Samoans resided abroad, and most of those who did were thought to be of part-European ancestry.

The myth of traditional fertility

This experience led to the identification of another myth: that these recently exposed fertility levels were “traditional”. The large family size noted in so many populations in the Pacific (see [table 1](#)) was thought to mark a return to normal levels, due to the success of departments of health in reducing diseases that had previously been so debilitating. Yet average family size approached seven children, with a third of all women with completed families reporting 10 or more children (up to 24 in the aforementioned case). Such fertility could not have been sustainable in a population in residence for something like 3,000 years, living fairly peacefully on small islands largely free of environmental and contagious disease. Some other influences as yet undiscovered must have been at work, but certainly were not operating in Samoa at that time. Men proudly proclaimed the numbers of children they had sired as evidence of virility and women derived family status from being “good breeders”. Victorian colonialism, the churches and the Samoan way of life (*fa’a Samoa*) had combined to set pronatalist standards for the population. Large family size in Samoa at that time did not impose necessarily an economic penalty, rather the reverse. Most Samoans then saw themselves as comfortably supplied with all the essentials of a good life. The government was providing health care, education and an infrastructure of a reasonable standard, certainly much better than anything that had gone before, all apparently for free.

The combination of low or moderate mortality and the levels of fertility then being described as “traditional” necessarily imply exceptionally high growth rates, leading over the centuries to excessive population densities. Instead, it has been observed repeatedly that densities in the Pacific islands never seemed to rise to the levels at which their “carrying capacities” were strained. Resources were appraised very conservatively relative to the population dependent on them and their rate of utilization; subsistence agriculture, with few exceptions, remained casual or non-intensive. The reasons for this conservative appraisal of resources were not always economic, but sometimes also social and political. The obvious

alternative explanation was that fertility must have been controlled. Given the prevailing ethos, this possibility seemed too far-fetched. However, over time, and with more reading about other cultures in the Pacific and the world, this explanation became more convincing to the author. In summary, the control of fertility involved the imposition of a variety of traditional methods to extend birth intervals and limit family size.

One of the first cases to appear in the literature was described by Firth (1936) who found such a situation on Tikopia, a Polynesian outlier in the eastern Solomon Islands. Because of limited space and resources, the need to control family size is likely to appear most obviously on such as island. Two other cases have been noted on atolls, Nukuoro and Eauripik, in the Federated States of Micronesia. Both have retrospective data of good quality that show low mortality, an expectation of life of about 60 years, and apparently low fertility to have resulted in population homeostasis over a long period up to the first decades of the twentieth century (Carroll, 1975; Levin, 1976). However, control of family size was not confined to areas of such limited possibilities for subsistence, but was prevalent - sometimes in rigorous form — in areas as diverse and as environmentally productive as the highlands of New Guinea and Tahiti.

There seems to have been a hunting and gathering stratum throughout the sequence of settlement in the Pacific. This was certainly true of the Maori who, late in the sequence, settled one of the most marginal areas of Polynesia. Although derived from an agricultural society in tropical Polynesia, the Maori who settled in non-tropical New Zealand were content in the early stages of their settlement, when population density was very low and feral resources plentiful, to depend upon a hunting and gathering mode of existence that was semi-nomadic. Only after about 1300 AD, when the large, flightless birds known collectively as “*moa*” had been rendered virtually extinct, the seal resources seriously overexploited and the Andean *kumara* (sweet potato) had been introduced, did the culture shift to the primarily agricultural mode of the classic Maori. In time, the economic advantage shifted to the mesothermal climates of the North Island, but the archaic culture persisted in the South Island until after contact (Bellwood, 1979:387).

This matter is of great demographic interest, because of the low fertility always associated with mobile hunting and gathering bands. It has been noted that, among these groups, replacement is kept deliberately low and various practices are employed, with varying degrees of emphasis, to lower average family size. These include post-partum and other taboos, prolonged lactation, customs such as bride-price which delayed marriage,

abstinence in marriage, the deprecation of sexual interest, attempted contraception, abortion and infanticide. All these practices have been observed in Papua New Guinea among peoples more recently contacted, most of whom are currently sedentary agriculturists (Buhner, 1971; McDowell, 1988).

