





Eliminating Violence against Women (EVAW) in Pohnpei and Chuuk, Federated States of Micronesia

Assessment of EVAW Services and Gaps in Services Section 3 – Chuuk State

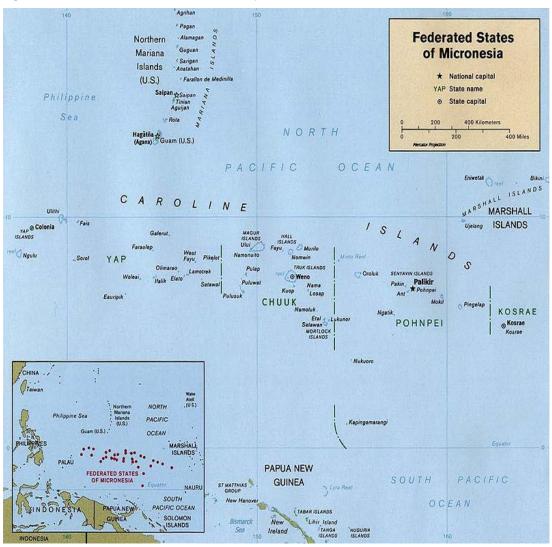
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Figure 1 Federated States of Micronesia Map



Source: U.S. Central Intelligence Agency - Federated States of Micronesia (Political) 1999 from Perry-Castañeda Library Map Collection: Federated States of Micronesia Maps, Public Domain, https://commons.wikimedia.org/w/index.php?curid=46492

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Every attempt has been made to reference the toolkit throughout the report. The author apologises in advance should any omissions become evident.

Abbreviations and Acronyms

AFP Australian Federal Police
AGO Attorney General's Office

CEDAW Convention for the Elimination of all forms of Discrimination Against Women

CFO Country Focal Officer

CRC Convention on the Rights of the Child

CRPD Convention on the Rights of Persons with Disabilities

CSO Civil Society Organisation

DHSA Department of Health and Social Affairs

DHSS Department of Health and Social Services

EVAW Elimination of Violence Against Women

FHSS Family Health and Safety Study
FSM Federated States of Micronesia
FSV Family and Sexual Violence

FVU Family Violence Unit

HIV Human Immunodeficiency Virus

IEC Information, Education and Communication

M&E Monitoring and Evaluation

MIS Management Information System
MLSC Micronesian Legal Services Corp
MOU Memorandum of Understanding
NCDs Non-Communicable Diseases
NGO Non-Government Organisation

Pacific Women Shaping Pacific Development

PCO Pohnpei Consumers Organisation

PDF Pacific Disability Forum
PWC Pohnpei Women's Council

RRRT Regional Rights Resources Team SDGs Sustainable Development Goals

SPC (Secretariat of the) Pacific Community

UN United Nations

UNICEF United Nations Children Fund

UN Women United Nations Entity for Gender Equality and the Empowerment of Women

US United States (of America)

VAWG Violence Against Women and Girls

WHO World Health Organisation

Executive Summary

The Federated States of Micronesia (FSM) Department of Health and Social Affairs (DHSA) completed a national Family Health and Safety Study (FHSS) in 2014. The purpose of the study was to identify the prevalence of family and sexual violence (FSV), also known as intimate partner violence, in each of the four states of the Federation. In Pohnpei one in five ever partnered women had experience of physical or sexual violence by a partner.

Violence against women and children cannot be viewed in isolation as it is a symptom of gender inequality. Global evidence shows that countries with improved gender equality have better social and economic development outcomes; investing in eliminating violence against women and children will pay back in the future.

In 2015 UN Women developed an Essential Services Package as a coordinated set of essential and quality multi-sectoral services for all women and girls who have experienced gender-based violence. The Package identifies the essential services to be provided by the health, social services, police and justice sectors (the "Essential Services") as well as guidelines for the coordination of Essential Services and the governance of coordination processes and mechanisms. Due to its best practice approach, the Framework was used to guide the collection of information for this assessment so that funding for future interventions ultimately contributes to achieving best practice in each of the essential services and in coordination of services.

The FHSS identified the need to promote multi-sectoral coordination between the health system and other public agencies (eg, legislature, judiciary, public safety, social services) and private organisations (eg, women's groups, NGOs, private health centres). The findings were supported by in-country consultations for this assessment.

FSM is one of five Pacific countries that does not have mental health strategies or a mental health act. Mental health activities or services to address the issues of violence against women are essential.

A comprehensive legal framework is required that provides the legal and judicial basis for victims/survivors' seeking health, social services, justice and policing services. Chuuk does not yet have family violence legislation, though drafting has begun. The draft Bill needs to meet standards for good practice in sentencing, policing and other areas. Progressive alignment of all existing legislation with international and regional obligations is necessary along with new legislation to fill gaps.

Both a Chuuk EVAW Committee (or task force) and a Chuuk EVAW Referral Network are mechanisms to secure good coordination and governance of coordination. Agency representatives appointed to the state EVAW Committee (governance body) need to be senior enough in their agencies to be able to influence so that decisions of the governance body filter across each member agency and support the work of the EVAW Referral Network at the front line of service delivery.

Coordination and governance of coordination need to be guided by an action plan that is aligned with national level strategy and developed consultatively.

Opening Recommendations: Chuuk State

An extensive state program to eliminate violence against women requires actions from government, civil society organisations and development partners. A full list of recommendations appears in context in the text in Section 6. This summary contains up to three key recommendations for each Essential Services area and were selected because they mostly require only internal action or technical support and will be relatively easy to commence with. Each service area is introduced in the main body of the report. Recommendations for National Government appear in Section 1.

Fundamental Elements

- Fulfil State Government's obligations by:
 - providing a strong legal framework to eliminate discrimination, contribute to the achievement of the Strategic Development Plan 2004-2023 and ultimately strengthen FSM's economy;
 - pursuing a range of technical support (outlined in section 6.5).

Coordination and Governance of Coordination

 Government to instigate a State EVAW Committee (governance) and an EVAW Referral Network (operational level), an action plan and an M&E framework that is aligned with national level strategy; develop agreements and standard operating procedures that are shared amongst participating organisations and accessible to communities.

Social Services

- Government with support from donor partners provide:
 - funding of widespread awareness raising in communities on family and sexual violence, including through the media, plus funding to produce IEC materials to be distributed by all essential services, including clear accurate crisis information for supporting victim safety;
 - technical support to train trainers in crisis counselling for victims of family and sexual violence; funding for trainers to train strategically placed crisis counsellors in all sectors: government (hospitals, clinics and dispensaries), non-government (women, youth, senior citizens, people with different abilities) and faith based organisations.
- Government with support from donor partners to take urgent action to create shelters and allied services for abused women and their children, in a location where security can be extended by a respected leader; whether religious, traditional or municipal leader is open to each individual context.

Justice Essential Services

- Additional budget allocation for the Police Family Violence Unit so that it can function in a similar manner to the Guam Police Domestic Assault Response Team model.
- Additional budget allocations to judicial services to provide efficient and effective legal remedies.
- Government to establish specialised and multi-disciplinary units within the justice sector for improved coordination of service delivery.

Health EVAW Essential Services

- The Department of Health to seek technical support and funding to:
 - strengthen every area of health essential services including: first line support; effective identification of women and children subjected to violence; training of staff on how to sensitively gather information from victims; psychological and mental health support;
 - upgrade training of mental health nurses and train additional mental health nurses;
 - create a safe space for mental health patients that is made secure and is supervised by health professionals around the clock.

1 Background

This assessment is structured in three sections. Section 1 is the main body of the report, Section 2 is specific to Pohnpei State and Section 3 is specific to Chuuk State, all including recommendations. Sections 2 and 3 contain a mapping of essential services and actions, outlining the assessment of what is in place that needs strengthening and gap areas. The assessment aims to inform stakeholders at national and state level on the strength of available services aimed at eliminating violence against women (EVAW) in the two states and to identify gaps in services so as to provide a way forward for eliminating family and sexual violence and for assisting government to report on regional and international obligations.

After contextual information on Chuuk, the report situates domestic violence in the context of gender inequality. Brief information on gender equality indicators is provided and background on the State Women's Machinery. An introduction to the Essential Services Package follows and leads into the assessment of Chuuk State essential services against the model. A mapping table is included in Annex 1 and brief information on non-government agencies is provided in Annex 2.

Information on the purpose and methodology can be found in the Section 1 report.

2 Chuuk State Context

The State of Chuuk (formerly Truk) consists of 15 high volcanic islands in the Chuuk Lagoon and a series of 14 outlying atolls and low islands. The population of 48,654 accounts for almost half of the FSM total population. There are three geographic aspects to Chuuk, the administrative centre of the state on the island of Weno (formerly Moen), the islands of the Chuuk Lagoon, and the islands of the outlying atolls - a total of approximately 290 islands. Chuuk Lagoon islands account for 67% of the population. The administrative centre of Weno Island has 29% of the total population (14,113), followed by Tol (4,579), Tonoas (3,517), Fefan (3,471), Uman (2,554), Udot (1,680), Polle (1,498), Patta (1,107), Romanum (865), and Fanapanges (672). The remaining islands have less than 650 residents each. Approximately 48.7% of the total population are under 20 years of age.¹

The total land area of the 15 Chuuk Lagoon islands is 100 square kilometres; and the lagoon itself has a total surface area of 2,129 square kilometres surrounded by 225 kilometres of coral reef. Because of the vast expanse of water between islands, travel within the state is difficult. Travel by boat from Weno to any other island in the lagoon will take from 1.5 hours to 2 hours. Access to the outer islands is even more difficult with travel times on a cargo ship taking from four hours to two days. The provision of outreach, including health care, to the population is made difficult by the lack of transportation and communication between widely dispersed, small clusters of the populations.²

3 2014 Family Health and Safety Study

The Federated States of Micronesia (FSM) Department of Health and Social Affairs (DHSA) completed a national Family Health and Safety Study (FHSS) in 2014. The purpose of the study was to identify the prevalence of family and sexual violence (FSV), also known as intimate partner violence, in each of the four states of the Federation. Partner violence was defined as the physical, sexual, emotional, and/or economic violence by a current or former intimate partner, whether cohabiting or not, experienced by women (FSM Department of Health and Social Affairs, 2014:28).

¹ http://www.fsmpio.fm/announcements/health/MCH/2017_APP_TitleV_PrintVersion.pdf

² Ibio

Nationally, close to one-third of ever partnered women had experience of physical or sexual violence by a partner. Based on the 2010 Census that would number 16,6133 victims and possibly as many perpetrators. Similarly, one-third of ever-partnered women experienced emotional violence by a partner in their lifetimes. Some women (6.3%) experienced physical violence by a partner during pregnancy and almost half of those (44.2%) were punched in the abdomen by the father of the child (Ibid:39).

Table 1 Prevalence of FSV for FSM and States Individually

Family and Sexual Violence	FSM	Pohnpei	Chuuk	Kosrae	Yap
2010 Census Female Population	50,650	17,825	23,819	3,264	5,742
Prevalence of ever partnered women	32.8%	18.9%	49.9%	57.8%	27.0%
Prevalence in last 12 months	24.1%	13.5%	42.6%	24.3%	15.1%

Source: SBOC. 2012:8 and FSM Department of Health and Social Affairs. 2014:40

The result for Chuuk was above the national average. One in two ever partnered women (49.9%) had experience of family sexual violence at the hands of a loved one.

A summary of FHSS results appears in Section 1.

Gender Equality in Chuuk State 4

Violence against women and children cannot be viewed in isolation as it is a symptom of gender inequality. The Pacific Women Roadmap references global evidence4 that shows that countries with improved gender equality have better social and economic development outcomes due to the involvement of more people with diverse views, skills and experiences in decision making, economic activity and maintenance of positive social relations. Family and sexual violence is one indicator of gender inequality. Other indicators emerge from the political and economic representation of women.

The 2017 election resulted in one woman senator out of 38 seats. The Chief of Public Health is a woman but there do not appear to be any other women in senior positions in the state administration or the justice sector.⁵ Despite the lack of recognition of women in the public sector, women are achieving in professional careers as lawyers, doctors and tourism operators, which can at times position them to influence decision making. A Women in Business network was formed in 2013, though it currently meets infrequently.

