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

Assessment of EVAW Services and Gaps in Services
Section 1 – FSM National Report

‘There is one universal truth, applicable to all countries, cultures and communities: violence against women is never acceptable, never excusable, never tolerable.’

United Nations Secretary-General, Ban Ki-Moon (SG/SM/11437 WOM/1665)

December 2017
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Acknowledgement: This assessment draws heavily on the Essential Services Package for Women and Girls Subject to Violence: Core Elements and Quality Guidelines, produced by UN Women, UNFPA, WHO, UNDP and UNODC with funding support from Australian Aid and Spanish Cooperation. Copyright UN Women, New York, 2015.

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

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<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>AFP</td>
<td>Australian Federal Police</td>
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<tr>
<td>AGO</td>
<td>Attorney General’s Office</td>
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<tr>
<td>CEDAW</td>
<td>Convention for the Elimination of all forms of Discrimination Against Women</td>
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<tr>
<td>CFO</td>
<td>Country Focal Officer</td>
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<tr>
<td>CRC</td>
<td>Convention on the Rights of the Child</td>
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<td>CRPD</td>
<td>Convention on the Rights of Persons with Disabilities</td>
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<tr>
<td>CSO</td>
<td>Civil Society Organisation</td>
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<tr>
<td>CWC</td>
<td>Chuuk Women’s Council</td>
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<tr>
<td>DFAT</td>
<td>(Australian) Department of Foreign Affairs and Trade</td>
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<td>DHSA</td>
<td>Department of Health and Social Affairs</td>
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<tr>
<td>EVAW</td>
<td>Elimination of Violence Against Women</td>
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<tr>
<td>FHSS</td>
<td>Family Health and Safety Study</td>
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<td>FSM</td>
<td>Federated States of Micronesia</td>
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<td>FSV</td>
<td>Family and Sexual Violence</td>
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<tr>
<td>FVU</td>
<td>Family Violence Unit</td>
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<tr>
<td>FY</td>
<td>Fiscal or Financial Year</td>
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<td>GDP</td>
<td>Gross Domestic Product</td>
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<td>GDU</td>
<td>Gender Development Unit</td>
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<td>HDI</td>
<td>Human Development Index</td>
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<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
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<tr>
<td>IEC</td>
<td>Information, Education and Communication</td>
</tr>
<tr>
<td>IMF</td>
<td>International Monetary Fund</td>
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<tr>
<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
</tr>
<tr>
<td>MIS</td>
<td>Management Information System</td>
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<tr>
<td>MOU</td>
<td>Memorandum of Understanding</td>
</tr>
<tr>
<td>MSM-TG</td>
<td>Men who have Sex with Men and Transgendered</td>
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<tr>
<td>NCDs</td>
<td>Non-Communicable Diseases</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Government Organisation</td>
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<tr>
<td>OIA</td>
<td>Office of Internal Affairs</td>
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<td>Pacific Women</td>
<td>Pacific Women Shaping Pacific Development</td>
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<tr>
<td>PCO</td>
<td>Pohnpei Consumers Organisation</td>
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<td>PDF</td>
<td>Pacific Disability Forum</td>
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<tr>
<td>PWC</td>
<td>Pohnpei Women’s Council</td>
</tr>
<tr>
<td>RRRRT</td>
<td>Regional Rights Resources Team</td>
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<td>SDGs</td>
<td>Sustainable Development Goals</td>
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<tr>
<td>SPC</td>
<td>(Secretariat of the) Pacific Community</td>
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<tr>
<td>STI</td>
<td>Sexually Transmitted Infection</td>
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<td>UN</td>
<td>United Nations</td>
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<tr>
<td>UNDP</td>
<td>United Nations Development Program</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<tr>
<td>UN Women</td>
<td>United Nations Entity for Gender Equality and the Empowerment of Women</td>
</tr>
<tr>
<td>US</td>
<td>United States (of America)</td>
</tr>
<tr>
<td>VAWC</td>
<td>Violence Against Women and Children</td>
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<tr>
<td>VAWG</td>
<td>Violence Against Women and Girls</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organisation</td>
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</table>
Glossary of Terms

Age of Consent
The age at which a person becomes legally competent to consent to marriage or sexual intercourse.

Child sexual abuse
An adult engaging in any sexual behaviour (looking, showing, or touching) with a child to meet the adult’s interest or sexual needs, including the manufacture, distribution and viewing of child pornography.

Family violence
Controlling behaviours, commonly of a physical, sexual, and/or psychological nature which typically involve fear, intimidation and emotional deprivation occurring within a close interpersonal relationship, such as between partners, parents and children, siblings, and in relationships where significant others are not part of the physical household but are part of the family.

Gender
The norms, expectations and beliefs about the roles, relations and values attributed to girls and boys, women and men. These norms are socially constructed, they are learned from families and friends, in schools and communities, and from the media, government and religious organisations. These norms, expectations and beliefs change over time.

Gender discrimination
The situation in which people are treated differently simply because they are male or female, rather than on the basis of their individual skills or capabilities, eg, social exclusion, inability to participate in decision-making processes, and restricted access to and control of services and resources.

Gender equality
The same status, rights and responsibilities of women and men. Women and men, girls and boys have different but related needs and priorities, face different constraints, and enjoy different opportunities. Their relative positions in society are based on standards that, while not fixed, tend to advantage men and boys and disadvantage women and girls.

Gender mainstreaming
The promotion of gender equality into all aspects of an organisation’s work and into its systems and procedures. It is a process that addresses what an organisation does (external mainstreaming) and how an organisation works (internal mainstreaming). Gender mainstreaming means that all policies, programmes, as well as organisational and management processes are designed, implemented, monitored and evaluated taking into account the different and relative needs and constraints of girls, boys, women and men with the aim of promoting gender equality.

Incest
Sexual intercourse between people who are very closely related. When the female is below the age of consent recognised by law, the act can be both rape and incest.

Intimate partner violence
Physical, sexual, emotional or economic violence by a current or former intimate partner, whether cohabiting or not, experienced by women.

Human trafficking
The trade of humans, most commonly for the purpose of sexual slavery, forced labour, or commercial sexual exploitation for the trafficker or others. Human trafficking is the trade in people, and does not necessarily involve the movement of the person from one place to another.

Sexual harassment
Unwelcome sexual advances, requests for sexual favours, and other verbal or physical harassment of a sexual nature.
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Sexual violence
Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed, against a person’s sexuality using coercion, by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work.

Rape
Unlawful sexual intercourse or any other sexual penetration of the vagina, anus, or mouth of another person, with or without force, by a sex organ, other body part, or foreign object, without the consent of the victim.
About Pacific Women

Pacific Women Shaping Pacific Development (Pacific Women) was announced by the Australian Government at the Pacific Island Forum Leaders’ meeting in August 2012. It commits up to $320 million over 10 years in 14 Pacific Islands Forum member countries. The program aims to improve opportunities for the political, economic and social advancement of Pacific women. Pacific Women will support countries to meet the commitments they made in the Pacific Leaders Gender Equality Declaration (PLGED) in 2012. The intended outcomes sought by Pacific Women include:

- Women, and women’s interests, are increasingly and effectively represented and visible through leadership at all levels of decision-making.
- Women have expanded economic opportunities to earn an income and accumulate economic assets.
- Violence against women is reduced and survivors of violence have access to support services and to justice.
- Women in the Pacific will have a stronger sense of their own agency, supported by a changing legal and social environment and through increased access to the services they need.

Pacific Women is implemented by Australia’s Department of Foreign Affairs and Trade (DFAT) and works with a wide range of implementing partners, including the 14 partner governments, multilateral organisations, international and national NGOs, civil society organisations, and DFAT country posts.

The Pacific Women Support Unit provides the program with logistical, technical and administrative support and is in Suva, Fiji, with a sub-office in Port Moresby, Papua New Guinea (PNG).

Support for Federated States of Micronesia

In 2014 a joint Pacific Women, SPC-PGEP and SPC-RRRT mission visited the Federated States of Micronesia (FSM) to hold extensive consultations with government, the private sector and civil society. The first Country Plan 2015 – 2019 resulted.

Under this plan, and with a view to complement existing local activities that contribute to gender equality and women’s empowerment, the Australian Government will invest in a range of activities to:

- improve women’s leadership and decision-making opportunities;
- increase economic opportunities and participation for women; and
- improve the legislative framework that protects women and girls from gender violence and strengthen support and counselling services to women and girls who have experienced violence.

Through Pacific Women, the Australian Government will spend approximately AU$1.4 million over 10 years on initiatives supporting women and girl’s empowerment in FSM (ADFAT, 2015:2). Since 2015 a shared Pacific Women/SPC Gender Adviser has been based in Pohnpei to support programs in FSM, Marshall Islands and Palau. In November 2017 a Pacific Women Family Protection Adviser has been based at the Department of Health and Social Affairs in Palikir to work with the Gender Development Unit and counterparts in the states.