For example, an early anthropological study of the Kunimaipa people in the highlands of Papua (present-day Papua New Guinea) by Margaret McArthur (1961) made in the 1950s illustrates the pre-transitional situation that must have been typical in much of the country. At the time, the Kunimaipa showed an age and sex structure indicating no recent natural growth. They had a child/woman ratio of only 380 per thousand, only 28 per cent of the population was aged 15 or less, and an average of fewer than 3.5 children were produced per woman of completed fertility. Prevalent abortion, a post-partum taboo and prolonged breastfeeding of up to four or five years were identified as the possible causes — with infanticide also noted — of this fertility profile. High mortality among infants (over 225 per thousand births) and toddlers (70 per thousand) was inferred. Margaret McArthur (1961:7-12) noted that, while abortion, infanticide and infant mortality were not deliberately concealed, mothers responding to fertility questions usually omitted these events as the outcomes of pregnancies that never became “people”. Although the numbers on which these indices are based are too small in this case to be statistically reliable, other studies have shown similar results and there can be no doubt of the biological situation and social reality they describe.

In New Guinea, cultures ancestral to those in the other Pacific islands are observable in their least altered form. In the areas beyond New Guinea, where contact has been more prolonged, most of these practices have been abandoned (or suppressed). Yet remnants have been noted in so many Melanesian, Micronesian and Polynesian cultures that the probability is that they were previously much more general, widespread and effective. It seems preferable, in the light of these findings, to classify the revealed fertility as “neotraditional”. The likelihood that the peoples settling the Pacific islands traditionally manipulated their fertility levels and deliberately kept replacement low would do much to explain some of the demographic anomalies found when examining the evolution of Pacific populations.

In the countries where high fertility was noted in the 1950s and 1960s, fertility decline is now well established and the surge has moved on to western Melanesia and eastern Micronesia. Even there, fertility decline has been noted in the two current champions, Solomon Islands and Marshall

Islands. Analysis of the most recent census of Papua New Guinea, imperfect as it was, suggests that in general fertility has remained moderate (Hayes, 1992: 5-6).

The doomsday myth

This is not the impression one gets from the first volume of the Pacific 2010 project, “Challenging the Future” (Cole, 1993) undertaken by Australian National University, in which the region’s population growth is described as “careering...beyond control” (Callick, 1993:8). The work is based on seven population projections by various demographers, several of them Pacific islanders, for the larger and independent countries of the Pacific, namely Fiji, Kiribati, Papua New Guinea, Samoa, Solomon Islands, Tonga and Vanuatu ([see map](#)). The computer programs for making such projections are fairly standard; the main problems nowadays are the reliability of the data input and what assumptions to build into the projections. In this case, demographers followed their usual custom of making a range of projections, “low”, “medium” and “high”, and leaving it to readers to make their own choice.

While it is possible to quibble about some minor details regarding these projections, they are not the problem. The editor of “Challenging the Future”, Rodney Cole, commissioned Rowan Callick, usually one of the more knowledgeable journalists on the Pacific, and Ken Gannicott, a respected expert on education and manpower economics. Their brief seemed to be to lighten things up somewhat, to make the message more palatable for its intended audience. The results are unfortunate. Callick (1993) takes a series of “worst cases” and extrapolates them as a “doomsday scenario” to fit all seven of the surveyed populations. Gannicott (1993), in an otherwise useful chapter on the growth of school-age populations and the workforce, betrays his ignorance of the wider field by invoking Gauguin and modern-day novelist Paul Theroux as authorities on the Pacific. He also observes that it is not surprising so little is known about the populations of the Pacific islands, since they are so small, an echo of the belittling tendency that Hau’ofa (1994) discerned among the region’s larger neighbours.

Within the ensuing 12 years, in the Callick scenario, we should see a fall in the proportion of people in paid employment, and the traditional agricultural system will be stretched to its limit to absorb an additional 3 million people. Cities will continue to grow. Port Moresby, for instance, will have half a million people by the end of the period (still only about 11 per cent of Papua New Guinea’s total population, a modest proportion for a

capital city by most contemporary standards), but much of the population will live in “squatter settlements” or “slums” and there will be beggars on the streets of every Pacific town. The private sector will not expand and government services in the region will diminish. Lawlessness will increase, along with a battery of other social ills. Narcotics, including the traditional relaxants of *kava* (a drink made from pepper root) and betel nut, will take over the agricultural export trade. *Copra* exports will collapse and logging will exhaust forest resources. Water will become unfit to drink in cities such as Port Moresby and women will be driven to cultivate almost vertical slopes in Papua New Guinea highlands. Lagoons in Micronesia will become so polluted that no one will be allowed to use them. The final insult is that, by the end of the period (year 2010), so many people will have left for jobs overseas that desperate governments will have to start “delocalizing” — recruiting expatriates to cover the skill gaps. How these governments would be able to pay expatriate salaries under these calamitous conditions is a problem which remained unexamined.