In September 2017, the national government finalised a Draft National Gender Policy to be in effect until 2023, once endorsed by the President. The policy has six goals: Better representation of women in decision making; Elimination of gender-based violence; Equitable education outcomes; Address barriers facing women in the workforce; Women have better health care and improved choices over their fertility; and FSM and State Governments mainstream gender to consider the impacts of policies and programs on women and men, girls and boys. Mainstreaming gender across government is the tool for achieving the other five goals and will need to be progressed simultaneously. State gender policies are an important next step. Technical assistance is available through SPC-RRRT and the Pacific Women/SPC Gender Adviser.

³ Based on all females counted in the census, even though the FHSS survey group was aged 15 to 64 years. The survey showed that some victims were aged under 15 years at the time of violence or sexual assault.

⁴ World Economic Forum, 2016, The Case for Gender Equality, http://reports.weforum.org/global-gender-gap-report-2015/thecase-for-gender-equality/ 5 This information may not be up to date http://fsmsupremecourt.org/WebSite/chuuk/index.html

FSM has ratified three key UN Conventions: CEDAW, CRC and CRPD. The government has also endorsed a number of key international and regional policy frameworks containing commitments to gender equality, including the 2012 Pacific Leaders Declaration on Gender Equality and the 2015 Sustainable Development Goals (SDGs). Implementation of the gender policy will assist the government to report progress on meeting its obligations at the regional and international level.

4.1 State Women's Machinery

The Chuuk Department of Health and Social Affairs (DHSA) houses the Women's Interest Office, which is the State Women's Machinery; however, the position of Women's Interest Officer has been vacant for some years. In the absence of a civil servant, the civil society organisation (CSO) the Chuuk Women's Council (CWC) fulfils the role but without recognition from the State Government. CWC liaises closely with the Gender Development Unit of the National DHSA and with women's councils in other states.

4.2 Chuuk Women's Council

Women's Councils represent numerous women's groups, many of them religious in nature. As an example, the Chuuk Women's Council (CWC) was established in 1993 to represent 64 women's groups with over 1,000 members⁶; the history of many of these women's groups goes back 40 years. In Chuuk State, CWC has played an important role in advocating women's issues with governments and currently, in the absence of a Women's Interests Officer at the State DHSA, CWC has become the default focal point—a role it performs admirably despite funding constraints. CWC is based at a Women's Centre in Weno, which was established on donated land with building funding support from the Government of Japan. The Women's Centre contains offices, workrooms, meeting rooms suitable for workshops, a small library and workspace for students, and a large bedsitter flat that was intended as a refuge but has never been used for the purpose because security and other services are not in place.

Additional information on CWC is available in Annex 2.

5 Model: Essential Services Package

Services for eliminating violence against women and children fall into categories commonly known as the Three Ps: prevention, protection and prosecution. Added to that is the need for coordination and governance of coordination.

In 2015 UN Women developed an Essential Services Package as a coordinated set of essential and quality multi-sectoral services for all women and girls who have experienced gender-based violence. The Package identifies the essential services to be provided by the health, social services, police and justice sectors (the "Essential Services") as well as guidelines for the coordination of Essential Services and the governance of coordination processes and mechanisms (UN Women, et al, 2015, Module 1:6).

Essential services can reduce the losses experienced by women, families and communities in productivity, school achievement, public policies and budgets, and help break the recurrent cycle of violence. The Essential Services Package also plays a key role in poverty reduction and development, and efforts to achieve the 2015 Sustainable Development Goals (Op cit).

The Essential Services Package is set to be delivered in the South Pacific from 2018 and there is potential to expand delivery to the North Pacific at a future time. Due to its best practice approach, the

⁶http://www.cwcfiinchuuk.org/about.html, accessed 19 December 2014.

Framework was used to guide the collection of information for this assessment so that funding for future interventions ultimately contributes to achieving best practice in each of the essential services and in coordination of services.

Figure 2 **Overall Framework Diagram**

Principles	A rights based approach	Advancing gender equality and women's empowerment		Culturally and age appropriate and sensitive		
Princ	Victim/survivor centred approach	Safety is paramou	nt	Perpetrator accountability		
	Availabilit	ty		Accessibility		
on istics	Adaptabili	ity	Appropriateness			
Common	Prioritise sa	fety	Informed consent and confidentiality			
Common	Data collection and informa	ation management	Effective communication			
	Linking with oth	ner sectors and agencies t	nrough referral	rough referral and coordination		
ional	Comprehensive legislation and le framework	gal Governance ov accounta	0	Resource and financing		
Foundational elements	Training and workforce developm	ent Gender sensitive practic	•	Monitoring and evaluation		

Source: UN Women, et al, 2015. Module 1:18-19

A mapping of essential services and actions appears as Annex 1, outlining this assessment of what is in place that needs strengthening and gap areas. Prioritisation for early state government, donor and technical support will be important as not every element of the Package can be implemented without a comprehensive program plan and matching funding. The following is an edited version of the commentary in Section 1 and focuses specifically on Chuuk State.

Assessment of Chuuk EVAW Services 6

Information available suggest that FSM generally, and Chuuk State individually, have made some progress in addressing violence against women and children but generally lack quality essential services to eliminate violence against women and girls. This is especially the case for women and children with disabilities, those living in rural and remote areas and those made vulnerable by other circumstances, eq. poverty. Chuuk does not have protection legislation but drafting work has commenced at the Attorney General's Office. There are women's and youth groups that raise awareness about family and sexual violence (FSV) and have been instrumental in creating momentum for legislation; however, these agencies work in a wide range of focus areas and are almost entirely voluntary.

Other issues have a higher profile than FSV, such as, substance abuse, teen pregnancy and youth suicide. Trafficking of women and children has a much higher profile despite there being a small number of cases to date. Coordination between service providers is either ad hoc or absent, data collection is minimal or obscured by the lack of formal identification of FSV cases and there is no government budget allocation to address FSV. However, there is strong support for action from all participants in the consultation for this assessment, including at the political level.

The Committee on the Elimination of Discrimination against Women identified a number of weaknesses in FSM's response to family and sexual violence and recommended that government give high priority to putting comprehensive measures in place, including policy, legislation, access to justice and the full range of support services. An overarching recommendation was to step up educational and awareness-raising efforts aimed at judges, prosecutors, law enforcement personnel, legal practitioners, traditional leaders, health-care providers, social workers and the general public, in order to sensitise them to the fact that all forms of violence against women are unacceptable and to destigmatise victims (CEDAW, 2017:8).

Communication issues, both within the national government and between national and state governments, arose on many occasions. There is no mechanism to monitor the dissemination of information and there is a sense, amongst those consulted, that offices work in silos. Action is required to strengthen the dissemination of information, especially where there are consequences for the states. As a first step, a performance indicator for communication could be included in all civil service role descriptions and monitored at least annually. Communication Skills Training may also produce results.

6.1 Health EVAW Essential Services

Health care providers are the first professional contact for some women who have been subjected to intimate partner violence or sexual violence, so a quality health service response is crucial (UN Women, et al, 2015: Module 2:7). The FHSS found that more than 41% of women who experienced partner violence were injured at least once in their lifetime, slightly over 11% of ever abused women said they lost consciousness at least once and 8.8% said they were hurt enough to need health care of one sort or another. Only one third (30.2%) of those told the health worker the real cause of the injury (FSM Department of Health and social Affairs, 2014:55).

The 2014 FHSS reported that women who experienced partner violence were, over the life cycle, more likely to consult a doctor and to take more medication for pain, sleeping or depression than women who did not experience partner violence (lbid:56). Further, the proportion of women who reported ever thinking about suicide and attempting suicide was significantly higher among women who ever experienced partner violence than among women who never experienced partner violence (lbid:57).

The FHSS identified the need to strengthen the health system through the development of medical protocols and capacity building programs for medical staff to better respond to family and sexual violence (Ibid:76). It also identifies the need to promote multi-sectoral coordination between the health system and other public agencies (eg, legislature, judiciary, public safety, social services) and private organisations (eg, women's groups, NGOs, private health centres) (Op cit). The findings were supported by in-country consultations for this assessment. Chuuk hospitals receives roughly two cases related to family violence annually, but obstetrics/gynaecology staff attempt to identify rape victims. Hospital management is willing to build the capacity to take on more patients when the proposed new hospital is built, and staff training is in place. The hospital has an aging workforce and experiences recruitment and retention problems. Recruitment is undertaken in senior schools and recruits are given in-service training. There are 50 registered nurses and 123 nurses with no nursing college training. Roughly 80% of all nurses are female.

Chuuk Hospital is mostly only accessible for surrounding populations. There are two ambulances but no public transport, only a taxi service, and the roads out to villages are in bad shape adding to travel time and discomfort for the patient. Health centres and dispensaries exist but function at varying levels and have no specific systems for dealing with victims/survivors. The outer islands are the poorest served for dispensaries. Hospital staff undertake joint missions with CWC to villages and outer islands to educate on public health, sexual and reproductive health, human trafficking or other relevant advocacy issues.

The hospital also has 10 health promotion officers who appear to only network within the health system, though there is an intention for one to assist with reviving the Family Life Education

curriculum for schools (see Section 1). Additional training for these officers was recognised as a need because most have only elementary education.

Essential health services address all health consequences, including the physical, mental and sexual and reproductive health consequences, of violence against women. Health interventions include: first line support; treatment of injuries and psychological and mental health support; for post rape care: emergency contraception, safe abortion where such services are permitted by national law, post exposure prophylaxis for HIV infections, and diagnosis and treatment for sexually transmitted infections (UN Women, et al, 2015: Module 2:7). Medical and other health professionals need to be trained to effectively identify and treat women subjected to violence and professional forensic examinations made available (Op cit) with the associated laboratory support. Health care services need to be accessible; responsive to trauma; affordable; safe; effective and good quality (Ibid:8).

WHO Guidelines recommend that information on intimate partner violence and non-partner sexual assault should be available in healthcare settings in the form of posters, and pamphlets or leaflets. These can be on public display and made available in private areas such as women's toilets (Ibid:14). As mentioned above, the FHSS found that injured victims presenting at medical facilities are unlikely to tell the truth about how the injury was sustained; however, if victims see information about legal rights, that family violence is not normal, and how to access confidential support, there is a chance that they will seek assistance at a future time.

When assessing conditions that may be caused or complicated by family violence, health service providers need to ask about exposure in order to improve diagnosis and subsequent care; however, this needs to be linked to an effective response, which would include a first-line supportive response, appropriate medical treatment and care as needed, and referral either within the health system itself or externally (Op cit).

As awareness on family violence is raised within communities, demands for hospital services are likely to increase and so may the risk of antisocial behaviour by perpetrators on hospital premises. This assessment heard that a woman was shot dead by her abusive husband on the premises of Chuuk Hospital. Harassment of patients in treatment rooms was also reported. Hospital security will need to be strengthened.

Mental Health Services

Chuuk Hospital provides limited mental health services, though the focus to date has been on reducing substance abuse and other risky behaviour. There is one psychologist at the hospital, recently appointed, but no psychiatrist, one social worker who counsels on substance abuse, and a small number of mental health counsellors. Training of a larger mass of mental health nurses was identified as a need. There is no separate safe facility to admit mental health patients and sufferers are known to end up in jail for their own protection.

The CEDAW Committee expressed particular concern about the health situation of women in remote areas and on outer islands, and was generally concerned about the lack of measures to address the physical and psychological trauma of women who are victims of gender-based violence—resulting in high suicide rates—the high number of teenage pregnancies and the absence of safe and legal abortion facilities except for where the life of the pregnant woman is at stake (CEDAW, 2017:11). Amongst the recommendations was to design a monitoring mechanism for the mental health situation of women and girls, to use as the basis for mental health programs and services (Ibid:12).

Health Management

In the past 15 years, FSM and the US Government have invested in FSM health information systems (HIS) to increase the ability to track key health indicators that can inform health service planning and programming at the state and national levels (UNICEF, 2013a:12); however, a study conducted in 2013 found different definitions were used between programs, limiting comparisons and triangulation

of data. The structure of donor funding was said to have contributed to a compartmentalised effect and resulting data collection methods (Op cit). Clarification was provided by government that the HIS only captures inpatient and outpatient records and not federally funded public health programs. As such, it is not a donor driven health system. Program registries and databases are donor driven systems to ensure that data for reporting are prioritised in those systems, and not of what the overall need of the health assessment is.⁷

At Chuuk Hospital, no HIS appeared to be in place; this assessment was advised that daily statistics are kept in log books and later transferred into a spreadsheet for monthly reporting. Sample reports were requested but none were forthcoming at the time or from email following up later. Currently no VAW information is required by health donors and domestic violence is categorised as assault so the few confirmed cases are not recorded as other than assault. Accurate statistical reporting of cases is important for tracking demand and trends over time and needs to be accessible, both internally and externally.