Traditional Women’s and Men’s Roles

Many of those consulted for this assessment commented on how societal changes had undermined good cultural traditions and that no consideration had been given at the time, or since, for how to mitigate the impacts. Some also commented on the increase in availability of cheap alcohol in the 1960s and, while alcohol is not considered by many in Pohnpei to be a main trigger of family violence, in Chuuk alcohol is considered to be a factor in many law and order issues, including family violence. Those who made these comments were keen to develop new social safety nets that are
complementary to the cultures. Both men and women spoke strongly about how family violence was not a part of traditional culture and expressed annoyance that culture is now used as an excuse for bad behaviour. These comments prompted a brief exploration of tradition.

Most state communities were organised along matrilineal clan lines, with land inherited through women and residence primarily matrilocal--Yap is the exception. Women’s roles were associated with the land, production of staple food crops, inshore net fishing, gathering of seafood, and the manufacture of valued traditional goods, such as loom-woven waist clothes, oils, and medicines (FSM Department of Health and Social Affairs, 2014:18). These valuables were used to purchase canoes and were given as gifts at weddings, funerals and other significant community events. Men, on the other hand, were associated with the sea and cultivation of coconut trees (Op cit).

Traditional gender roles were altered by colonial rule. The pattern of matrilineal land tenure on the main islands was for the most part removed. Women’s traditional economic roles also diminished with the changing economic landscape of the twentieth century, as imported goods replaced hand-made goods and food crops. The loss or reduction of women’s traditional economic roles was not substituted with any significant access to higher education, well-paid jobs, or other economic activities (Ibid:18-19). The traditional consultation with women in the clan is no longer a feature within FSM communities. As a result, women and men struggle to establish a new form of the complementarity, which was a key foundation of their culture of tradition prior to colonisation.

These rapid changes split the traditional extended family and redefined the role of the nuclear household as the basic social unit, resulting in major social changes of the traditional roles of family members, especially the roles of women (FSM Department of Health and Social Affairs, 2014:19). It is these changes that are considered, by many of those consulted, to be contributing to family and sexual violence.
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) in each state. 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 16,613 victims and possibly as many perpetrators. A high level of societal tolerance of family and sexual violence was also identified. Violence against women and children cannot be viewed in isolation as it is a symptom of broader gender inequality.

In September 2017, the national government finalised a Draft National Gender Policy to be in effect until 2023. 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. The Pacific Women Roadmap references global evidence 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.

Following the ratification of the Convention on the Rights of Persons with Disabilities, FSM is internationally obliged to put in place effective legislation and policies, including women- and child-focused legislation and policies, to ensure that instances of exploitation, violence and abuse against persons with disabilities are identified, investigated and, where appropriate, prosecuted. This work will require coordination with other essential services, especially justice and policing, and with the states. Both an increased budget and human resources are required to make progress and to monitor and report progress.

FSM is one of five Pacific Island Forum 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 services.

FSM acceded to the UN Convention on the Elimination of all forms of Discrimination Against Women (CEDAW) in 2004 and submitted its first report to the CEDAW Committee in 2015. A high-level delegation appeared before the Committee in Geneva in February 2017 and the Committee’s concluding observations were released in March 2017. Many of the observations have implications for the states; however, staff from the Attorney Generals Offices were met with in both Pohnpei and Chuuk and neither of those offices was aware that FSM had reported, let alone that an observations report had been released, which will be followed up on by the Committee in two-years’ time.

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.

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 as well as guidelines for the coordination of Essential Services and the governance of coordination processes and mechanisms. 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.

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 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.

Information available suggest that FSM generally, and Pohnpei State 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, other especially vulnerable communities, those living in rural and remote areas and those made vulnerable by other circumstances, eg, poverty. 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.

The FSM Government completed the FHSS to inform decision making. The study identified the nature of the problem and that services need significant development. Health services are lacking in expertise and coverage amongst other areas, the law and justice sector has limited capacity and is under-resourced and there are no government social services focused in this area. Coordination between service providers is either absent or ad hoc, data collection is absent or obscured by the lack of formal identification of family and sexual violence (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 Committee 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 sensitize them to the fact that all forms of violence against women are unacceptable and to destigmatise victims. This assessment aims to support the government to achieve some of the Committee’s recommendations.

A study is about to commence to quantify the economic cost of family and sexual violence to a selection of Pacific Island States. In 2011, the economic cost of violence against women to the Fijian economy was calculated to be around 6.6% of Gross Domestic Product (GDP). If the percentage holds true for FSM, that amounts to US$21.25 million of the 2016 estimated GDP of US$322 million, money that could be put to better use as FSM approaches the end of Title 2 (Economic Relations) of the Compact of Free Association in 2023 and the resulting reduction in budget support.
Summary of Recommendations: FSM Government

An extensive national and state program to eliminate violence against women requires actions from national and state governments, civil society organisations and development partners. A full list of recommendations appears in context in the text in Section 10. This summary contains up to three key recommendations for National Government in 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 Pohnpei and Chuuk State Governments appear in Section 2 and 3 respectively.

Fundamental Elements
- Form a National EVAW Committee to lead on providing the legal framework to eliminate discrimination, contribute to the achievement of the Strategic Development Plan 2004-2023 and ultimately strengthen FSM’s economy.
- Pursue development partner technical support to 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.
- Develop a five-year plan to improve all national and state management information systems, especially to accommodate the collection of disaggregated EVAW data and seek technical support to achieve the plan.

Coordination and Governance of Coordination
- Establish a National EVAW Committee made up of senior-level national essential services department representatives and senior-level national essential services CSO representatives;
  - appoint the Gender Development Unit of the FSM Department of Health and Social Affairs to provide the network coordination at two levels: within national government; between national government and state referral networks;
  - develop a work plan and monitoring and evaluation framework for the National EVAW Committee to assist government to report to the CEDAW Committee, within the two-year deadline, on steps taken to implement the recommendation of the 2017 Concluding Observations;
  - provide additional resources, both human and financial, to the Gender Development Unit to succeed in the role.
- Thoroughly explore access to technical and funding support for a multi-year national and state EVAW program, through development partners including the multilateral development banks.

Essential Social Services
Seek support from donor partners to:
- Fund 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;
- Access technical support to train trainers in crisis counselling for victims of family and sexual violence; fund 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.
Justice System Essential Services

- Mandate the National Courts or administrative bodies to conduct a regularly review of the activities of all components of state justice systems, with special attention to customary courts, to ensure that women’s human rights are not violated.
- Initiate a program of sustained training for all states of law enforcement personnel, members of the judiciary and traditional authorities and legal practitioners on the CEDAW Convention and women’s rights.

Health Essential Services

Seek technical support from WHO or regional agencies to:

- develop medical protocols and capacity building programs for medical staff to improve the response to family and sexual violence in each state;
- provide assistance 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 in each state;
- provide technical assistance to hospital management staff on forward planning, prioritising, budgeting and writing justifiable budget request proposals.

Approached WHO and SPC to provide additional technical support for improvements to the health information systems, in particular to have systems in place to capture data relating to violence against women and children.
Introduction

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).

Additionally, the study looked at physical and sexual violence experienced by women, since age 15, by perpetrators other than intimate partners, and gathered information on childhood sexual abuse before the age of 15 (Op cit). Similar studies have been conducted around the Pacific as a tool for identifying the level of support required to eliminate domestic violence against women and children.

The methodology was based on the WHO Multi-Country Study on Women’s Health and Domestic Violence Against Women, which combines quantitative and qualitative components and adheres to international ethical and safety standards (Ibid:10).

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 16,613 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>
<thead>
<tr>
<th>Table 1</th>
<th>Prevalence of FSV for FSM and States Individually</th>
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<tbody>
<tr>
<td>Family and Sexual Violence</td>
<td>FSM</td>
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<tr>
<td>2010 Census Female Population</td>
<td>50,650</td>
</tr>
<tr>
<td>Prevalence of ever partnered women</td>
<td>32.8%</td>
</tr>
<tr>
<td>Prevalence in last 12 months</td>
<td>24.1%</td>
</tr>
</tbody>
</table>

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

While the Pohnpei and Yap results are below the national average, still one in five women in Pohnpei and one in four women in Yap have experienced violence at the hands of a loved one. The prevalence rate of ‘ever partnered’ women in Chuuk is above the national average at one in two and in Kosrae is higher again at close to three women in five.

Some of those spoken to for this assessment suggested that the study should be repeated with a full survey sample group for each state, due to the different contexts. Concern was expressed by some that the observed incidence of family violence was higher than reported in the FHSS. There was also a request from a senator for the national study to be repeated soon so that figures could be updated.

A summary of FHSS results appears as Annex 3.

Regional Comparison

The prevalence of physical or sexual violence against women in FSM at 33% is similar to Cook Islands and Tuvalu, higher than Palau (25%) but lower than Nauru (48%) or Kiribati (68%).