Three Pacific specialists, Geoffrey Hayes (1995), Michael Levin (1995) and this author (Pirie, 1995), reviewed this work for *The Contemporary Pacific*. Hayes observed that the book “gives the impression that the economic consequences of population growth in the Pacific have only recently come to the attention of planners, social scientists and politicians, which is quite incorrect”. There are at least 3,000 titles on various Pacific island population topics and it was remarks such as this that led some to lament about a seeming lack of institutional memory in a book produced from a university that had pioneered Pacific island demography. In the 1950s Norma McArthur found several Pacific island populations (such as Fiji) growing at annual rates of well over 3 per cent, levels which make the 2.3 per cent of the 1990s and the aforementioned “doomsday scenario” look rather tame. She did not see a necessity to “dumb down” her findings for the Pacific island leaders of the day, nor even for Australian politicians, so that they could understand demographic trends. It was not necessary then; it is not necessary now.

Besides being potentially offensive to an island readership, the overall argument of a “doomsday scenario” is academically suspect. Hayes (1995:193) points out that the results of the population projections do not support several conclusions drawn in the editorial chapters. The projections suggest that the rate of population growth for those seven countries will fall within a range between 1.6 and 2.5 per cent. Callick (1993) does not state the population growth rate underlying this scenario, but by quoting the figure of 9 million, presumably for the seven countries, he implies an annual

rate of 4.1 per cent, notably higher than suggested in the actual projections. If current trends continue for the next 12 years, then the populations for the countries studied are likely to be close to 8 million, and for the Pacific area as a whole, i.e. the 21 countries concerned, close to 9 million.

The Pacific 2010 project was intended to draw attention to serious problems looming in the Pacific and there are some situations that merit this concern. The particular aim was to focus the attention of the Australian Government, politicians and officials on the continuing financial and technical needs of several Pacific island countries, most notably Papua New Guinea. While the intention on the surface may have been laudable, a respected university should not be seen to countenance journalistic propaganda. A related, but more fundamental objection has been voiced more recently by Fry (1997), who noted that Australian politicians, academics and journalists seem to have collaborated in this instance in “a new doomsdayism”. His argument is that, like earlier “framings” of the island region, it has employed “a system of knowledge that implicitly denies self-determination while claiming to advance it, and promotes superiority and exclusion while claiming to advance equality. At the heart of this new doomsdayism is a special right to manage, steeped in old racist premises” (Fry, 1997:336). In general, the fact that fertility already has fallen from its peak in every Pacific island country seems deliberately to have been omitted, presumably so as not to weaken the message.

Conclusion

Fertility is still very high in many Pacific island countries, but in others has been shown to have changed within a relatively short time (Pirie, 1994). Overall, trends are positive and [table 1](#), derived from data provided by the South Pacific Commission (1998), illustrates the extent to which a fertility decline is characteristic of all the above-mentioned 21 countries. Despite this, it is true that most island countries have adopted family planning with reluctance. Only pressure from aid donors has moved most governments to adopt programmes or enact policies aimed at limiting family size. Pacific island women have been slow to accept family planning, the major reason being that they did not find the methods satisfactory and to some “the cure seemed worse than the disease” (e.g. Chung, 1990:208-217). This situation is now changing and contraceptive technology is currently showing some dramatic improvement.

The most disquieting demographic situation currently is in Papua New Guinea, where there is recent evidence that the fertility and mortality

transition has stalled (Hayes, 1992:2-6). But this is due mainly to administrative problems rather than to a disinclination on the part of the population to accept change, and as such it may be cured by reform, vigorous perhaps, but with well-established prescriptions. More encouraging is the notion that the current lowering of fertility throughout the Pacific is not really an innovation, but a return to a status lately given a new relevance, which these populations most certainly will not ignore. The ancient balance between low mortality and low fertility characteristic of the pre-contact Pacific looks likely, eventually, to be restored.

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