The WHO has been assisting the national health department to improve the HIS in relation to pharmacies. DHSA has a staff member updating HIS programming to include pharmacy, linking laboratory with lab system standalone finance, plus the triage and diagnosis that doctors do at the time of interviewing patients.⁸

SPC has been assisting the FSM Government to improve management information systems more broadly, but there is more to do. It will be particularly important to have systems in place to capture disaggregated data relating to violence against women and children, as attempts escalates to address the problem.

Health services are undermined to some extent by funding mechanisms. Core funding is provided through Compact funds for specific purposes, then grants are applied for through other US government funding windows for additional specific purposes, such as Behavioural Health. This tends to promote reactive rather than proactive health administration.

6.2 Recommendations for Health EVAW Essential Services

Governments are the duty-bearers when it comes to ensuring that adequate health responses are in place to address family and sexual violence.

- The Department of Health and Chuuk Hospital management must participate in multi-sectoral coordination between the health system and other public agencies (eg, legislature, judiciary, public safety, social services) and private organisations (eg, women's groups, NGOs, private health centres).
- The Department of Health to seek technical support and funding to:
 - strengthen health centres and dispensaries, including in the outer islands, to develop specific systems for dealing with victims/survivors of family and sexual violence, including staff training;
 - strengthen every area of health essential services including: first line support; effective identification of women and children subjected to violence; training of staff on how to sensitively gather information from victims; psychological and mental health support;
 - establish post rape care through: emergency contraception, safe abortion where such services are permitted by national law, post exposure prophylaxis for HIV infections, and diagnosis and treatment for sexually transmitted infections; forensic examinations by appropriately trained professionals with the associated laboratory support;
 - establish separate clinic sessions for senior citizens, people with disabilities and especially vulnerable populations;

⁷ Feedback from a government source during report drafting.

⁸ Feedback from a government source during report drafting.

- produce visual information on intimate partner violence and non-partner sexual assault to be available in healthcare settings in the form of posters, and pamphlets or leaflets, including contact details for support agencies—these materials could be produced as part of a collective awareness raising campaign by the essential service providers;
- strengthen hospital security to ensure that violence of any kind is prevented on hospital grounds;
- upgrade training of mental health nurses and train additional mental health nurses;
- create a safe space for mental health patients that is made secure and is supervised by health professionals around the clock.
- Hospital management to seek additional funding for vehicles for health outreach to roadaccessible communities and to provide an adequate transportation budget for quarterly outer island health outreach.
- Government to provide additional budget for a disability focal point position, to be based at the hospital.

6.3 Police and Justice EVAW Essential Services

The provision of a quality justice response as part of the holistic, comprehensive and multi-sectoral approach to addressing violence against women is essential. Relevant laws against such violence need to meet international standards; be enforced; keep women and girls safe from violence, including from the re-occurrence of further violence; hold perpetrators accountable; and provide for effective reparations for victims and survivors. Justice systems, and all actors within the system, must be accountable for ensuring that they deliver on their obligations (UN Women, et al, 2015: Module 3:6).

The FHSS commented that weak law enforcement and limited institutional capacity exacerbate the problem of human rights violations, particularly those against women (FSM Department of Health and Social Affairs, 2014:24). In 2013 the Chuuk State Attorney General's Office sponsored a three-day workshop on domestic violence for members of state government, the religious community, and women's and other community groups (Op cit). These efforts need to be part of a sustained annual program, not just ad-hoc, and police domestic violence units require adequate resourcing of both trained personnel and operational budgets.

The CEDAW Committee noted with concern the lack of effective access to justice for women and their inability to obtain redress in the formal justice system due to multiple factors including poverty, negative gender stereotyping, their lack of knowledge about their rights, the limited availability of free legal aid, the low number of courts throughout the territory and their limited accessibility owing to geographical dispersion. The committee was concerned at the limited training of law enforcement personnel, members of the judiciary and traditional authorities and legal practitioners on the Convention and women's rights, and the general fear among women of using the court system (CEDAW, 2017:4-5). While noting plural justice systems (National and States), the Committee pointed out FSM's obligation to ensure that women's rights are protected by all components of plural justice systems (Ibid:5).

Police

Most participants in the 2014 FHSS felt that involving formal services or authorities, such as police, did not lead to support due to the failure of police to act. Difficulties with keeping information confidential was another constraint to reporting the violence to authorities and one respondent commented that some police officers beat their wives and abuse young girls (FSM Department of Health and Social Affairs, 2014:64), which further undermined victims' willingness to report. A 'no

drop' provision⁹ is in place but the force is mostly untrained on how to apply it. This training must be prioritised, and consequences must be introduced for officers who do not enforce the provision. The Police Force, as a whole, is under-resourced and struggles with recruitment and retention issues due to low salaries mandated by the Compact. Some commentators explained that better-suited people tend to have more opportunities in the private sector (or overseas) where salaries are higher and, due to the cost of living in FSM, would struggle to provide for families on the police wage. As a result, police recruits tend to have lower education levels and are more difficult to bring up to the professional standard required for a respected police force.

Police Academy training has a role to play in instilling professional standards in recruits and it would be worthwhile for the Academy curriculum to be revised for best practice, particularly in responding to family and sexual violence. There does not appear to be a national academy, rather a series of adhoc academy trainings are run, with tutors coming from state police forces and visiting instructors from Australia. Adequate funding to run the academy training is also required. A training for 33 recruits run in July 2017 had to be shortened from 90 days to 30 days due to lack of funding. A strong police force requires well-trained recruits. An adequate budget for comprehensive police academy training needs to be prioritised.

There is also a need to recruit and promote women across the police service. When it comes to family violence cases, victims are mostly women and children who are often afraid of talking to a male police officer, so there is a special police counselling role to be played. Currently, there are no police counsellors in the force. Not to be confused with psychosocial counsellors, police counsellors (both female and male) take victims through their rights and the legal remedies available—regardless of what type of case. The main purpose is to pursue a prosecution. Police counsellors could also play a role in a multi-agency referral network for victims of family and sexual violence by supporting FSV victims to access medical and psychosocial support because police counsellors, where they exist, are often the first police presence at the hospital or social service if called to attend.

Inequalities between women and men create gender specific vulnerabilities, such as economic and legal dependency, which among other things, impact on women's use of justice services and create obstacles to accessing justice. Prioritising the victims' safety, empowerment and recovery requires treating women with respect and supporting and keeping them informed throughout the justice process. A women-centred approach to justice and policing service delivery puts the needs and realities of women and girls at the core of any justice service, rather than the goals of the justice institutions (UN Women, et al, 2015: Volume 3:13). Specialised and multi-disciplinary units within the justice sector are the ideal (Op cit).

Chuuk Police

In June 2016, a Memorandum of Understanding (MoU) was signed between the Chuuk Department of Public Safety and the Chuuk Women's Council to cooperate on the reduction and prevention of family violence in Chuuk. The MoU aimed to improve delivery of support services for victims and families and create a sensitive and well-connected victim support network to include outreach, awareness education, incident response and prevention initiatives. The Chuuk Family Violence Unit was identified as the representative of Public Safety. To this day, the Family Violence Unit exists in name only—it has never functioned. The MoU expired in June 2017, after only 12 months, and has not been renewed. For a short period during the life of the MoU, a female police officer was based at CWC two mornings each week to provide advice to women. Many women took advantage of the opportunity to access police advice in a non-threatening environment. CWC would like to have an officer based at

⁹ A 'no drop' provision places an obligation on the law and justice sector to prosecute a case, even if the victim withdraws the complaint. Victims have been known to be pressured by abusers or relatives to drop charges. The 'no drop' approach relieves the victim of this additional pressure so that justice can be pursued. The role for police as the frontline agency is to arrest, charge and gather evidence for a successful prosecution.

charge and gather evidence for a successful prosecution.

10 http://www.kpress.info/index.php?option=com_content&view=article&id=699:33-cadets-from-throughout-the-fsm-participating-in-fsm-police-academy-in-pohnpei&catid=8&Itemid=103

the Centre permanently but has not been able to negotiate another posting to date. CWC has sufficient space at the Centre to run a one-stop-shop for victims of family and sexual violence. A police officer is only one component. A crisis counsellor, lawyer and nurse are also required, and the service needs to be available 24/7/365. Once a range of support services are in place, CWC could consider seeking funding to operate a victim support one-stop-shop from the Centre. More information is provided under Social Services.

Chuuk has 96 male police officers and five females. One woman is a detective and one is a sergeant. The Chuuk Family Violence Unit (FVU) was set up within the Criminal Investigation Service (CIS) and a police sergeant was assigned to run it, but it was never activated. Trafficking cases, protection order cases and carnal knowledge cases had been reported to CIS, but not assigned to the FVU. The officer was sent to Guam for training and then was sent to a police academy for two months to be trained as a trainer. His current role is to provide general training to the Chuuk police force, not just EVAW training. No Management Information System (MIS) is in place. Data is collected in a spreadsheet, including on child abuse, rape and other areas. A sample could not be provided without the permission of the Director, who was unavailable. A good record keeping system had been in place but was not kept up on a regular basis. Case management is weak. Family and sexual violence cases, including incest and rape of a minor, were given as examples. Investigations commenced but were not followed through. Weak sentencing was considered to undermine good policing.

The desire for a functioning Family Violence Unit was expressed along with the need for a safe house. On occasions, the police station is used to keep victims safe from perpetrators for a couple of days, but it is a short-term solution and the station doesn't have adequate facilities. Police would be likely to be involved in a multi-agency referral network if the FVU was operating. Police outreach to outer islands is minimal and is supposed to be done in conjunction with municipalities. Municipal police will need to be trained in EVAW for a response to be effective down to the village level.

Recruitment and retention issues were evident, and it was mentioned that police are the lowest paid government service. Drilling new recruits on the Police Code of Conduct was challenging due to low literacy levels. A review of the recruitment process was proposed as a way to raise the standard of new recruits, eliminate nepotism and build a respected force.

Regional Police Support

A small number of senior police from Chuuk have had police training on EVAW in Guam, facilitated by the Guam Police Department and Australian Federal Police (AFP). Guam has an effective Domestic Assault Response Team, which provides a model for FSM police forces to adapt. A training program based on Guam's success, is required in each state and while a Chuuk State police officer have been trained as a trainer, there appears to have been limited opportunity to roll out a training program. This should be prioritised along with additional assistance through AFP as required.

Database support has also been provided by AFP in the past. Statistical reports were requested from police for this assessment but have not been provided. Additional support is required to further develop the database to collect disaggregated data in relation to family and sexual violence.

FSM is one of seven countries where the Pacific Police Development Program-Regional (PPDP-R) is delivered by the Australian Federal Police (AFP) to promote the safety and security of Pacific Island communities through effective operational policing. One way it does this is through a Basic Investigation Program (BIP), which is being phased into FSM police forces. The BIP concentrates on the fundamentals of criminal investigations, including initiating investigations and presenting evidence as part of court proceedings.¹¹ These investigation techniques will be useful for obtaining convictions of perpetrators of family and sexual violence.

¹¹ Australian Federal Police Platypus Magazine, April 2016.

Judicial Services

There is a lack of court information on family and sexual violence cases. Where these cases are prosecuted they are done so as assault, under criminal law, and are not reported as a separate category. As the FHSS demonstrated, most victims do not report to any support service so, as it stands, justice cannot be pursued. There is also anecdotal evidence that if a victim reports abuse to a family member, the matter is resolved between the victim's family and the abuser's family, usually through a payment of either cash or goods (FSM Department of Health and Social Affairs, 2014:64). The practice of traditional dispute resolution came up several times during consultation, and never in a positive manner. Most of those who commented found it disturbing because it never resulted in remedying the violence and was more a case of tradition being exploited to cover up of a crime. Generally speaking, a legal remedy is a more effective deterrent. Compensation can be awarded by the court as part of the legal resolution, but it must not diminish the sentence.

The CEDAW Committee recommended that specific remedies should be established to provide justice for women in both formal and customary systems and raise public awareness of the importance of addressing violations of women's rights through judicial remedies (CEDAW, 2017:5). The Committee also recommended that safeguards need to be provided against violations of women's human rights through reviews by the Federal Courts or administrative bodies of the activities of all components of state justice systems, with special attention to customary courts (Op cit).