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1 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.

of family and sexual violence is acceptable, especially because it is at the hands of a supposed loved one.

Table 2 Prevalence of FSV in Selected Pacific Countries – Lowest to Highest (Source: kNOwVAWdata / UNFPA)3

<table>
<thead>
<tr>
<th>Country</th>
<th>Lifetime*</th>
<th>Last 12 Months**</th>
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<tbody>
<tr>
<td>International</td>
<td>33%</td>
<td>N/A</td>
</tr>
<tr>
<td>Palau</td>
<td>25%</td>
<td>8%</td>
</tr>
<tr>
<td>Cook Islands</td>
<td>33%</td>
<td>9%</td>
</tr>
<tr>
<td>FSM</td>
<td>33%</td>
<td>24%</td>
</tr>
<tr>
<td>Tuvalu</td>
<td>37%</td>
<td>25%</td>
</tr>
<tr>
<td>Tonga</td>
<td>40%</td>
<td>9%</td>
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<tr>
<td>Samoa</td>
<td>46%</td>
<td>22%</td>
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<tr>
<td>Nauru</td>
<td>48%</td>
<td>22%</td>
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<tr>
<td>Marshall Islands</td>
<td>51%</td>
<td>18%</td>
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<tr>
<td>Vanuatu</td>
<td>60%</td>
<td>44%</td>
</tr>
<tr>
<td>Solomon Islands</td>
<td>64%</td>
<td>42%</td>
</tr>
<tr>
<td>Papua New Guinea</td>
<td>68%</td>
<td>33%</td>
</tr>
<tr>
<td>Kiribati</td>
<td>68%</td>
<td>36%</td>
</tr>
</tbody>
</table>

* Percentage of women who reported experience of physical or sexual violence, or both, by an intimate partner in their lifetime.

** Percentage of women who reported experience of physical or sexual violence, or both, by an intimate partner in the 12 months prior to the survey.

A review of 14 Pacific Islands Forum (PIF) Countries4 completed in March 2017 provides comparisons in relation to access to protections and services. Ten PIF Countries were reported (ADFAT, 2017c:4) as having developed national legislation against sexual or family violence and since then the number has climbed to 12 countries, with FSM and Niue being the exceptions—though The Niue Act 1966 includes rape, and indecent and sexual assault of a woman or child as criminal offences (Ibid:5). In FSM, the states of Kosrae (2014) and Pohnpei (2017) have family protection legislation and Chuuk State has commenced the drafting process, but national legislation has yet to follow.

FSM is one of five countries that does not have mental health strategies or a mental health act (Kiribati, Niue, Solomon Islands and Vanuatu being the others). Mental health activities or services to address the issues of violence against women are essential (Ibid:6).

All PIF Countries reported that there are gaps in available counselling services, particularly in remote areas and outer islands but for FSM these services were said to be minimal (Ibid:10). Some counselling is provided by the health sector and, on Chuuk, by the Chuuk Council of Women in a limited capacity. Where counselling services for survivors of gender-based violence are very limited or non-existent, the initial focus shifts to building the quality of those services and then supporting progressive scaling up (Ibid:35).

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3 ibid
4 Palau, FSM, PNG, Solomon Islands, Nauru, Vanuatu, Marshall Islands, Kiribati, Tuvalu, Fiji, Samoa, Tonga, Cook Islands, Niue.
The UN Sustainable Development Goals (SDGs) have placed a renewed focus on domestic violence, with indicators appearing under both Goal 5 of gender equality and Goal 16 of peace and justice. If FSM is to achieve the SDGs, work needs to commence immediately on eliminating violence against women and children. International obligations require State Parties to establish effective measures to prevent, investigate and prosecute cases of violence against women as well as address the structural causes and consequences of the violence, by ensuring comprehensive legal and policy frameworks, gender sensitive justice systems and police, available health and social services, awareness raising activities and ensuring the quality of all measures (UN Women, et al, 2015, Module 1:8).

A study is about to commence to quantify the economic cost of family and sexual violence to a selection of Pacific Island States. As an example, in 2011, the economic cost of violence against women to the Fijian economy was calculated to be around 6.6% of Gross Domestic Product (GDP). If the percentage holds true for FSM, that amounts to US$21.25 million of the 2016 estimated GDP of US$322 million, money that could be put to better use as FSM approaches the end of Title 2 (Economic Relations) of the Compact of Free Association in 2023 and the resulting reduction in budget support.

Structure of Report

The assessment is structured in three sections. Section 1 is the main body of the report with recommendations directed at the National Government. Section 2 is specific to Pohnpei State and Section 3 is specific to Chuuk State, both 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 services available 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 FSM, the structure of government and the economy, the report situates domestic violence in the context of gender inequality. Brief information on gender equality indicators is provided and background on the National Women’s Machinery. An introduction to the Essential Services Package follows and leads into the assessment of FSM essential services against the model. Additional material that informed the assessment is provided in the annexes.

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5 Goal 5 relevant targets are: End all forms of discrimination against all women and girls everywhere;
Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation; Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation. http://www.unpd.org/content/undp/en/home/sustainable-development-goals/goal-5-gender-equality/targets/

6 Goal 16 relevant targets are: Significantly reduce all forms of violence and related death rates everywhere;
End abuse, exploitation, trafficking and all forms of violence against and torture of children;
Promote the rule of law at the national and international levels and ensure equal access to justice for all; By 2030, provide legal identity for all, including birth registration; Ensure public access to information and protect fundamental freedoms, in accordance with national legislation and international agreements; Promote and enforce non-discriminatory laws and policies for sustainable development. http://www.unpd.org/content/undp/en/home/sustainable-development-goals/goal-16-peace-justice-and-strong-institutions/targets/

7 FSM has ratified UN CEDAW, CRC, CRPD and is a signatory to 2012 Pacific Leaders Declaration on Gender Equality and numerous other regional declarations.


1 Purpose

The Pacific Women program was requested by the FSM Government through the Australian Embassy in FSM to provide technical assistance to conduct an assessment to inform an overall strategy for scaling up access to quality services (health, social services, police and justice) to address family and sexual violence. The States of Pohnpei and Chuuk were selected, in the first instance. The purpose of the assessment is to guide future investments by National and State governments, Pacific Women and other development partners. A similar assessment may be conducted in Yap at a later stage. In Kosrae, where family protection legislation has been in place since 2014, SPC-RRRT is assisting the State with an implementation plan.

The assessment will map the current mix of services and assistance available to support survivors of violence and reduce violence against women, and systems to hold offenders to account and provide analysis and recommendations for improving access to quality, multisector services, and coordination and governance of such services. This includes identifying key gaps and strategic areas for investments to improve the scope, scale and quality of services across each state, considering opportunities to improve multisector service delivery.

The findings will inform the work of a Pacific Women-funded Family Protection Adviser placed with the FSM Department of Health and Social Affairs to work with all four states in FSM. There is also the possibility of four Australian Volunteers International (AVI) support roles being established in all four states whose work may be informed by the assessment.

2 Methodology

Findings in this report are supported by regional and international literature identified during a desk study. A list of references appears at the end of the report.

A field visit was conducted from 14 October to 5 November 2017 to meet with stakeholders at national and state levels. Meetings were held in Palikir, the capital of FSM, in Pohnpei State and in Chuuk State. Both government and civil society stakeholders were consulted. A full list of those consulted appears as Annex 1. Some additional documents were collected during the field visit. At the end of the information-gathering exercise, validation meetings were held in Palikir, Pohnpei and Chuuk. This provided an opportunity for stakeholders to clarify early findings and provide additional information, which has been incorporated into the report. Email contact was made with key informants where further clarification was required.

Two key stakeholder groups were unavailable for meetings during the period; they were traditional leaders and churches. Each plays a vital role in the elimination of violence against women (EVAW) and will be included in recommendations.

3 Context

The Federated States of Micronesia (FSM) comprises four states located north of the equator in the Caroline Islands group: Yap, Chuuk (formerly Truk), Pohnpei (formerly Ponape), and Kosrae (formerly Kusaie) (Gorenflo, 1993:125) totalling 607 small islands of which 65 are inhabited. The capital is Palikir, situated on the largest island in Pohnpei State. By combining the four states an exclusive economic zone was created of 2.6 million square kilometres of ocean which contain the world’s most productive tuna fishing grounds\(^1\), important for the economy. A Compact of Free Association with the

\(^1\)The approximate market value per year of tuna harvested within the nation is about $200 million

USA was ratified at independence in 1986, which guaranteed aid for FSM and exclusive military use of FSM territory for the USA (Firth 1989, in Gorenflo 1993:126). Interaction with non-Micronesian cultures produced major changes throughout Micronesia in general and FSM in particular. Important impacts included the introduction of types of material culture, economic strategies, religious beliefs and political concepts (Gorenflo 1992:126). Mason (1976, in Gorenflo 1993:134) states that any attempt to achieve political or cultural unity was mostly an effort by successive colonial powers to manage and develop an area that is culturally, linguistically and environmentally diverse. The FSM government, indeed state governments, struggle with this diversity when attempting to plan development goals and priorities.

FSM is vulnerable to severe weather events, such as cyclones, tsunamis, and tidal surges. The low-lying atolls are the most vulnerable, but high islands are subject to coastal erosion, especially with increasing urbanisation. Environmental vulnerabilities and climate emergencies result in increases in domestic violence. Strengthening EVAW essential services in vulnerable communities is vital.

**Population demographics**

The 2010 FSM’ Population and Housing Census arrived at a national population count of 102,843 persons, comprising of 52,193 males and 50,650 females. The count represented a decrease of 4,178 people compared to the last census in 2000, reflecting an annual population growth rate of -0.4% per year over the past ten years (SBOC, 2012:1). Out-migration, primarily to Guam and the US, are the main reasons for population decline. FSM nationals may travel freely to the US and its territories. Chuuk had the largest population at 47% (48,654) and Pohnpei the second largest at 35% (36,196).

The median age was 22 years and 35% of the FSM 2010 population were children below 15 years of age (Ibid:2). Life expectancy at birth was 70.3 years for females and 68.2 years for males. According to the Census, 22.3% of the population live in the variously defined urban areas across the four states compared to 77.7% that live in rural areas (Ibid:3).

Roman Catholic is the largest religious denomination (55%). Protestant denominations total 43%, made up of Congregationalists, Baptists, Seventh Day Adventists, and Jehovah’s Witnesses, among other Protestant denominations (FSM Department of Health and Social Affairs, 2014: 16).

FSM’s Human Development Index (HDI) score of 0.638 in 2016 places the country in the low human development category, ranking 127 out of 156 countries. Compared to other Pacific Island countries, FSM’s HDI score is below that of Palau (0.788), Fiji (0.736), and Tonga (0.721) and above the HDI score for Vanuatu (0.597) and Kiribati (0.588). Low human development indicators are known to have important long-term economic and social implications (Op cit).

Nearly 30% of the population lives below the national basic needs poverty line, highest in Kosrae and lowest in Yap: Kosrae (34.5%), Pohnpei (33.9%), Chuuk (28.7%), and Yap (19.4%) (Ibid:16). The FHSS found that women in households with higher socioeconomic status were 57% less likely to experience current partner violence than women in households with the lowest socioeconomic status (Ibid:69). Reducing poverty contributes to eliminating violence against women and children.

Infant mortality rates are high at 21.93 per 1,000 live births and maternal mortality rates are high at 100 maternal deaths per 100,000 live births. The FHSS commented that lack of sexual and reproductive health services is thought to contribute to the prevalence of teenage pregnancy, which

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12 http://www.fsmpio.fm/announcements/health/MCH/2017_APP_TitleV_PrintVersion.pdf
14 The HDI is a composite index measuring average achievement in three basic dimensions of human development—a long and healthy life, knowledge and a decent standard of living. Countries are scored between 0 and 1, with 1 being the highest possible score.
may be contributing to the statistics on high-risk births and other related health issues (Ibid:16); however, anecdotal information was that finding effective interventions to fund, that work with youths, is the stumbling block to combating teenage pregnancy. Only 41% of the population has access to an improved water source and 45% to improved sanitation (Op cit), which can increase women’s household labour and lead to household health issues that in turn undermine livelihoods.

Education is free and compulsory from the ages of six to 14 years or completion to 8th grade, though many students leave school before this age or grade level. Enrolment rates in elementary and secondary education are high at (97% and 76% respectively) but the completion rate for secondary school is low at 36% (Ibid:18). The FHSS found that children of women who ever experienced partner violence were almost three times more likely to have stopped or dropped out of school than children of never abused women (Ibid:58). The FHSS also found that women whose partners had achieved higher or tertiary education were significantly less likely to experience lifetime partner violence than women whose partners had primary or no education (Ibid:65). Strengthening the education system by improving quality, completion rates, teacher training and recruitment will contribute to eliminating family and sexual violence, along with improving social and economic progress.

The field visit observed that most sectors of the civil service appeared to be under-funded and have recruitment and retention problems.

4 Compact of Free Association

Under the Compact of Free Association, the US currently provides around US$130 million in direct assistance, including federal grants and services, every year until 2023. A national Strategic Development Plan 2004-2023 was produced as the basis for the most recent round of Compact negotiations. The current Compact focuses on six sectors: education, health, infrastructure, public sector capacity building, private sector development, and the environment. No funds are allocated for social affairs, which includes women, youth and the elderly, but US federal grants are applied for with mixed success. Currently, there is no specific budget to address family and sexual violence or for alignment with CEDAW.

Table 3 Compact Grant Allocations for 2017

<table>
<thead>
<tr>
<th>Sector</th>
<th>Funds Allocated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>$25,646,846</td>
</tr>
<tr>
<td>Health</td>
<td>$22,115,289</td>
</tr>
<tr>
<td>Infrastructure</td>
<td>$14,971,770</td>
</tr>
<tr>
<td>Environment</td>
<td>$1,791,980</td>
</tr>
<tr>
<td>Capacity Building</td>
<td>$2,009,511</td>
</tr>
<tr>
<td>Private Sector</td>
<td>$1,655,693</td>
</tr>
<tr>
<td>Enhanced Reporting &amp; Accountability</td>
<td>$1,562,227</td>
</tr>
<tr>
<td>Section 211 Sector Grant Allocations</td>
<td>$69,753,316</td>
</tr>
<tr>
<td>Total</td>
<td>$139,506,632</td>
</tr>
</tbody>
</table>

Source: US Department of the Interior, 2017:80

Direct aid is reduced by roughly US$20 million annually which is invested in a jointly managed Trust Fund meant to replace Title 2 of the Compact in 2024. Title 2 explains the economic relations between the two countries. The FSM government is obliged to contribute funds annually from its own

revenue but while the total net asset value of the fund increases each year, there is concern that the fund is not on track to meet the required level to maintain living standards once Title 2 of the Compact ends. This annual reduction requires some combination of reductions in real government services or increases in the real value of tax and fee revenue collections. Significant economic growth is a preferred option, but this is considered to be challenging due to ongoing outward migration (US Department of the Interior, 2017:81). The financial loss impacts mostly on the states, which are the major recipients of Compact funds through a complicated Congressional dispersal method, explained in the next section.

Adequate funding for the essential services will eventually improve the economy and strengthen society. The Office of Insular Affairs (OIA) suggested that priority activities with an impact on human health or public safety may need to be protected entirely or even enhanced, while lower priority activities may need to be eliminated entirely (Op cit). This is good advice and the national government may require additional technical support to adjust priorities and achieve better growth.

5 FSM Government and Economy

The Federation is governed by a unicameral Congress of 14 seats allocated proportionally amongst the states and elected by popular majority. There has never been a woman elected at the national level. Congress elects the President from within, usually on a rotational basis to maintain harmony between the states.

Each state has its own constitution, elected legislature, and governor. At the 2017 state elections, one woman was elected in Pohnpei and one in Chuuk. The states have considerable power, particularly regarding the implementation of budgetary policies, and states promulgate their own laws, for example, Kosrae passed a state Family Protection Act in 2014 and Pohnpei passed a Domestic Violence Act in 2017. The absence of a national law has not been a barrier.

Economy

Most recent revenue and expenditure data available from the FSMStats website is for FY2015. In 2015 national revenue totalled $207.87 million and national expenditure totalled $153.65 million.

<table>
<thead>
<tr>
<th>Table 4 FY 2015 Revenue and Expenditure (US$ Millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
</tr>
<tr>
<td>Tax Revenue</td>
</tr>
<tr>
<td>Grants</td>
</tr>
<tr>
<td>Other Revenue</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>


Almost half of annual revenue was grants, made up mostly of Compact funds. Other revenue is dominated by the sale of fishing licences to foreign governments and a small amount of exports such as taro, kava and fish. Exports are dwarfed by imports, primarily from the USA and Guam. Almost half of expenditure was public sector wages.

Public money raised or received (taxes, fishing licenses, etc) by the national government is deposited in a General Fund or special funds within the National Treasury. Funds can only be withdrawn from
the General Fund or special funds by law in the form of a Congressional Act. At the 2017 second regular session of the Twentieth National Congress, an Act was passed to appropriate US$67,903,100 from the General Fund for the fiscal year ending September 30, 2018, to provide funding for the operations of all branches of the National Government (Public Law No 20-42). The National Government does not receive funds from the Compact, apart from 10% of a Supplemental Education Grant for the Department of Education. Allocation of the US$67 million is itemised over 30 pages of the Act, down to details such as US$350 for membership of a regional organisation.