Chuuk State's constitutions provides protection against discrimination on the basis of social status but does not extend to covering women with special characteristics, such as disabilities or HIV conditions (FSM Department of Health and Social Affairs, 2014:22). The issue of constitutional reform is taken up under 6.5 below.

As mentioned, Chuuk State does not have family protection legislation in place yet. There is no national legislation and work has not been undertaken to align laws with previous international commitments such as CEDAW and CRC. This is taken up under 6.5 also.

A broad range of justice options need to be available to victims and survivors. Essential justice and policing services cover all victim and survivor's interactions with the police and the justice system from reporting or initial contact to ensuring appropriate remedies (UN Women, et al, 2015: Module 3:7).

Justice systems in Chuuk are weak. Court cases are backlogged, sometimes for years, and sometimes cases expire before they go to trial. The Attorney General's Office is under-staffed and has high caseloads. Half or more of the staff do not have legal training yet but do receive in-service training throughout the year from senior qualified staff. Public Prosecutors' Offices were not consulted during the field visit due to time and availability constraints, but the situation is likely to be similar. The CEDAW Committee recommended strengthening of judicial systems to ensure that women have effective access to justice, including by increasing human, technical and financial resources (CEDAW, 2017:5).

Chuuk Judicial Services

The Chief Justice's Office commented on increases in family violence and rejects arguments that it is custom. Training for leaders was advocated to understand that family violence is not custom and to change attitudes. The lack of legislation was frustrating because it left only criminal law to try cases under. In some cases, the offender has mental health problems and in one case was not fit to stand. There is a lack of rehabilitation services. When the offender is a woman, the sentence is usually home arrest as there is no separate jail for women. The Court can only hear cases presented by the Public Prosecutor so if there are delays in filing cases, a delay in scheduling a hearing follows. The obligation to recognise customary traditions was considered to be a hindrance, especially for serious cases such as murder. The State Supreme Court would like to introduce a mediation program and recently hired an attorney from the US who has mediation experience. The Chief Justice's Office was aware of criticisms from other justice sector organisation.

Criticisms that were heard later during the consultation process were that judges are often out of the country at regional meetings or on lengthy leave breaks, in one case holding court for one month and taking leave for six months without rescheduling cases, currently resulting in three pending homicide cases. The general unavailability of parties was considered to be a problem by some; in the case of witnesses, this was sometimes due to outmigration during lengthy delays of proceedings. Lack of plaintiff counselling often limits what prosecutors can achieve. There is no specific law governing how protection orders are obtained, they are often no protection anyway, and there are difficulties accessing restraining orders also. Lastly, interaction and communication between the services is lacking, leading to what was described as fortresses.

Corrections

Corrections Services were not met with during the field visit and there is no information online or in documents. Anecdotal evidence is that jail conditions are unfit and there are no rehabilitative programs. There is also a plan to build a new jail in Chuuk, where current capacity is 13 and the jail is always full. The lack of jail space impacts on court sentencing.

The estimated number of family and sexual violence victims across the country is around 16,000, meaning there could be just as many perpetrators. Prevention is better than prosecution, so the more emphasis placed on awareness raising about family and sexual violence, the more leadership and community training, the more chance there is of deterring offending.

In other parts of the Pacific, prison programs on relationship management, positive parenting and even basic literacy, have resulted in positive outcomes for the convicted perpetrator and the family. Attendance at a behaviour change program must be voluntary and must not lead to a reduced sentence. It is not a reward, it is an opportunity to develop new life skills and reduce reoffending.

Recommendations for Police and Justice EVAW Essential Services: Chuuk State

Police

- Additional budget allocation for the Police Family Violence Unit so that it can function in a similar manner to the Guam Police Domestic Assault Response Team;
 - budget to ramp up police force EVAW training is also required both at the state and municipal levels:
 - training for the force on the 'no drop' provision in relation to family violence as a priority and introduce consequences for officers who do not enforce the provision;
 - strengthen police training across the board and include gender training and training in dealing with people with disabilities and other especially vulnerable populations, in an annual program of capacity building.
- Police to take an active role in a multi-agency Chuuk EVAW Committee and EVAW Referral
 Network and commit to supporting the network, both at the governance and operational levels;
 - permanently base a female officer at the Chuuk Women's Centre, at least on a part-time basis, to provide a range of advice to women including on protections offered by the force.
- Review recruitment procedures with the aim of improving the quality of new recruits, in particular women recruits;
 - plan recruitment drives in high schools and tertiary institutions;
 - provide basic literacy training to new recruits with low education achievement;
 - train equal numbers of male and female police officers as police counsellors.
- Program at least quarterly missions to the outer islands, ideally joint missions with other essential services, and use them to raise awareness on family and sexual violence issues.

Judicial Services

- Additional budget allocations to judicial services to provide efficient and effective legal remedies.
- Government to establish specialised and multi-disciplinary units within the justice sector for improved coordination of service delivery.
- Essential justice sector services must engage in a multi-agency Chuuk EVAW Committee and EVAW Referral Network at both the governance and operational levels.
- Government to pursue specific remedies to provide redress for women in both formal and customary justice systems, including women with disabilities and other especially vulnerable women, and raise public awareness of the importance of addressing violations of women's rights through judicial remedies and not customary compensation.
- Government to strengthen judicial systems to ensure that women, including women with disabilities and other especially vulnerable women, have effective access to justice, including by increasing human, technical and financial resources;
 - seek technical support from regional agencies to provide CEDAW and EVAW training across the justice sector, especially for judges;
 - seek technical assistance from regional agencies to improve case management, data collection, and information management systems.
- Corrections to investigate perpetrator programs for delivery by correctional services, based on best international practice.

6.4 Social Services EVAW Essential Services

Quality social services form a vital component of coordinated multi-sectoral responses for women and girls subject to violence (UN Women, et al, 2015: Module 4:6). Social services comprise a range of services that are critical in supporting the rights, safety and wellbeing of women and girls experiencing violence including crisis information and help lines, safe accommodation, legal and rights information and advice (Op cit). These are lacking in FSM.

Four scholarship social work students are currently in training at the University of Guam but there are no current positions to return to. The students are bonded to FSM for two years after completing the qualification, so it will be important to create paid positions either in national, state or civil society organisations so that the country benefits from the qualification and so that the social workers are less inclined to emigrate once the bonding period has expired.

Access to clear accurate crisis information is vital for supporting victim safety. Crisis information includes information about the rights of women and girls and the range and nature of services available (UN Women, et al, 2015: Module 4:12). Crisis counselling is essential in assisting women and girls to achieve immediate safety, make sense of their experience, reaffirm their rights and alleviate feelings of guilt and shame (Ibid:13). Help lines can provide an essential link to counselling and support services for women and girls experiencing violence. These are separate to, but alongside, law enforcement and other emergency help lines (Op cit); however, considerable resources are required to maintain a 24/7/365 help line and it is important to have other services in place before taking this step.

The one-stop-shop model is proving to be successful in other parts of the Pacific where there are dedicated EVAW NGOs. The office providing counselling and initial support is located away from the safe house. Victims present at the office or are referred by police or other services. The NGOs have counsellors on staff, along with a lawyer and a registered nurse. Usually a police officer from the Family Violence Unit is based permanently at the office also.

Spotlight: One-Stop Shop Model

One of the best-known good practices in service provision involves bringing together services in one location, often called the "One-stop centre", an interagency unit for victim/survivors of domestic or sexual violence. Such a service was first developed in the largest government-run general hospital in Malaysia. The victim/survivor is first examined and treated by a doctor and is seen by a counsellor within 24 hours in a separate examination room that protects privacy and confidentiality. If it appears that the victim will be in danger if she returns home, the doctor or counsellor arranges for her to go to an emergency shelter or admits her to the accident and emergency ward for 24 hours. If the patient chooses not to seek shelter, she is encouraged to return to see a social worker at the hospital at a later date. She is also encouraged to make a police report at the police unit based in the hospital. In a case involving severe injury, the police see the patient in the ward to record her statement and start investigations.

Known in the Pacific as a one-stop shop, the model is successfully being delivered by the Fiji Women's Crisis Centre and the Tonga Centre for Women and Children, both non-government organisations with donor support. The victim/survivor is brought to the Centre where a nurse is on hand to assess medical needs. If hospital support is required, the victim is accompanied to hospital. A crisis counsellor is on hand. A female police officer provides support with obtaining a protection order or with filing charges. A lawyer is on staff to give legal advice. If refuge is required, the victim and accompany children are taken to a safe house. Ongoing counselling is offered, and the victim is accompanied by a staff member to any police interview or court appointment.

Adapted from: Ending violence against women: From words to action. Study of the Secretary-General. United Nations, 2006. http://www.unwomen.org/-/media/headquarters/media/publications/un/en/englishstudy.pdf?la=en&vs=954

Women's Shelters

Timely access to safe houses, refuges, women's shelters, or other safe spaces can provide an immediate secure and safe accommodation option for those who have to flee violence and there may also be a need to secure accommodation in the medium to longer term (Ibid:14). The FHSS found a mixed response amongst participants to the concept of refuges. Many felt that no location could be kept secret in small populations; that security guards could not be trusted to turn perpetrators away due to extended family relationships; and that police take the attitude of family violence being a private matter within the family and, as a result, the consequences can be worse for the victim (FSM Department of Health and Social Affairs, 2014:64).

There is no safe house in Chuuk, but the hospital provides a room overnight if a woman is at risk and the police give women and children refuge in a cell for one or two nights if required.

Several discussions on the concept of refuges were held during the field trip and opinions were divided; however, many felt that safe refuge as an escape from immediate violence was necessary. Suggestions came forward for how to make refuges safe. Many felt that church denominations should provide refuges on church property and that this would provide a level of security because perpetrators would not pursue victims onto church grounds. Others suggested that traditional leaders should take responsibility for victim safety by establishing a refuge close to the traditional leader's house and thereby under the leader's protection. Comprehensive training of traditional leaders would be required for this approach to be successful as there are anecdotal reports that some traditional leaders are perpetrators and other traditional leaders protect perpetrators. Municipal buildings were proposed as another option. The use of motels for short term stays were discussed, an approach used successfully in other parts of the Pacific, but most felt it would be too easy for perpetrators to find the victims. A Marshall Islands approach was also suggested, where a network of safe homes was said to be in place, for victims to be sheltered by different families on different occasions.

The debate over the usefulness of safe houses in Chuuk needs to continue but should not delay the provision of refuge to those at immediate risk. The FHSS finding that around 11% of ever-abused

women lost consciousness at least once and almost 9% were hurt enough to need health care (Ibid:10) is evidence that a place of escape and protection is necessary and could be lifesaving. The recommendation of the FHSS was the creation of shelters and allied services for abused women and their children, located close by a respected local leader to provide them with further security from the abusers (ibid:76). Whether the respected leader is religious, traditional or municipal is open, perhaps even to each individual context. Regardless, action is required, commencing with suitable training for leaders and support workers.

Material and Financial Aid

Material and financial aid may be required for safe accommodation, food and other essentials (UN Women, et al, 2015: Module 4:14). Processes for recovery or replacement of identity documents need to be in place, as many women and girls experiencing violence need to flee without identity documents (Op cit). Consideration is required to longer-term accommodation for survivors for whom it is not safe to return to the family home. A half-way house may be one solution, but management of the house and security needs to be planned. In other Pacific countries, immediate financial aid is met from local fundraising rather than donor funds and is not provided in cash, only in kind. Examples are the purchase of groceries, the provision of transportation to move victims to long term safety in a new location or the purchase of a mobile phone and credit so that victims can maintain contact with their support networks. CWC collects donations of money or goods when a situation arises in Chuuk. Where the capacity for local fundraising is limited, financial aid for victims with immediate needs could be built into a relevant funding application to governments or donors. Management of the fund needs to be kept simple and reporting of how the fund is used must be accountable but not burdensome. Also, the effect of experiencing violence directly or indirectly can have a devastating impact on children. Children have the right to access services that are age appropriate, child sensitive and childfriendly (Ibid:16).

Civil Society Service Providers

A key role is played by civil society organisations, women's groups, faith and community leaders in mobilising community efforts to raise awareness about the prevalence of violence against women and girls and the community's role in responding to and preventing violence (UN Women, et al, 2015: Module 4:17). There is no disability organisation but there is a project supporting other vulnerable populations such as MSM-TG and Female Sex Workers. More information is available in Section 1.