Public Laws are used to allocate funds to states for specific purposes. In the seven months between May and November 2017, 55 Public Laws on the distribution of funds were approved by Congress. Added to that are Congress Bills, which amend Public Laws and redistribute funds, and Congress Resolutions, which approve and accept grants, amongst other functions such as approving bilateral agreements. While transparency in financial allocations is important, the process appears to be tedious and must take up a good deal of Congress’ sitting time. It also explains comments heard during the field visit that senators see their role as being a donor partner and not a duty bearer.

States receive around 50% of taxes gathered within the state—the rest going to National—plus Compact funds and grants. Revenue and expenditure reports for states could not be found and in amongst the many Public Laws and Congress Bills there was no apparent single Act appropriating a total allocation to each state; however, there were numerous appropriations for funds from around US$50,000 to around US$8 million for specific purposes, such as infrastructure or education. Sometimes the appropriation was for one state, other times it was split between all four states—or any combination of states. Again, the appropriation was detailed down to paving of a footpath in a particular village.

A report for Pohnpei for FY13 recorded total revenue of US$17 million and total expenditure of US$16.5 million. Revenue was made up of Compact funds, local revenue and taxes and federal grants from the US. It could be expected that Chuuk would receive a little more revenue, based on population, and Kosrae and Yap would receive lesser amounts.

Time spent on appropriations may be crowding out time available for improving the legislative and policy framework to deal with some of the more pervasive social problems, such as, family and sexual violence, rape, youth suicide, teen pregnancy, disability and others. Whether this would require a Constitutional change or just a change to internal systems requires further investigation, perhaps as part of a forthcoming Constitutional review.

6 Gender Equality in FSM

Violence against women and children cannot be viewed in isolation as it is a symptom of gender inequality. The Pacific Women Roadmap references global evidence 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. Further, children and adolescents who witness men and women sharing care-giving tasks and decision-making are more likely to carry values of equality into their own adult lives. This in turn has a positive influence on belief systems, attitudes and behaviours (ADFAT, 2017a:2-3).

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Family and sexual violence is one indicator of gender inequality. Other indicators emerge from the political and economic representation of women.

6.1 Political empowerment

Women have consistently been absent or grossly under-represented at the legislative and executive levels of government. In 2017, two out of seven Secretaries (department heads) in the national government were women and the Public Defender and Post Master General were women. Of the five overseas diplomatic missions, one is headed by a woman (United Nations, NY). One of three Associate Justices is a woman and there is one woman Assistant Attorney General out of five positions.

In Pohnpei, apart from one woman senator, two Assistant Attorney Generals are women.23 In Chuuk, the Chief of Public Health is a woman but there do not appear to be any others in senior positions in the state administration or the justice sector.24 Despite the lack of recognition of women in the public sector, women are achieving in professional careers as lawyers, doctors and business owners and are then able to influence decision-making.

There is a Women in Business network in Chuuk and Pohnpei, though neither appear to function well, and an increasing number of women sit on boards and committees and hold technical assistance positions in the public sector. This includes women’s representation on the social security, banking and health boards (SPC 2012:9).

During the field trip some women expressed frustration at males in positions of responsibility that no longer represent the concerns of women, with some saying that family and sexual violence is not addressed because men are not the victims. These women proposed that more women senators would result in real progress on eliminating family and sexual violence. The Draft National Gender Policy comments that gender norms are still strong when it comes to curtailing women’s opportunities to speak out and participate in decision-making (Draft National Gender Policy, page 4).

6.2 Temporary special measures

On three occasions since 2009, a Bill has been introduced to the national legislature to allow for a small number of congressional seats to be reserved for women. The Bill has failed on each occasion, seemingly due to a lack of understanding of how and why reserved seats result in better government. Apparently, the most recent version of the Bill does not give women in the reserved seats any voting rights. Recent observations released by the UN CEDAW Committee expressed concern at the lack of understanding of the nature, scope and benefits of temporary special measures and recommended that the FSM government raise awareness among the general public and all relevant officials, with a view to implementing temporary special measures, such as quotas and gender-specific programs, and allocating resources where needed (CEDAW, 2017:6).

6.3 Economic empowerment

The 2010 Census found that males outnumber females by almost two to one in waged employment: 63% males, 37% females; and 10% more males than females received income from the subsistence economy: 55% males, 45% females (SBOC 2012:9). An imbalance in the labour force can result from structural discrimination, that may be unintended, but impacts on equality none-the-less. There was considerable variation across the states. This domination of waged employment by males can impact on family and sexual violence. The FHSS found that almost 15% of ever-partnered women were

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23 This information may not be up to date http://fsmsupremecourt.org/WebSite/pohnpei/index.htm
24 This information may not be up to date http://fsmsupremecourt.org/WebSite/chuuk/index.html
economically abused by a partner (FSM Department of Health and Social Affairs, 2014:39). Examples were refusal to give money when money was available for other things and the partner taking away the woman’s earnings or savings (Ibid:45).

The census identified that roughly 25% of households were female-headed (SBOC 2007:22), which includes widows, and have much lower incomes than male headed households. Elderly women received a small government pension but were mostly reliant on the generosity of family members to assist them to live.

The Public Service Act contains a provision for equal employment opportunities, but a national sexual harassment policy is not in place, though one has been in preparation since at least 2012. In 2009, Congress passed Bill 16–20, which grants paid maternity leave of up to six weeks for national government employees. More work is required to extend maternity and other employment protections for female workers in the private sector and in the states (SPC 2012:14). The ILO minimum standard is 14 weeks leave.25

6.4 National gender policy

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.

The policy acknowledges women and men in all their diversity, including youth, elders, people with disabilities and those living on outer islands. Traditional leaders, women’s organisations, community organisations and church leaders are recognised as important partners for the FSM government and the states as they work together to achieve the goals of the Gender Policy.

State gender policies are an important next step; regardless, the national government is able to make progress on gender mainstreaming through national departments and offices to provide the framework for state departments to make progress. Technical assistance is available through SPC and Pacific Women gender advisers.

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.

6.5 National women's machinery

Since 2000 there has been a women’s desk known by various names, currently the Gender Development Unit (GDU), located in the Department of Health and Social Affairs (DHSA) in the national bureaucracy. There is one National Gender Officer who is responsible for disseminating information and coordinating women’s activities and programs, amongst other areas. The Gender Development Unit is responsible for implementing the gender matrix from the Strategic Development Plan 2004–2023 (GoFSM, 2004: Appendix B-08). One of the goals of the gender matrix is to mainstream gender issues into decision-making, policies and strategic development plans. There is no specific plan of action and no system for reporting progress in addressing gender issues (SPC 2012: 9). Goal 4 of the Gender Strategic Planning Matrix is to eliminate all forms of abuse,

discrimination, harassment and violence against women and girls in the work force and in the private and public spheres; and strengthen women’s economic capacity and commercial networks. Goal 5 is to strengthen the institutional capacity of women’s programs in FSM. Goal 6 is to strengthen the institutional capacity, effectiveness and impact of youth organisations, adoption of gender empowerment policies and programs on youth, senior citizens and disabled persons; and the provision of leadership training for women, youth and people with disabilities and special needs (Ibid).

To date there has been little or no progress due to lack of implementation funds. Apart from core costs, the GDU receives US$12,000 per annum for implementation. Standing Committee Report No 20-19 of 21 September 2017, reports that the GDU requested US$109,600 for FY2018 to allow for an additional staff member, additional travel to states and other resources. The request was turned down by the Standing Committee and instead it was recommended that the GDU receive the same level of funding as FY2017—a sum of US$34,024. This is roughly IS$10,000 less than the GDU was receiving 13 years ago when the Strategic Development Plan was finalised (GoFSM, 2004:508).

The Chair of the DHSA Standing Committee was a key informant for the consultation. Discussions revealed that budget bids from DHSA departments fail for lack of a convincing proposal for why additional funding is necessary, statistical data to support a convincing argument and a clear explanation for how the funds will be used. Pacific Women advisers and SPC-RRRT will be able to assist some DHSA divisions in this area.

6.6 National Women’s Council

State Women’s Councils have existed in FSM for decades and in 2014 a National Women’s Council was formed by the states as a mechanism for closer coordination between the states and to present a stronger women’s voice to the national government. The Council of 10 members is made up of two representatives from each state plus two from national government. The National Council acts as the umbrella body for the state women’s councils—which are comprised of municipal and village councils—and is the civil society counterpart for the Gender Development Unit in the national government to make progress on women’s issues, in the same way that state women’s councils counterpart with state governments. The National Women’s Council also networks regionally and internationally with other women’s organisations.

State women’s councils have been quite active in a range of women’s rights areas, including the elimination of violence against women and children. State women’s councils have rotationally hosted National Women’s Conferences, which result in an outcomes document of resolutions to government on a range of actions to progress the situation for women. In 2018 the National Women’s Conference will be hosted for the first time by the national government, in recognition of the partnership. A budget of $90,000 has been allocated to the GDU for the event.

7 Especially Vulnerable Populations

The FHSS did not disaggregate for disabilities, nor did it capture violence against homosexual and transgendered populations and female sex workers. Other studies are drawn on here.

7.1 Disability

The 2010 Census estimated the total disability population at 11% (11,363) (SBOC 2012:10). The Yap disability population was above the national average at 16.9% but the other states hovered around

the average (SBOC 2012:6). Data was not disaggregated. Currently there are no specific services in FSM to support women and girls with disabilities at risk of family and sexual violence.

FSM is ahead of much of the Pacific when it comes to disability support. In 2009, FSM adopted a National Policy on Disability 2009–2016. Women with disabilities are a targeted priority area. The policy is under revision, with support from the Pacific Disability Forum and other regional agencies and, while progress has been slow so far, the objective of ratification of the Convention on the Rights of Persons with Disabilities (CRPD) was achieved in 2016.

Pohnpei Consumer Organisation (PCO) is the only disabled persons organisation that engages with national and state governments on support for people with disabilities. The organisation has a membership of over 600 consumers, parents and family members with roughly 40% female membership. The five-member Board has one woman. In 2010 PCO assisted with the establishment of Pohnpei Women with Disabilities but due to lack of funding the group merged with PCO after a year.

During consultations, PCO reported overarching service gaps in availability, affordability and accessibility. Concern was also expressed over sexual assault in the workplace of women with disabilities who are not able to protect or defend themselves.

SPC-RRRT is currently providing technical support to PCO to develop a national implementation plan for CRPD, which will form the basis of a proposal to government for budget allocations over the next five years. Donors may be willing to assist once government demonstrates priority by funding a coordination mechanism within DHSA. Ideally, state governments will follow suit with an adequate budget to achieve the Convention.

Additional information on PCO appears in Annex 4 and in Section 2 on Pohnpei State.

7.2 Lesbian, Gay, Bisexual and Transgender populations

Although homosexuality is not criminalised, there are no laws prohibiting discrimination against people based on their sexual orientation or gender identity (UNDP, 2016:14). As at 2016, it was reported that there is no information available on the transgender population in FSM (Op cit). Sex work is illegal in Chuuk and Pohnpei, but not in Yap and Kosrae (Ibid:15).

A much smaller study carried out in FSM in 2016 by UNDP and others, found that most transgender interviewees had been physically and sexually assaulted by family members or boyfriends. Sixty nine percent of survey respondents reported being sexually assaulted in the preceding 12 months (Ibid:11). Male and transgender interviewees felt they faced violence from others for not fulfilling the masculine roles expected of them (Ibid:64). Gaps in services identified were psychosocial support, drug and alcohol counselling support and separate clinical health services.

The Chuuk Council of Women has been managing an ‘HIV and STI Risk Vulnerability among Key Populations’ project for most of 2017 with funding from UNDP. One of those Key Populations is Men who have Sex with Men and Transgender (MSM-TG). There is no similar project elsewhere in FSM but there are regionally in Palau, Papua New Guinea (PNG) and other parts of the Pacific.

7.3 Female sex workers

Women sex workers interviewed for the same UNDP study in FSM reported stories of rape and abuse, often by family members and occasionally clients. All but one of these assaults had gone unreported due to threats made by the abusers. In some cases, the women said that after being raped earlier in life by family members, they felt worthless and unmarriageable and this led them into sex work (Ibid:68).
There is still a tendency to deny the existence of sex workers in FSM but the ‘HIV and STI Risk Vulnerability among Key Populations’ project being run by CWC, also focuses on sex workers. So far, 93 sex workers from across all Chuuk islands are involved in the program. Gaps in services identified were mental health support for rape victims, additional drug and alcohol counselling support and separate clinical health services for sex workers—a model exists in PNG. Para-legal support was also considered useful to assist sex workers to access their legal rights.

7.4 Anti-trafficking legislation

Human trafficking has a much higher profile in FSM than family and sexual violence against women and children. In 2016, the government reported conducting investigations into eight alleged trafficking cases in Chuuk, Pohnpei, and Yap, compared to five in 2015 and two in 2014 (Department of State, 2017:282). This is a vastly smaller population than those experiencing family and sexual violence and yet the supportive framework is far more developed.

FSM has a national policy on human trafficking supported by anti-trafficking legislation at the national level and in all states. Two states have approved state-level action plans to implement the FSM National Action Plan and the government created an anti-trafficking coordinator position to oversee government anti-trafficking work (Op cit). The same approach could be followed to frame a response to eliminating family and sexual violence.

A 2016 high-profile prosecution for human trafficking, including for forced prostitution, and a 2017 case involving the prostitution of minors demonstrates that sexual abuse has a variety of forms that sometimes overlap with family and sexual violence and other crimes, such as child abuse and living off the earnings of prostitution. This overlap appears to cause confusion in the legal system, particularly in sentencing, and is known to result in acquittals or light sentencing. Work is required to clarify the application of laws to types of cases.

An expanded discussion on vulnerable populations appears in Annex 4.

8 CEDAW Observations

FSM acceded to the UN Convention on the Elimination of all forms of Discrimination Against Women (CEDAW) in 2004 and submitted its first report to the CEDAW Committee in 2015. A high-level delegation appeared before the Committee in Geneva in February 2017 and the Committee’s concluding observations were released in March 2017. Many of the observations have implications for the states; however, staff from the Attorney Generals Offices were met with in both Pohnpei and Chuuk and neither of those offices was aware that FSM had reported, let alone that an observations report had been released, which will be followed up on by the Committee in two-years’ time. Copies of the observation report had been provided by the FSM Government after the dialogue but, because those who were consulted with were not aware of the documents, they were later provided again by email.

The Committee recommended giving central importance to the Convention as the basis for elimination of all forms of discrimination against women and for the achievement of gender equality. The Gender Development Unit of the National DHSA is about to commence a one-year program of awareness raising at national and state level on the Convention, with support from a Canada Fund grant. A useful next step would be to provide induction to all new civil service staff on CEDAW and other international and regional obligations, ideally within the first month of commencement. In the


absence of a Public Service Commission, induction could be provided by the National DHSA and the state equivalents.

Specific to gender-based violence against women, the Committee expressed concern about the lack of protection and victim safety legislation, and legal gaps and inconsistencies; the corroboration requirement in the prosecution of cases of rape and sexual violence; widespread gender-based violence against women, particularly domestic violence, and high levels of social acceptance of such violence; the lack of prosecutions and convictions of perpetrators; women’s reluctance to report due to fear of social stigma; discriminatory evidence requirements; and customary practices of forgiveness and reconciliation over prosecution by the courts. The Committee also expressed concern about the unavailability of appropriate shelters or services, including medical treatment, psychological counselling and legal assistance.

The SPC-RRRT Country Focal Officer (CFO) has played an integral role in CEDAW reporting and is working with the FSM Government to prepare an initial mapping for the CEDAW Observations. This assessment aims to assist the government to make progress on the Observations as well as achieving the recommendations of the Family Health and Safety Study.

Other Observations appear throughout this report and a summary of additional relevant Observations appears as Annex 5.

9 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 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.

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


Prioritisation for early 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.

10 Assessment of FSM National EVAW Essential Services

The following assessment primarily focuses on national actions. Section 2 and Section 3 provide assessments for Pohnpei and Chuuk respectively.

Information available suggest that FSM generally, and Pohnpei State and Chuuk State individually, have made some progress in addressing family and sexual violence (FSV) 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, eg, poverty. There are women's and youth groups that raise awareness about 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 absent or ad hoc, data collection is absent 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.
10.1 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 (FSM Department of Health and Social Affairs, 2014:56). 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 (Ibid:57).

The FHSS identifies 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.

Essential health services must 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 should be 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 (UN Women, et al, 2015: Module 2:14). 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.

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 to death by her abusive husband on the premises of Chuuk Hospital and harassment of patients in treatment rooms has been reported. Hospital security will need to be strengthened.

10.1.1 Mental health services

FSM 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 (ADFAT, 2017c:6).

Both Pohnpei and Chuuk hospitals provide limited mental health services and the focus to date has been on reducing substance abuse and other risky behaviour—perhaps a result of the funding model. There is no separate safe space for mental health patients at hospitals, though a new mental health
wing is being built at Pohnpei Hospital, funded by Australian Aid. Mental health sufferers are known to end up in jail for their own protection. An emerging issue is that of trafficked people and how to provide mental health support while the victims await justice. Assistance with developing protocols and systems for trafficked victims is required.

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).

10.1.2 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). This reflects comments made during the field visit, that the HIS only collects information required by donors. 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.29

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 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.30

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. When new situations arise, such as a recent trafficking case involving children, there is no capacity to respond. In this specific case, the children were left at risk.

Health management staff commented that they required technical assistance on forward planning, prioritising, budgeting and writing justifiable budget request proposals.

Pohnpei health officials suggested undertaking a stocktake of what health-related social resources are available across all sectors, such as church counselling. The National Department of Health and

29 Feedback from a government source during report drafting.
30 Feedback from a government source during report drafting.
Social Affairs is well-positioned to undertake these surveys with states, perhaps with support from the WHO or other regional agency.