In Chuuk, civil society organisations (CSOs), in the form of chartered associations and church denominations, take on some of the social services roles but struggle to find funding to respond to needs. Instead, they apply for project funding for specific activities within a funder's criteria, eg, reducing substance abuse. Usually, no core funds are included for salaries, rents or utilities so the agencies struggle to achieve on the goodwill of volunteers. Development partners need to reconsider providing funding for a percentage of core costs as part of project funding. Also, if a new position is required to execute the project, eg, project coordinator, then as a risk management measure, the salary forms part of the project budget. Development partners rely on CSOs to deliver projects and Chuuk CSOs have little or no opportunity to raise independent funds from membership fees, the private sector or community donations.

The Micronesian Legal Service Corp (MLSC) is a not-for-profit legal aid service headquartered in Saipan but with an office in Chuuk. MLSC does not receive many family violence cases. Case numbers were requested from the regional office in Saipan but so far, no information has been provided. Police sometimes refer victims to MLSC for assistance with making a complaint. In the organisation's experience, the process for protection and restraining orders is not very streamlined and victims can be reluctant to take action. Amongst the reasons are that court session are open to the public and the victim has to face the perpetrator in the court room. The lack of psychosocial counselling is also a constraint when supporting a victim to prosecute. MLSC is willing to play a role in

the Chuuk EVAW Referral Network and will need strengthening to do so, both in human resources and data collection. It would be useful for MLSC to commence discussions with head office in Saipan to seek financial and technical solutions in preparation for the likely increase in cases as a result of increased awareness raising.

State governments could also provide an annual grant to a selection of key CSOs because these organisations contribute to fulfilling governments' civic obligations and to achieving the gender objectives of the Strategic Development Plan 2004-2023.

Unlike other parts of the Pacific, there are no dedicated EVAW NGOs in FSM. As a result, there are next to no psychosocial counselling services, safe houses, male advocates programs or community and school awareness raising programs. Civil society service providers need to be supported, both technically and financially, to prepare proposals to donors and government to fill the social service gaps aimed at eliminating family and sexual violence.

Women who have permanently left a violent relationship, usually with their children, require long term financial independence. Courts may order the abusive parent to contribute to the well-being of children but often the financial burden falls to the women. A government social security benefit is a good first step. Eventually, the survivor may have recovered enough to gain paid employment, undertake vocational training or establish a small business. Discussion is required between governments and CSOs on planning for the long-term recovery of survivors and a range of options to support women into paid employment or self-employment. Training programs and business small grants facilitate the return of survivors into the local economy, so they can contribute to the national economy.

More information on Chuuk CSOs appears in Annex 2.

Recommendations for Social Services EVAW Essential Services: Chuuk State

- Support the creation of paid positions either in national, state or civil society organisations for social work graduates so that the country benefits from the qualification and so that the social workers are less inclined to emigrate once the bonding period has expired.
- Government with support from donor partners provides:
 - funding of widespread awareness raising in communities on family and sexual violence, including through the media, plus funding for the production of IEC materials to be distributed by all essential services, including clear accurate crisis information for supporting victim safety;
 - technical support to train trainers in crisis counselling for victims of family and sexual violence; funding for trainers to train strategically placed crisis counsellors in all sectors: government (hospitals, clinics and dispensaries), non-government (women, youth, senior citizens, people with different abilities) and faith based organisations.

Women's Shelters

- Governments with support from donor partners to take urgent action in Chuuk to create shelters
 and allied services for abused women and their children, in a location where security can be
 extended by a respected leader; whether religious, traditional or municipal leader is open to each
 individual context;
 - continue exploring what the best model for a shelter is in the Chuuk context.

Material and Financial Aid

Where the capacity for local fundraising is limited, civil society organisation need to build in financial aid to victims with immediate needs into a relevant funding application to governments or donors; management of the fund needs to be kept simple and reporting of how the fund is used must be accountable but not burdensome. Government to provide for the establishment of age appropriate, child sensitive and child-friendly services for children who have experienced family and sexual violence.

Civil Society Service Providers

- Relevant civil society partners need to take a role in a Chuuk EVAW Committee (governance) and the EVAW Referral Network (operational level).
- Development partners to provide funding for a percentage of core costs as part of project funding and if a new position is required to execute the project, eg, project coordinator, then as a risk management measure, the salary forms part of the project budget.
- Government to allocate annual grants to a selection of key CSOs that contribute to fulfilling governments civic obligations and to achieving the gender objectives of the Strategic Development Plan 2004-2023.
- Donor partners to provide civil society service providers need technical and financial support to prepare proposals to donors and government to fill the social service gaps aimed at eliminating family and sexual violence.
- Government to seek technical support to identify potential for a social security benefit for women
 who have permanently left a violent relationship, usually with their children, but require long term
 financial independence from the perpetrator.
- Government and CSOs hold discussions on planning for the long-term recovery of survivors and a range of options to support women into paid employment or self-employment.

6.5 EVAW Coordination and Governance of Coordination

Agencies working in isolation are not as efficient as a cohesive multi-disciplinary cross-agency approach for responding to violence against women and girls, including intimate partner violence and non-partner sexual violence. Coordinated systems can have a greater impact when responding to violence and protecting victims from further harm (UN Women, et al, 2015: Module 5:6). The focus is primarily on responding to violence against women and girls (and their children) after the violence has occurred, taking action at the earliest stages of violence, and intervening to prevent the reoccurrence of violence (lbid:7).

Attempts have been made to establish multi-disciplinary referral networks, mostly in the context of trafficking, but none have survived for long either due to the expiration of project funding or failure to meet. There are no appropriately trained staff or formal systems for coordination, risk assessment and management, or accountability.

Multi-disciplinary response teams are groups of stakeholders who have entered into agreements to work in a coordinated manner to respond to violence against women and girls within a community. Taking a victim-centred approach, these networks are focused on ensuring an effective response to individual cases (Op cit). Stakeholders are all government and civil society organisations and agencies that have a role in responding to violence against women and girls including social services, health care sector, legal aid providers, police, prosecutors, judges, and child protection agencies, among others.

Agreement to participate in the referral network usually takes the form of a collective Memorandum of Understanding (MoU), signed by each agency, which outlines what the role of each agency is in the network. Identification of roles prevents confusion and ensures that a best-practice response is provided. All network members are responsible for collecting and sharing data.

One agency, selected by the network, takes responsibility for coordination of the network. The coordination body can be from any sector. An example from the Solomon Islands is explained in Section 1. Referral networks can also contribute to policy making, undertake joint training, undertaking collective community awareness raising and the development of joint information, education and communication (IEC) materials to promote key messaging.

Referral networks can also contribute to policy making, undertake joint training, undertake collective community awareness raising and the development of joint information, communication and education (IEC) materials to promote key messaging.

A coordinated response recognises victims/survivors' multiple needs, psychosocial, sexual health and other health needs. Information sharing among agencies can reduce the number of times victims and survivors are asked to tell their stories, thus reducing the risk of re-traumatisation (UN Women, et al, 2015: Module 5:8-9).

Coordination benefits the institutions and agencies that respond to violence against women and makes them more effective. Clarity about roles and responsibilities means that each sector can excel in its area of expertise, and each professional's work is complemented by that of other agencies and professionals at a lower cost, through pooling financial and human resources and by reducing duplication of effort (lbid:9). From a community perspective, coordination sends clear, consistent, unified messages that violence against women is being treated seriously, both by protecting and assisting victims/survivors and by deterring and punishing perpetrators (Op cit).

Local Level: Essential Actions

National Level Essential Actions are outlined in Section 1 of the assessment. In the unique FSM context, local takes the form of state level actions but it is important to acknowledge that the states are made up of municipalities with administrations, which serve as deliverers of services, such as, health, education and law and order. Alongside is a traditional leadership structure that parallels municipal governance. Consideration must be given to including all the layers in the EVAW response.

Formal structures for local coordination and governance of coordination, support the participation of local institutions and organisations and enables robust mechanisms that can be understood by, and are accountable to the stakeholders and the community (lbid:18). Formal structures need to be consistent with international human rights standards; take a victim/survivor-centred approach grounded in women and girls' human right to be free from violence; and include perpetrator accountability (Op cit).

Both a Chuuk EVAW Committee (or task force) and a Chuuk EVAW Referral Network are mechanisms to secure good coordination and governance of coordination. Agency representatives appointed to the state EVAW Committee (governance body) must be senior enough in their agencies to be able to influence so that decisions of the governance body filter across each member agency. Operationally, the agency representative is likely to delegate responsibility for action to other staff. For example, the Chief of Police may represent Public Safety on the EVAW Committee but the first point of call for victim support is likely to be to the Family Violence Unit, which should be represented on the EVAW Referral Network.

Coordination and governance of coordination has to be guided by an action plan that is aligned with national level strategy and developed consultatively. The effective functioning of local coordination efforts can be supported through agreements and standard operating procedures that are shared amongst participating organisations and accessible to communities (Op cit).

Ideally, the DHSA Women's Interests Officer could fulfil the role; however, Chuuk has not had a Women's Interests Officer at DHSA for many years. The function has largely fallen to the Chuuk Council of Women (CWC). The suggestion of CWC fulfilling the EVAW Committee coordination role was discussed with stakeholders during the field visit and there was agreement that CWC is well situated to coordinate across agencies. Both human and financial resources will be required, and it would be appropriate for the Chuuk DHSA to make an adequate annual budget allocation to CWC specifically to deliver the EVAW Committee coordination role. The coordinator of the EVAW Referral Network can be identified by the network from amongst its membership.

A monitoring and evaluation (M&E) framework is required that aligns with the national monitoring and evaluation framework and focuses on the functioning of coordinated responses to violence against

women and girls. Capacity and resources may need to be developed and monitoring and evaluation findings reported to the State Senate and the National EVAW Committee.

Recommendations EVAW Coordination and Governance of Coordination: Chuuk States

- Government to instigate a State EVAW Committee (governance) and an EVAW Referral Network (operational level), an action plan and an M&E framework that is aligned with national level strategy; develop agreements and standard operating procedures that are shared amongst participating organisations and accessible to communities;
 - appoint the Chuuk Women's Council (CWC) to act as coordinator (secretariat) of the Chuuk EVAW Committee and allocate adequate annual financial resources from the Chuuk DHSA budget to CWC, specifically to deliver the EVAW Committee coordination role.

6.6 EVAW Fundamental Elements

Strong foundations need to be in place to support high quality services and service delivery by National and State health, police, justice and social services sectors (UN Women, et al,2015: Module 1:17).

tional	Comprehensive legislation and legal framework	Governance oversight and accountability	Resource and financing
Foundational	Training and workforce development	Gender sensitive policies and practices	Monitoring and evaluation

Comprehensive Legislation and Legal Framework

A comprehensive legal framework is required that provides the legal and judicial basis for victims/survivors' seeking health, social services, justice and policing services (Op cit).

The State Government is obliged to progressively align all existing legislation with CEDAW, CRC and CRPD and develop new legislation to fill gaps. Policies and procedures follow on to support achievement of legislation. A State Gender Policy that aligns with the national policy is a priority. Many areas of legislative discrimination were identified by the CEDAW Committee and addressing these will contribute to the achievement of the Strategic Development Plan 2004-2023 and ultimately strengthen Chuuk's economy.

Governance Oversight and Accountability

National and State politicians are duty-bearers and their duty is to provide quality essential services (Op cit). Comments came forward during the field study for this assessment that Senators see themselves as donors rather than duty-bearers; donors, because much of Senate time is taken up with approving distribution of expenditure. While fiscal transparency is important, it is not the main role of elected officials. Duty to the constituency is the main role.

Governance, oversight and accountability are required to ensure the duty is met by facilitating dialogue on whether and how guidelines will be implemented; determining the quality of service standards; and in monitoring compliance with service standards (Op cit). Systemic failures in design, implementation and delivery need to be identified (Op cit) and there needs to be recourse for those who have been negatively affected (Op cit). Accountability is enhanced by participation by stakeholders in design, implementation and assessment of services and is vital to ensuring essential services are available, accessible, adaptable and appropriate (Op cit).

Some senators take their duty-bearer role seriously, but others do not appear to do so. A comprehensive induction program after each election would be a good first step. Inductions need not

be limited to the senate process but could include presentations by CSOs on the social service needs of communities.

Resources and Financing

Building and sustaining each sector, as well as an integrated coordinated system that has capacity and capability to provide quality essential services, requires resources and financing that effectively and efficiently respond to violence against women and girls (Op cit).

International evidence is mounting that countries with less equality have lower Gross Domestic Product (GDP). Product (GDP). Spending on essential services now, pays back in the future. As Chuuk State approaches the end of Title 2 of the Compact in 2023, new thinking is required on long-term economic sustainability that takes into account the economic cost of lost opportunities resulting from family violence and gender and social inequalities.

New thinking is also required on improving time-consuming senate financial appropriation processes. Changes to Constitutions may be required, along with sound advice on maintaining accountability and transparency. Technical support is likely to be available from a regional agency.

Providing resources through government budgets shows that eliminating family and sexual violence is a priority for government. This sends a strong message to development partners who are more likely to be supportive if government demonstrates political will to address the challenge.

Training and Workforce Development

Capacity and capability needs to be built for sector agencies and coordination mechanisms to deliver quality services. Service providers must have the competency required to fulfil their roles and responsibilities and to ensure their knowledge and skills remain up to date. Training and workforce development at state level, will be crucial if Chuuk is to improve negative statistics on literacy, health, substance abuse, suicide, teen pregnancy and many other factors undermining social cohesion and the economy.

Gender Sensitive Policies and Practices

Increasingly, other Pacific Island Countries are developing national action plans to eliminate violence against women. Each sector needs to be supported to develop relevant policies that work with and alongside other services to provide the most effective response to women and girls subjected to violence. Sector policies then link with the state policy and with achieving the state action plan (Op cit). All policies, whether related to family violence or other areas, need to be gender sensitive and consider the different impacts of the policy issue on women and men. Policies are known to fail for not taking this measure.

Monitoring and Evaluation

Collection, analysis and publication of comprehensive data on violence against women and girls contributes to continuous improvement by sectors (Op cit). Regular monitoring and evaluation is needed to deliver quality services to women and girls experiencing violence. Data needs to be collected in a form that can be used to gauge and promote quality service provisions (Op cit).

Chuuk State's management information systems require additional development to be able to record and report EVAW statistics. Technical support is being provided in some sectors through development partners, but more is required. Training of specialised monitoring and evaluation staff

¹² World Economic Forum, 2016, The Case for Gender Equality, http://reports.weforum.org/global-gender-gap-report-2015/the-case-for-gender-equality/

results in rich information that informs effectiveness and efficiency in programming and contributes to meeting reporting obligations at the regional and internal level.

6.7 Recommendations for EVAW Fundamental Elements: Chuuk State

- Fulfil State Government's obligations by:
 - providing a strong legal framework to eliminate discrimination, contribute to the achievement of the Strategic Development Plan 2004-2023 and ultimately strengthen Chuuk's economy;
 - pursuing a range of technical support to:
 - assess and make recommendations on Constitutional changes for reducing the amount of time spent by the Senate on financial allocation process, without weakening accountability and transparency;
 - facilitate new thinking on long-term economic sustainability that takes into account the
 economic cost of lost opportunities resulting from family violence and gender and social
 inequalities;
 - provide training and workforce development to improve negative statistics on literacy, health, substance abuse, suicide, teen pregnancy and many other factors undermining social cohesion and the economy;
 - improve all national and management information systems, especially to accommodate the collection of EVAW data;
 - provide training of specialised monitoring and evaluation staff for the collection of rich information that informs effectiveness and efficiency in programming and contributes to meeting reporting obligations at the regional and internal level;
- develop a comprehensive induction program after each election, including presentations by CSOs on the social service needs of communities and not be limited to the senate process.

A mapping table of recommendations follows in Annex 1.

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Annex 1 Mapping of Chuuk Essential Services and Gaps

The following does not address all elements of quality essential services because a comprehensive response is not planned at this stage. Detailed information on every essential service is available in the six modules that make up the essential services package, which can be found at: http://www.unwomen.org/en/digital-library/publications/2015/12/essential-services-package-for-women-and-girls-subject-to-violence.

Table A1.1: Chuuk First Response Health Services

The entry points for providing care to women affected by violence at all levels of service delivery include sexual and reproductive health, including maternal health, family planning, post-abortion care services, HIV and AIDS as well as mental health services, provided either through the government or by non-governmental organisations. The network of service delivery includes preventive, curative, palliative and rehabilitative services and health promotion activities (UN Women et al, 2015: Module 2:8).

Chuuk Women's Council (CWC); Department of Health and Social Affairs (DHSA); Department of Health (DOH); Family and Sexual Violence (FSV); Information, Education and Communication (IEC); Pacific Community (SPC); Post Traumatic Stress Disorder (PTSD); World Health Organisation (WHO)

HEALTH	What's in place		Action for EVAW Services	Stakeholders				
Identification of survivors of intimate partner violence	Emergency staff and OB/GYN staff attempt to identify victims; otherwise up to the survivor to declare, and most lie.	Strengthen	Emergency services training of health care providersincluding OB/GYN, paediatrics, family planning, maternal and child health, mental health, behavioural healthto ask questions (empathic, non-judgmental manner) and how to respond appropriately; services to remote communities; LGBT, TG and FSW health services; training for health promotion officers on EVAW and budget for public outreach; multi-sector referral network.	DOH; Hospital; WHO; regional EVAW training provider				
		Gaps	Awareness raising in communities on EVAW and available health services; visible IEC materials in hospitals, clinics and dispensaries (posters, brochures on family and sexual violence rights, health service support and other support services; disability and youth-friendly services; written information on coping strategies for dealing with severe stress.	Joint community outreach campaigns with other essential services, including joint IEC materials				
general health serv within the department	comments: Confidentiality within limits (mandatory reporting of assault to police); HIV/STI Program is an opportunity to work with LGBT, TG and FSW communities but there are limited separate eneral health services. Outreach with CWC on sexual and reproductive health, trafficking and age of consent. Chuuk Hospital has 10 health promotion officers who reportedly only collaborate ithin the department and have no funding for activities. In 2013 DOH worked with DOE and UNFPA to develop a Health and Family Life Education school curriculum, which has never been rolled at. Health promotion officers have been tasked with reviving the curriculum.							
First line support	Emergency and outpatient services; clinics; dispensaries	Strengthen	Attention to four kinds of needs: (1) immediate emotional / psychological health needs; (2) immediate physical health needs; (3) ongoing safety needs; (4) ongoing support and mental health needs; training of emergency services health care providers to ask questions (empathic, non-judgmental manner) and how to respond appropriately; system for referrals (formal and multi-agency); protocol/standard operating procedure specific to FSV and rape; comprehensive gender-disaggregated data collection and storage/retrieval.	DOH, Hospital, WHO, SPC, regional EVAW training provider				

HEALTH	What's in place		Action for EVAW Services	Stakeholders
	Informal system for referrals between hospital and police Protocols/standard operating procedures	Gaps	Child-friendly clinics; youth-friendly clinics; senior citizens clinics; public outreach to encourage victims to seek medical support; Management Information System; gender and statistics training to gather disaggregated data.	DOH, Hospital, WHO, SPC, regional EVAW training provider
Comments: Rapid	assessment of dispensary	services, includ	ding for FSV and rape, scheduled for 2018 with technical support from WHO.	
Care of injuries and urgent medical treatment	Emergency services at hospital	Strengthen	Training of emergency services health care providers to ask questions (empathic, non-judgmental manner) and how to respond appropriately; system for referrals (formal and multi-agency); protocol/standard operating procedures.	DOH, Hospital, WHO, regional EVAW training provider
поштот		Gaps	Examination and care of physical and emotional health together; best practice standards; victim centred approaches keeping in mind that women who have experienced intimate partner or sexual violence are likely to be traumatised; explain and obtain informed consent for each aspect of examination, treatment and evidence collection.	DOH, Hospital, WHO
Comments: It is ur	clear whether emergency	services are av	ailable at all clinics and dispensaries, especially in remote locations.	
Sexual assault examination and care	Some hospital services available	Strengthen	Taking a complete history to determine what interventions are appropriate; training on caring for victims of sexual assault; training on reliably collecting samples; training on lab processing of samples.	DOH, Hospital, WHO
		Gaps	Forensic evidence collection and laboratory service; emergency contraception and post-exposure prophylaxis (HIV/STIs/HepB).	DOH, Hospital, WHO
			e victims. There were two successful prosecutions in 2017. Chuuk Hospital staff felt that the hospital would be built that will be able to accept more patients and staff training will be prioritised. Good security will also	
Mental health assessment and care	Psychologist (1), mental health counsellors,	Strengthen	Recruitment of additional mental health staff: develop extensive mental health care delivered by health service providers with a good understanding of violence against women; retraining of existing mental health nurses plus training of more; services to remote communities.	DOH, WHO, regional EVAW training providers
	social worker (1) substance abusive not clinical counselling	Gaps	Safe treatment space for mental health patients; assessment of mental status (at same time as physical examination) for immediate risk or self-harm or suicide and for moderate-severe depressive disorder and PTSD; psychosocial support for up to 3 months (in the first instance) to monitor for more severe mental health problems as a result of FSV.	DOH, Hospital, WHO
Comments: While		uilt, an area of t	the current hospital could be identified for treating and accommodating mental health patients who are other	nerwise turning up in courts.
Adequate security	it esseritiai.			

HEALTH	What's in place		Action for EVAW Services	Stakeholders
Documentation (medico-legal)		Gaps	Training health service providers to be familiar with the legal system; know how to write a good statement; as a minimum, document injuries in a complete and accurate way; make sound clinical observations; and reliably collect samples from victims for when they choose to follow a legal recourse.	DOH, Hospital, WHO
Comments:				

Table A1.2: Chuuk Justice and Policing

All victim and survivor interactions with the police and the justice system are covered in essential justice and policing services from reporting or initial contact to ensuring appropriate remedies. Broad stages of the justice system are grouped as: prevention, initial contact; investigation; pre-trial/hearing processes; trial/hearing processes; perpetrator accountability and reparations; and post-trial processes. There are also services that must be available throughout the entire justice system: protection; support; communications; and justice sector coordination (UN Women, et al, 2015: Module 3:7).

Australian Federal Police (AFP); Attorney General's Office (AGO); Civil Society Organisations (CSOs); Department of Health and Social Affairs (DHSA); Department of Justice (DOJ); Department of Public Safety (DPS); Family Protection Act (FPA); Micronesian Legal Service Corp (MLSC); Chuuk Women's Council (CWC); Chuuk Youth Council (CYC); Public Prosecutor's Office (PPO); Pacific Community (SPC)

JUSTICE AND POLICING	What's in place		Action for EVAW Services	Stakeholders
Prevention	Laws: Criminal; Trafficking; Age of Consent 18 Police Family Violence Unit Awareness raising done by CSOs	Strengthen	Family Violence Unit; enforce a zero tolerance policy against violence committed against any person, including victims/survivors of violence against women, for all employees of the organisation with sanctions for non-compliance, provide training and establish processes to ensure implementation of the policy; Police Academy training; community outreach on EVAW (prevention); disaggregated data collection on the various types of VAW; accurate records and analyse records of reported incidents of violence perpetrated to identify trends of reporting to police services.	DOJ, AGO, DPS, DHSA, CWC, CYC, Standing Committee Judicial and Government Operations, AFP, SPC National DPS
		Gaps	Family Protection Act and Action Plan; Family Violence Unit (FVU) as a key part of the referral network; work with others to increase public confidence in the ability of the justice system to respond effectively to violence against women; strategies to challenge cultural and social norms, attitudes and behaviours that contribute to the acceptability of violence against women and girls; programs aimed at men and boys as part of the solution to addressing violence against women and girls; increase women's confidence to report by responding quickly and appropriately to reported acts of violence	DOJ, DPS, DHSA, CWC, CYC, SPC- RRRT, AFP
Comments: The Police Family further undermines capacity. T			deal effectively with FSV; the Unit is also tasked with providing training on FSV to all other e also.	police officers, which
Initial contact	Family Violence Unit in name only; Informal referral of victims to hospital for medical care	Strengthen	Family Violence Unit (FVU) to be high-functioning and a key part of the referral network; FVU staffed 24 hours per day, 365 days per year; training on EVAW and zero tolerance for all police officers not just FVU officers; protocol/ standard operating procedure; police response (attendance at site, speed of arrest, victim-centred).	DOJ, DPS, Standing Committee Judicial and Government Operations, CSOs
		Gaps	Safe space for women and children to file a complaint—either at police station or elsewhere; visible IEC materials at police stationsposters, brochures on family and sexual violence rights; law and justice support services; and other support services; EVAW services in remote locations; disability, youth-friendly and LGBT, TG and FSW access to justice.	DOJ, DPS