10.1.3 Recommendations for health EVAW essential services: FSM government

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

- Seek technical support from WHO or regional agencies to:
  - develop medical protocols and capacity building programs for medical staff to improve the response to family and sexual violence in each state;
  - provide assistance 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 in each state;
  - provide technical assistance to hospital management staff on forward planning, prioritising, budgeting and writing justifiable budget request proposals.
- Approach WHO and SPC to provide additional technical support for improvements to the health information systems, in particular to have systems in place to capture data relating to violence against women and children.
- Approach SPC to provide gendered statistics training to health staff.
- Approach a regional agency to provide technical assistance to develop a system and protocols to meet the medical and mental health needs of victims of trafficking in each state.
- Approach WHO or other regional agency to assist DHSA to undertake a stocktake of health-related social resources available across all sectors, such as church counselling.

10.2 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 are expected 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 Pohnpei Department of Public Safety started training police officers on how to handle incidents of domestic violence and 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 justice in the formal 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).
10.2.1 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 (Ibid:64), which further undermined victims’ willingness to report. A ‘no drop’ provision\(^{31}\) is in place but the force is mostly untrained on how to apply it. This training must be prioritised, and consequences need to 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. 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 ad-hoc 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.\(^{32}\) A strong police force requires well-trained recruits. An adequate budget for comprehensive police academy training should 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, where they exist, are often the first police presence at the hospital or social service if called to attend, so 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.

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).

10.2.2 Regional police support

A small number of senior police from both Pohnpei and 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 Pohnpei and Chuuk

\(^{31}\) 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.

State police officers have been trained as trainers, 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. These investigation techniques will assist with obtaining convictions of perpetrators.

10.2.3 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 (Ibid:64). The practice of traditional dispute resolution came up several times during consultations, 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 remedy, but it must not diminish the sentence.

The CEDAW Committee recommended that specific remedies should be established to provide redress for women in both formal and customary justice 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).

The FSM 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 10.5 below. There is no national family protection act and work has not been undertaken to align laws with previous international commitments such as CEDAW and CRC. This is taken up under 10.5 also.

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). 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).

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10.2.4 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.

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.

10.2.5 Recommendations for justice EVAW essential services: FSM government

- Mandate the National Courts or administrative bodies to conduct a regularly review of the activities of all components of state justice systems, with special attention to customary courts, to ensure that women’s human rights are not violated.
- Establish specialised and multi-disciplinary units within the national justice sector for improved coordination of service delivery.
- Essential justice sector services engagement in a multi-agency National EVAW Committee.
- Establish 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.
- Seek technical support from regional agencies 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 assistance from regional agencies to improve case management, data collection, and information management systems.
- Investigate perpetrator programs for delivery by correctional services, based on best international practice.
- Initiate a program of sustained training for all states of law enforcement personnel, members of the judiciary and traditional authorities and legal practitioners on the CEDAW Convention and women’s rights.
- Review the Police Academy curriculum, particularly for responding to family and sexual violence and allocate adequate funding to run the full program at least annually.
- Negotiate with AFP to provide additional support to state police on management information systems, record keeping, case management and a family protection training program.
- Review recruitment procedures with the aim of improving the quality of new recruits, in particular women recruits;
- train equal numbers of male and female police officers as police counsellors.

10.3 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.
A social worker graduate recently returned from training in Guam and is finding it difficult to secure employment due to the lack of positions being in place. Four more scholarship social work students are currently in training at the University of Guam. 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 Domestic 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 accompanying 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.
10.3.1 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). Three shelters in Yap were reported in the FHSS to be operating successfully, apparently because they are located within government buildings and few people know that a shelter is being operated inside (Op cit).

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, similar to the Yap shelters. 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 Pohnpei and Chuuk should 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 (FSM Department of Health and Social Affairs, 2014:10) 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.

10.3.2 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 in order to remain safe (Op cit). Consideration needs to be given 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. 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 should be kept simple and reporting of how the fund is used should 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 child-friendly (Ibid:16).

10.3.3 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).

In both Pohnpei and 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 should form part of the project budget. Development partners rely on CSOs to deliver projects and FSM CSOs have little or no opportunity to raise independent funds from membership fees, the private sector or community donations.

State governments need to 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 support, 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.

10.3.4 Recommendations for social services EVAW essential services: FSM government

- Create paid positions in relevant national departments or offices 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.
- Seek support from donor partners to:
  - fund 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;
  - access technical support to train trainers in crisis counselling for victims of family and sexual violence; fund 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.
• Establish age appropriate, child sensitive and child-friendly services for children who have experienced family and sexual violence.
• Provide annual grants to a selection of key national CSOs that contribute to fulfilling national government’s civic obligations and to achieving the gender objectives of the Strategic Development Plan 2004-2023.
• Access 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.
• Engage with CSOs on planning for the long-term recovery of survivors and a range of options to support women into paid employment or self-employment.

10.4 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 (Ibid:7).

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.

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 of the network to meet. There are currently no formal systems for coordination, risk assessment and management, or accountability.

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 Pacific region is the Solomon Islands Referral Network, SAFENET, consisting of the Ministry of Health and Medical Services (including Integrated Mental Health Services and the Social Welfare Division); Royal Solomon Islands Police Force; Christian Care Centre; Family Support Centre; Public Solicitor’s Office; and the Ministry of Women, Youth, Children and Family Affairs. SAFENET is coordinated by the Ministry of Health and Medical Services (MHMS) Social Welfare Division’s Gender Based Violence (GBV) Program. SAFENET branches are active in other provinces with support from the Ministry to develop an MoU for the provincial context.

Referral networks can also contribute to policy making, undertake joint training, undertake collective community awareness raising and the development of joint information, education and communication (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
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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 (UN Women, et al, 2015: Module 5:9). 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).

10.4.1 National level: essential actions

At the highest level, national governments are required to initiate action among departments and offices that play a role in addressing violence against women and girls (UN Women, et al, 2015: Module 5:13). Relevant departments and offices in the FSM Government include Health and Social Affairs (gender, youth, disability), Education, Public Safety, Attorney General and the Public Prosecutor, amongst others.

The National EVAW Committee is a governance body that identifies what actions need to be taken at the national level to provide a framework for the states to achieve. High-level senior staff are required to represent each department, i.e. Secretary level; however, relevant desk officers may also play a role. Senior representatives of national CSOs also have a role on the Committee, such as, the National Women’s Council, National Youth Council and National Disability Council (or its equivalent) and the National Senior Citizens Association when it has been formed. This Committee would work closely with state referral networks to identify what the enablers and barriers are to an effective EVAW response, then take action at the national level to strengthen the enablers and remove the barriers. Regular reports from the National EVAW Committee to the National Congress can facilitate the endorsement of law and policy changes, the creation of new laws and policies and budget allocations to the states to progress EVAW work.

The Gender Development Unit (GDU) of the FSM Department of Health and Social Affairs (DHSA) is well placed to provide the network coordination role at two levels: within national government; between national government and state referral networks. Additional resources, both human and financial, will be required. Coordination and governance of coordination require adequate resourcing to ensure they have the technical expertise, systems and processes, and authority to carry out the required functions and actions (Ibid:14).

Laws and policies based on best practices and international standards and norms are essential in guiding the formal and informal processes that underpin coordination and governance of coordination (Op cit). The Draft National Gender Policy will assist with pursuing best practices and national strong family protection legislation would be a good addition. The CEDAW Committee recommended that FSM give central importance to the Convention as the basis for the elimination of all forms of discrimination against women and for achievement of gender equality. Incorporation into the national legal system is a priority (CEDAW, 2017:3).

The CEDAW Committee also recommended that FSM should make the Convention sufficiently known and applied in respect of all laws, court decisions and policies on gender equality and the advancement of women, including through the wide dissemination of the Convention and the Optional Protocol among public officials (CEDAW, 2017:3). National institutions, organisations and their personnel will require support and training to ensure effective coordination efforts. Joint or cross sectoral training can be effective in ensuring that professionals across different sectors gain a shared understanding of the diversity of violence against women and have access to contemporary evidence about effective responses (UN Women, et al, 2015: Module 5:16). The CEDAW Committee
recommended that that Convention and Optional Protocol be made an integral part of professional training for Congress and the judiciary also (Op cit).

Monitoring and evaluation provide opportunities to understand and learn how coordinated systems are functioning. Sharing the findings of monitoring and evaluation allows coordinated responses to be improved and for stakeholders to participate in and make decisions about improvements (UN Women, et al, 2015: Module 5:17). Consumer groups have a role to play. Having a monitoring and evaluation (M&E) framework matching the work plan of the National EVAW Committee will assist government to report to the CEDAW Committee, within the two-year deadline, on steps taken to implement the recommendations of the 2017 Concluding Observations.