JUSTICE AND POLICING	What's in place		Action for EVAW Services	Stakeholders
			dressed to instil behaviours that build trust with communities (professionalism, no favouritism en is urgent. Part-time placement of a woman police officer at CWC was a successful appro	
Assessment/investigation	Family Violence Unit in name only	Strengthen	Training on immediate victim sensitive investigations; actions taken to not cause further harm; victims/survivors are not delayed or impeded in their effort to bring their case to the attention of justice authorities; suspects are arrested as soon as practicable; suspects are required to submit to measures for the protection of victims; medical and psychosocial needs are addressed; records and case management; data collection, storage and retrieval.	DOJ, DPS, PPO, AGO, AFP
		Gaps	Policy that requires justice service providers to explain to the victim/survivor the investigative and justice processes, her rights, and the services available to her throughout the justice process; professional accountability throughout the investigation that holds investigators accountable for their actions throughout process; transparent and accountable complaint management system in place to address service complaints; when working with girl victims/survivors that services are tailored to the unique requirements of the age of the girl.	DOJ, DPS, PPO, AGO, AFP
Comments: The Guam Police	Domestic Assault Response	Team is a mode	el that may be adaptable to the Chuuk context. Skills development is essential at the municip	pal policing level.
Pre-trail processes	AG's Office; Public Prosecutor Minimal legal aid	Strengthen	EVAW training for legislature; court response (victims' rights primary, witness support, speed of sentencing); coordinated and integrated approaches to criminal, civil, family and administrative law cases; sharing of information from other proceedings as appropriate within the justice system; mediation or restorative justice that guarantees no force, pressure or intimidation has been used, where the same or greater measures of protection are used, and where the perpetrator has accepted responsibility.	DOJ, DPS, PPO, AGO, MLSC, Courts, Corrections, AFP
		Gaps	Victim / survivor centred, empowerment oriented and rights based pre-trial processes; pro-prosecution policies; primary responsibility for initiating prosecution to rest with the justice service provider and not with the victim/survivor; reducing barriers that place undue pressure on the victim/survivor to withdraw charges; charges reflect the gravity of the offense; a broad range of free legal aid in civil, family and administrative law matters, simple procedures and free or affordable filing fees; fast track procedures especially for girl victims.	DOJ, DPS, PPO, AGO, MLSC, Courts, AFP
Comments: Clarity on applica	tion of laws in each circumsta	nce, ie, criminal	trafficking or other.	
Perpetrator accountability and reparations		Strengthen	Appropriate sentencing as deterrence and taking into account aggravating factors such as abuse of a position of trust or authority; training of judges and traditional leaders so	DOJ, Courts, Traditional Leaders

JUSTICE AND POLICING	What's in place		Action for EVAW Services	Stakeholders
	A small number of cases are prosecuted, mostly		that customary restitution and financial compensation are not used as a substitute for custodial sentences.	
	for sexual offenses	Gaps	Justice outcomes commensurate with the gravity of the crime and focused on the safety of the victim/survivor; timely, effective, gender sensitive and age appropriate civil remedies for the different harms suffered by women and girls; redress when essential justice services are denied, undermined, unreasonably delayed, or lacking due to negligence.	DOJ, Courts, DPS, AGO, PPO
Comments: Some perpetrate	ors were considered to have me	ental health prob	elems, which need to be addressed.	
Post-trial processes		Strengthen		
		Gaps	Interventions that prevent reoffending and focus on victim / survivor safety; appropriate measures in place to eliminate violence against women who are detained for any reason.	DOJ, DPS, Corrections
Comments: There is no sepa	arate women's prison, so wome	n offenders of a	ny crime are usually sentenced to home detention.	1
Safety and protection	Protection Orders (but police cannot issue)		Enforcement and monitoring of protection measures.	
	police carriot issue)	Gaps	Mechanism for police to issue Protection Orders; access to immediate, urgent and long-term protection measures; holding justice service providers accountable for their action or inaction in enforcement of protection measures; risk assessment; safety planning; coordinated protection and support services.	DOJ, DPS, PPO, AGO, MLSC, Courts
		1		1
Comments: Only the court c	an issue Protection Orders, so	victims need leg	al assistance to access the court, which is a barrier to safety.	
Comments: Only the court c	Public Prosecutor's Office Micronesian Legal Service (legal aid)	victims need leg	Public Prosecutor's Office; practical, accurate, accessible and comprehensive justice information; victim and witness support services; referrals to health and social service providers.	PPO, MLSC, DPS, DHSA

What's in place		Action for EVAW Services	Stakeholders
Communication on an as required basis.	Strengthen	Regular and effective communication between justice agencies; communication by justice agencies with other agencies; Management Information System (MIS)	Justice Sector, Health Sector, Social Services, AFP
	Gaps	Family Violence referral network (wrap-around services); joint community outreach campaigns with other essential services, considering the various target groups; simple and accessible information about justice services.	Justice Sector, Health Sector, Social Services Sector, DHSA
compiled in a spreadsheet.	Record keeping	and case management are poor.	'
Communication on an as required basis.	Strengthen	Coordination amongst justice sector agencies including case management, risk assessment and safety planning.	Justice Sector
	Gaps	Multi-agency referral network; protocol/standard operating procedure.	Justice, Health, Social Sectors, DHSA
- 3	Communication on an as required basis. compiled in a spreadsheet. Communication on an as	Communication on an as required basis. Strengthen Gaps compiled in a spreadsheet. Record keeping Communication on an as required basis.	Communication on an as required basis. Strengthen Regular and effective communication between justice agencies; communication by justice agencies with other agencies; Management Information System (MIS) Gaps Family Violence referral network (wrap-around services); joint community outreach campaigns with other essential services, considering the various target groups; simple and accessible information about justice services. compiled in a spreadsheet. Record keeping and case management are poor. Communication on an as required basis. Strengthen Coordination amongst justice sector agencies including case management, risk assessment and safety planning.

Table A1.3: Chuuk Social Services

Quality social services are another vital component of coordinated multi-sectoral responses for women and girls subject to violence. A range of services are critical in supporting the rights, safety and wellbeing of women and girls experiencing violence including crisis information and help lines, safe accommodation, legal and rights information and advice. The manner in which services are provided has a significant impact on their effectiveness. This means ensuring that services are women-focused, child-friendly, are non-blaming, and support women and children to consider the range of choices available to them, and support their decisions. (UN Women, et al, 2015: Module 3:6).

Department of Health and Social Affairs (DHSA); Department of Health (DOH); Department of Justice (DOJ); Information, Education, Communication (IEC); Micronesian Legal Services Corp (MLSC); Chuuk Women's Council (CWC), Chuuk Youth Council (CYC)

SOCIAL SERVICES	What's in place		Action for EVAW Services	Stakeholders	
Crisis information	Loose referral network:	Strengthen	Awareness raising/community outreach on rights and responsibilities and legal literacy;	Justice, Health, Social	
	Police, Hospital, MLSC, CWC	Gaps	Crisis information that identifies and refers to the range of existing services available for women and children; IEC materials (shared resources?); use of media for mass awareness-raising, eg, radio	Sectors (CWC, CYC, Disability Council, churches), DHSA	
			nunication as not all communities have access to the internet but almost everyone has a cell phone and olic radio stations so awareness needs to focus on these two stations.	d most come with a radio	
Crisis counselling	counselling services		Services available at hospital; church counselling services.	DOH, Hospital, churches	
	available at hospital Limited crisis counselling provided by some churches	Gaps	Crisis counsellors in each essential service; specific women-led organisations providing crisis counselling in communities; crisis counselling in various locations and diverse settings; training of crisis counsellors.	Justice, Health, Social Sectors, DHSA, EVAW training organisation	
Comments: There is	s no dedicated comprehens	sive EVAW serv	ice provider NGO/CSO.	1	
Help lines		Strengthen			
		Gaps	A free 24/7 help line.	DHSA, Social Sector	
Comments: This into	ervention should be delaye	d until the full ra	ange of services are in place to support callers.		
Safe accommodation	Unused space at CWC Strengthe Women's Centre		CWC to become a best practice women's shelter manager, though not necessarily at the existing Women's Centre.	CWC, DHSA, donor partners	
	Some churches provide temporary shelter on a case-by- case basis	Gaps	Safe short-term accommodation with full FSV services available for women and children under immediate threat.	DHSA Standing Committee, DHSA, Social Services, donor partners	

SOCIAL SERVICES	What's in place		Action for EVAW Services	Stakeholders
ideal. The issue of	safe housing for victims/su	rvivors is divisive	c basis for refuge and victims are sometimes kept in a police cell for a day or two for their own safety, be in FSM so debates must continue until permanent solutions are reached. In the meantime, there is a reconvene a meeting of key stakeholders to assess options and identify a solution.	
Material and financial aid	Some CSOs use their networks to seek donations of clothing or groceries	Strengthen		
		Gaps	Material and financial aid to enable access to crisis information and counselling, safe accommodation, food, transportation to safety or other needs that arise when victims/survivors are no longer safe in the home.	DHSA Standing Committee, DHSA, Social Services
Comments: Social	protection such as cash tra	insfers is a usefu	ul option that could be explored by government.	
Creation,		Strengthen		
recovery, replacement of identity documents		Gaps	Support to create, recover or replace identity documents to ensure women can travel, maintain or seek employment, access social services, and access bank accounts etc.	DHSA, Social Services, DOJ
Comments:		<u> </u>		
Legal and rights information, advice and representation, including in plural legal systems ¹³	Public Prosecutor's Office Micronesian Legal Service Corp	Strengthen	Free legal services for victims/survivors; community awareness raising; distribution of IEC materials.	DOJ, MLSC, Social Services, donor partners
		Gaps	Accurate and timely information about such matters as divorce/marriage laws, child custody, guardianship, migration status and assistance to navigate justice and policing responses.	DOJ, MLSC
Comments: SPC-R	RRT is about to commence	e a para-legal tra	aining program in some South Pacific countries. A similar program for FSM would assist with ramping u	p access to legal and
Psychosocial support and counselling	Limited clinical counselling at hospital Limited church crisis counselling	Strengthen	Clinical counselling services at hospital; case management; data collection.	DOH, Hospital, DHSA Standing Committee
		Gaps	Ongoing psychosocial support for at least 3 months in the first instance; accessibility of psychosocial counselling and support; stocktake of social resources being provided informally, eg, through churches	Hospital, DHSA, churches, Social Sector
Comments:				
Women-centred	CWC network	Strengthen	Staff training in all sectors to work on behalf of, and to represent the interests of, women and girls.	All sectors
support		Gaps	Women and child-centred support for the duration of their journey through the system.	All sectors
Comments:				

¹³ Multiple legal systems within one population or geographic area, in this case, national and state legislation.

SOCIAL SERVICES	What's in place		Action for EVAW Services	Stakeholders
Children's services for any child affected by violence		Strengthen		
		Gaps	Age appropriate, child sensitive and child-friendly access to services including emergency and long-term alternative care, if required, with or without a parent/caregiver, as appropriate.	All sectors
Comments:				
Community information, education and community outreach	Community awareness through chartered associations: CWC, CYC, Disability Council, Churches, Traditional Leaders	Strengthen	Widespread EVAW training for key sectors: politicians, traditional leaders, church ministers.	Senate, all Sectors, EVAW training provider, donor partner
		Gaps	Core funding for key associations; IEC materials; multi-year, multi-agency community awareness raising including the media; Positive Parenting training; training for men who advocate for women's human rights to act as role models and as support systems; outreach to schools, community sport clubs; community information and education for hard to reach, vulnerable and marginalised groups; clear protocols to support the safety of women where they may be contacted by the media to tell their story.	DHSA Standing Committee, All Sectors, media, donor partners
	eel strongly about strengthe ard in an IEC campaign.	ening the cultura	al core to respond to family and sexual violence, and dispute that this violence has ever been part of the	culture. This sentiment
Assistance towards economic independence, recovery and autonomy	CWC support to market vendors	Strengthen		
		Gaps	Longer term assistance to support the recovery of women and children affected by FSV to lead productive lives and reintegrate safely into the community, accepting that there are long term consequences for health and well-being. Support could be provided in the form of vocational education or access to small business loans or in other ways.	DHSA Standing Committee, Department of Education, FSM Development Bank, CWC, donor partners
Comments:	1	1	1	1

Table A1.4: Chuuk Coordination and Governance of Coordination

Coordinated systems can have a greater impact in responding to violence, as well as greater efficiencies. When responding and protecting victims from further harm, it is essential to have a cohesive multi-disciplinary cross-agency approach (UN Women, et al, 2015: Module 4:6).

Attorney General's Office (AGO); Civil Society Organisations (CSOs); Department of Health and Social Affairs (DHSA); Department of Justice (DOJ); Memorandum of Understanding (MOU); Pubic Prosecutor's Office (PPO); Pacific Community (SPC); World Health Organisation (WHO)

COORDINATION AND GOVERNANCE OF COORDINATION	What's in place		Action for EVAW Services	Stakeholders	
Law and policy making	Provisions in some laws AG's office and some CSOs given opportunities to make submissions on laws, policies and plans	Strengthen	Alignment of laws and policies with CEDAW and other international and regional obligations; clarify the application of laws for prosecution and sentencing; strengthen government agencies, organisations and other structures that have a role in responding to violence against women.	DOJ, AGO, Chief Justice's Office	
		Gaps	A Family Planning Act and State Action Plan; a high-level EVAW task force, including ministers and/or executives of key institutions; create government agencies, organisations and other structures that have a role in responding to violence against women where they don't currently exist; create laws and policies informed by gender equality and non-discrimination where they don't currently exist; ensure responses to violence against women are based on a victim-centred approach and human rights standards of victim safety and offender accountability; Develop and/or update state action plans to specify mechanisms and budgets for coordination of Essential Services.	Senate, relevant ministries, DOJ, AGO, relevant Standing Committees	
Comments:	Comments:				
Appropriation and allocation of	Ad-hoc project funding for some CSOs	Strengthen			
resources		Gaps	Provide adequate financial support, personnel, expertise, and technical support at the state level to coordinate policymaking; provide sufficient resources to state local level for providing, coordinating and funding of services and effectively implementing laws and policies; prioritise funding and resources for CSOs to enable their leadership in providing and coordinating services; promote a common understanding among all providers of essential services and of the causes and consequences of violence against women and girls; align public education messages.	Relevant Standing Committees Regional agencies CWC, CYC and other CSOs	
Comments:					
Standard setting for establishment of local level coordinated responses	Ad-hoc referral of victims/survivors on a case-by-case basis.	Strengthen	Communication between DHSA and other state govt departments on EVAW, CEDAW Observations and other relevant information.	DHSA, AGO, PPO, Services Sector	
		Gaps	Formal Referral Network of Essential Services that meets regularly, has shared policies and protocols and conducts joint planning of activities and interventions; agreement that state institutions and not	All Stakeholders, DHSA, UN Women	

COORDINATION AND GOVERNANCE OF COORDINATION	What's in place		Action for EVAW Services	Stakeholders
			victims/survivors are responsible for addressing violence; basic requirements for formal protocols/MOUs for local coordination; standards specific to the needs of girls; participation by underrepresented or marginalised groups; identification of community champions, supporting and strengthening their efforts; promotion of community awareness of violence against women and girls and availability of Essential Services; agree common terminology for all recording and reporting; require each agency to maintain data for monitoring and evaluation.	
Comments:	1			1
Inclusive	Ad-hoc projects for young women and girls	Strengthen		
		Gaps	A victim-centred approach to minimise trauma and recovery time; create an understanding of how violence against women and girls affects different communities in diverse ways (especially women and girls who suffer multiple forms of discrimination) at all levels of policymaking and coordination; include representation of marginalised and vulnerable groups in all stages of policymaking and coordination (planning, policymaking, implementation, monitoring and evaluation) and design specific responses; ensure voices of young women and girls are heard with attention to the particular vulnerabilities they face.	All Sectors
Comments:				
Facilitate capacity development of policy makers and other decision-makers on coordinated responses to VAWG	Some training undertaken by CSOs	Strengthen		
		Gaps	Provide resources and guidance for organisational and financial stability, program quality and growth; provide training for state policymakers on coordinated response to violence against women and girls; require training to be regular and ongoing to ensure that new knowledge and best practices are incorporated into responses to violence against women and girls.	Relevant Standing Committees, WHO, SPC, UN Women, Pacific Women, donor partners
Comments:	'			
Monitoring and evaluation of coordination at state and local levels	Some monitoring in relation to project funding	Strengthen		
		Gaps	Set realistic short, medium and long term goals; use qualitative and quantitative indicators of effectiveness of coordination; set up systems for measuring achievement of goals; include baseline data, where possible, in measurement systems; identify barriers to successful coordination and possible solutions; incorporate lessons learned into future policies and practices; apply information	All Sectors, WHO, SPC, UN Women, Pacific Women, donor partners

COORDINATION AND GOVERNANCE OF COORDINATION	What's in place		Action for EVAW Services	Stakeholders
			learned from local monitoring and evaluation to inform national agenda; regularly published reports on victim/survivor use of services and how perpetrators are held accountable.	
Comments:				
Creation of formal structures for local		Strengthen		
coordination and governance of coordination		Gaps	Formal structures supporting the participation of local institutions and organisations which include standards that are consistent with international human rights standards, take a victim/survivor-centred approach grounded in women and girls' human right to be free from violence and include perpetrator accountability.	All Sectors, WHO, SPC, UN Women, Pacific Women, donor partners
Comments:				
Implementation of coordination and governance of coordination		Strengthen		
		Gaps	An independent body or specialist agency whose role is coordinating key sectors—Chuuk Women's Council, in the absence of an appropriate DHSA desk officer; implementation plan for work of referral network governance body; agreements and standard operating procedures that are shared amongst participating organisations and accessible to communities; require that agency representatives have decision making authority for their agencies; prioritise victim/survivor safety over preservation of the family or other goals; create processes that recognise the needs of children who are victims of violence, directly or as a result of violence toward a parent; ensure that community awareness activities are conducted using all mediums: television and radio public service announcements, social media messages, billboards, publication of reports.	All Sectors, DHSA, SPC-RRRT, UN Women, UNICEF, Pacific Women
Comments:				

Annex 2 Summary of Chuuk CSO EVAW Activities

There have been discussions in Chuuk on the formation of a Chuuk State NGO Coalition; Chuuk Women's Council is the interim secretariat. The driving force is said to be Chuuk Youth Council (CYC). CWC and CYC are the key charted associations in Chuuk. A main purpose would be to partner government on the development of laws, policies and plans and to hold government to account.

Chuuk Women's Council

Chuuk Women's Council (CWC) was established in 1993 to represent 64 women's groups with over 1,000 members; the history of many of these women's groups goes back 40 years. In Chuuk State, led by a highly motivated volunteer President, CWC has played an important role in advocating women's issues with government and currently, in the absence of a Women's Interests Officer at the State DHSA, CWC has become the default focal point—a role it performs admirably despite funding constraints. CWC is based at a Women's Centre in Weno, which was established on donated land with building funding support from the Government of Japan. The Women's Centre contains offices, workrooms, meeting rooms suitable for workshops, a small library and workspace for students, and a large bedsitter flat that was intended as a refuge but has never been used for the purpose because security and other services are not in place. CWC does not receive financial support from government, instead relying on a variety of project funding that does not contribute to core costs. The organisation makes good use of social media, having a regularly updated website and Facebook page.

CWC has a strategic plan for 2014-2019. A broad range of focus areas has been identified by the membership, based on the needs of their communities. These include economic health, social health, community wellbeing (including maternal and child health), education and environment/ conservation. Progress is being made in many areas with the assistance of volunteers and strategic partnerships.

CWC makes good use of its member organisation network to do outreach to remote communities. Leaders are brought to Weno for training on issues such as domestic violence, healthy lifestyles, and water and sanitation, amongst others. The leaders then return to their communities to prepare a training program, which CWC leaders from Weno attend to facilitate.

In 2016, a female police officer was based at CWC two mornings each week to provide advice to women. Many women took advantage of the opportunity to access police advice in a non-threatening environment. CWC would like to have an officer based at the Centre permanently but has not been able to negotiate another posting to date.

Clearly there is recognition by the justice sector of the importance of CWC's work. During 2017, a judge ordered that a six-year-old sexually abused girl become a ward of CWC for her protection from family abuse. CWC was not consulted in advance and first found out about the order when the girl was delivered to the Women's Centre. A CWC volunteer and her family are fostering the child but without any support from the state to meet the child's needs.

The Chuuk Women's Council has been managing a 'HIV and STI Risk Vulnerability among Key Populations' project for most of 2017 with funding from UNDP. Key populations are Men who have Sex with Men and Transgender (MSM-TG) and Female Sex Workers (FSW). Project funding has recently been extended until 2020. The project is coordinated on a half-time basis by a health worker (also a CWC volunteer) with experience in peer education who is trained as a HIV/STI counsellor, drug and alcohol counsellor and clinical counsellor.

CWC also takes a leadership role in International Women's Day celebrations and 16 Days of Activism against Violence Against Women, which will be used this year to workshop what women want to see in family protection legislation. An empowerment program for young women is also underway and a home gardening program aimed at food safety and security, healthy living and reducing NCDs.

Chuuk has not had a Women's Interest Officer at DHSA for many years. The function has largely fallen to the Chuuk Council of Women (CWC). The suggestion of CWC taking the Chuuk EVAW Committee coordination role was discussed with stakeholders during the field visit and there was agreement that CWC is well situated to coordinate across agencies. Both human and financial resources will be required and the Chuuk DHSA needs to make an adequate annual budget allocation to CWC specifically to deliver the EVAW Committee coordination role.

Other CWC program areas are physical and mental health of women and their families; youth education programs, such as computer literacy; environment and climate change; women's entrepreneurship; and the promotion of gender equality.

CWC was instrumental in successful lobbying for a legislative change to raise the age of consent to 18 years; trafficking legislation and other areas. The organisation is currently advocating for a state family protection act.

Mile a Day (MAD) Mums

MAD Mums is a small group of young women who started as a walking group (a mile a day) and more recently has become involved in public awareness raising on EVAW, by attending events such as International Women's Day commemorations. On one occasions the group offered to support an FSV victim by arranging temporary accommodation and counselling, but the victim was too embarrassed to take up the offer. It is a very informal group that is not chartered and holds its meetings in cafes monthly to plan activities. Some of the MAD Mums are also members of CYC and involved with CWC.

Chuuk Youth Council

Chuuk Youth Council (CYC) has 15 or more member organisations, which are village youth groups. Individual membership is estimated at around 750. Members are aged between 18 and 35 years. CYC holds its meetings and training events at the CWC Centre. Elected officers meet weekly and general member meetings are held monthly. Membership is approximately equal numbers of females and males, but mostly males attend meetings because they have more freedom of movement in the evenings. Consideration is being given to holding lunchtime meetings to encourage more young women in CYC decision making. In August 2017, CYC hosted a National Youth Summit, which included a sexual wellbeing seminar and some training events.

A Pacific Youth Development Framework (2014–2023) is in place with support from SPC-RRRT. The Framework is a guide for addressing youth issues in the region through the development of programmes and policies in both the youth sector and across other development sectors. One of its strategic approaches is an inclusive rights-based approach that specifies the importance of involving young people in decision making. During the conference FSM state youth councils and other youth delegates provided inputs to shape the development of the national youth policy and their own youth state action plans. These were formalised by the adoption of an outcomes statement, which included recommendations such as promoting youth entrepreneurship by utilising local resources.

The issues of gender-based and family violence were discussed at length at the conference, prompting the youth delegates to call for culturally-appropriate community-based interventions. Particular note was made of the need to establish a network for LGBTI youth and encourage their engagement in policy dialogues.

CYC is in discussions with Rotary to implement an awareness raising program using radio and theatre. It is also working with sporting associations to use sport as a development mechanism, especially for youths with low literacy.

Issues of concern for CYC include eliminating all forms of violence, access to justice for youths and legal aid, and youth friendly health services.

Micronesian Legal Service Corp

The Chuuk office of the Micronesian Legal Service Corp (MLSC) has two attorneys and three trial counsellors. The office is not well located in Weno, which presents transportation difficulties for clients. In 2016, MLSC received a grant to do community outreach, which resulted in 4000 more applications for services. MLSC does not have the capacity to deal with this case load and is concerned at the level of unmet need. The organisation is planning to visit outer islands but knows it needs to plan carefully for dealing with additional demands.

MLSC does not receive many family violence cases. Case statistical information was requested from the regional office in Saipan but so far, no information has been provided. Police sometimes refer victims to MLSC for assistance with making a complaint. In the organisation's experience, the process for protection and restraining orders is not very streamlined and victims can be reluctant to take action. Amongst the reasons are that court sessions are open to the public and the victim has to face the perpetrator in the court room. The lack of psychosocial counselling is also a constraint when supporting a victim to prosecute.