Finally, the CEDAW Committee recommends that the FSM Government make use of regional or international technical assistance to link the implementation of the Convention to its development efforts (CEDAW, 2017:15). There may also be opportunities to access regional funding through multilateral development banks. In particular, the World Bank has a human development grant fund for use in social sectors. A national and state program on eliminating violence against women is likely to qualify for a multi-year grant. This option needs to be thoroughly explored.

10.4.2 Recommendations for EVAW coordination and governance of coordination: FSM government

- Establish a National EVAW Committee made up of senior-level national essential services department representatives and senior-level national essential services CSO representatives;
- appoint the Gender Development Unit of the FSM Department of Health and Social Affairs to provide the network coordination at two levels: within national government; between national government and state referral networks;
- develop a work plan and monitoring and evaluation framework for the National EVAW Committee to assist government to report to the CEDAW Committee, within the two-year deadline, on steps taken to implement the recommendation of the 2017 Concluding Observations;
- provide additional resources, both human and financial, to the Gender Development Unit to succeed in the role.
- Ensure that central importance is given to the CEDAW Convention in all policy and legislation as the basis for the elimination of all forms of discrimination against women and for achievement of gender equality.
- Provide National institutions, organisations and their personnel with training and support to ensure effective coordination efforts to make the CEDAW Convention sufficiently known and applied in respect of all laws, court decisions and policies on gender equality and the advancement of women, including through the wide dissemination of the Convention and the Optional Protocol among public officials;
- make CEDAW and the Optional Protocol an integral part of professional training for Congress and the judiciary.
- Thoroughly explore access to technical and funding support for a multi-year national and state EVAW program, through development partners including the multilateral development banks.

10.4.3 Local level: essential actions

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 enable robust mechanisms that can be understood by, and
are accountable to the stakeholders and the community (UN Women, et al. 2015: Module 5:18). Formal structures should 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).

Coordination and governance of coordination is 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).

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 Senates and the national EVAW body.

Recommendations for local level essential actions will appear in separate reports for Pohnpei and Chuuk.

10.5 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).

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<td>Gender sensitive policies and practices</td>
<td>Monitoring and evaluation</td>
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<td>Training and workforce development</td>
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10.5.1 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) and a National Justice Sector Committee is an ideal mechanism. The Attorney General’s Office, Public Prosecutor’s Office and other relevant agencies can compose the Committee. In particular, strong national family protection legislation is required as a baseline for the States to meet or exceed, even if that requires revision of existing laws in Kosrae and Pohnpei. The national legislation will need to consider international best practice in application, sentencing, powers of the police and other areas.

Progressive alignment of National and State Governments existing legislation with CEDAW, CRC and CRPD assists to identify any new legislation needed to fill gaps. Policies and procedures follow on to support achievement of legislation. The Draft National Gender Policy is a first step to states developing gender policies, but more is required. Many areas of legislative discrimination were identified by the CEDAW Committee. It falls to the National Government to lead on providing the legal framework to eliminate discrimination, contribute to the achievement of the Strategic Development Plan 2004-2023 and by extension strengthen FSM’s economy. When it comes to family protection, two States (Kosrae and Pohnpei) have taken the lead and a third (Chuuk) will soon follow. Clearly there is public will in the States to eliminate inequality in all its forms and to end family violence. Ideally, political will needs to at least keep in step or be a step ahead.
10.5.2 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 Congressional time is taken up with approving distribution of funds and approving grants from development partners. 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).

A comprehensive induction program after each election would be a good first step. Inductions need not be limited to the congressional process and can include presentations by CSOs on the social service needs of communities.

10.5.3 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). Spending on essential services now, pays back in the future. As FSM 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 congressional 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. Development partners are more likely to be supportive if governments demonstrate political will to address the challenge.

10.5.4 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 both national and state levels, will be crucial if FSM is to improve negative statistics on literacy, health, substance abuse, suicide, teen pregnancy and many other factors undermining social cohesion, not to mention the economy.

10.5.5 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

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alongside other services to provide the most effective response to women and girls subjected to violence. Sector policies link with a national policy and with achieving the national action plan (Op cit). All policies, whether related to family violence or other areas, need to be gender sensitive and take into account the different impacts of the policy issue on women and men. Policies are known to fail for not taking this measure.

10.5.6 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).

FSM’s management information systems appear to be lacking in breadth of data collection, both at the national and state levels. Technical support is being provided through development partners, but more is required. Training of specialised monitoring and evaluation staff results in rich information that informs effectiveness and efficiency in programming and contributes to meeting reporting obligations at the regional and internal level.

10.5.7 Recommendations for EVAW fundamental elements: FSM government
- Form a National Justice Sector Committee to lead on providing the legal framework to eliminate discrimination, contribute to the achievement of the Strategic Development Plan 2004-2023 and ultimately strengthen FSM’s economy.
- Pursue development partner technical support to:
  - assess and make recommendations on Constitutional changes for reducing the amount of time spent by Congress on financial allocation processes, 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.
- Develop five-year plans and pursue development partner technical support for:
  - training and workforce development, at both national and state levels, to improve negative statistics on literacy, health, substance abuse, suicide, teen pregnancy and many other factors undermining social cohesion, not to mention the economy;
  - improving all national and state management information systems, especially to accommodate the collection of disaggregated EVAW data;
  - providing 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 limited to the congressional process.
11 References


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### Annex 1  List of People Consulted

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<thead>
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Annex 2  Expanded Glossary

Adapted from UN Women et al, 2015:9-11

Coordination is a central element of the response to violence against women and girls. It is required by international standards that aim at ensuring that the response to violence against women and girls is comprehensive, multidisciplinary, coordinated, systematic and sustained. It is a process that is governed by laws and policies. It involves a collaborative effort by multi-disciplinary teams and personnel and institutions from all relevant sectors to implement laws, policies, protocols and agreements and communication and collaboration to prevent and respond to violence against women and girls.

Core elements are features or components of the essential services that apply in any context, and ensure the effective functioning of the service.

Essential Services encompass a core set of services provided by the health care, social service, police and justice sectors. The services must, at a minimum, secure the rights, safety and well-being of any woman or girl who experiences gender-based violence.

Formal justice systems are justice systems that are the responsibility of the State and its agents. They include government supported laws, and institutions such as police, prosecution services, courts, and prisons that have the responsibility to enforce and apply the laws of the State and to administer the sanctions imposed for violations of laws.

Gender based violence is ‘any act of violence that is directed against a woman because she is a woman or that affects women disproportionately’.  

Governance of coordination has two major components. The first component is the creation of laws and policies required to implement and support the coordination of Essential Services to eliminate or respond to violence against women and girls. The second component is the process of holding stakeholders accountable for carrying out their obligations in their coordinated response to violence against women and girls and ongoing oversight, monitoring and evaluation of their coordinated response. Governance is carried out at both the national and local levels.

Health system refers to (i) all activities whose primary purpose is to promote, restore and/or maintain health; (ii) the people, institutions and resources, arranged together in accordance with established policies, to improve the health of the population they serve.

Health care provider is an individual or an organisation that provides health-care services in a systematic way. An individual health-care provider may be a healthcare professional, a community health worker; or any other person who is trained and knowledgeable in health. Organisations include hospitals, clinics, primary care centres and other service delivery points. Primary health care providers are nurses, midwives, doctors or others.

Intimate partner violence is ‘the most common form of violence experienced by women globally . . . and includes a range of sexually, psychologically and physically coercive acts used against adult and adolescent women by a current or former intimate partner, without her consent. Physical violence involves intentionally using physical force, strength or a weapon to harm or injure the woman. Sexual violence includes abusive sexual contact, making a woman engage in a sexual act without her consent, and attempted or completed sex acts with a woman who is ill, disabled, under pressure or under the influence of alcohol or other drugs. Psychological violence includes controlling or isolating

35 CEDAW, General Recommendation No. 19, para 6.
the woman, and humiliating or embarrassing her. Economic violence includes denying a woman access to and control over basic resources.footnote{38}

Justice service provider includes State/government officials, judges, prosecutors, police, legal aid, court administrators, lawyers, paralegals, and victim support/social services staff.

The Justice continuum extends from a victim/survivor’s entry into the system until the matter is concluded. A woman’s journey will vary, depending on her needs. She may pursue a variety of justice options, ranging from reporting or making a complaint which initiates a criminal investigation and prosecution or seeking protection, and/or pursuing civil claims including divorce and child custody actions and/or compensation for personal or other damages, including from State administrative schemes, concurrently or over time.

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. These teams are focused on ensuring an effective response to individual cases and may contribute to policy making.

Non-partner sexual violence ‘refers to violence by a relative, friend, acquaintance, neighbour, work colleague or stranger’footnote{39}. It includes being forced to perform any unwanted sexual act, sexual harassment and violence perpetrated against women and girls frequently by an offender known to them, including in public spaces, at school, in the workplace and in the community.

Quality guidelines support the delivery and implementation of the core elements of essential services to ensure that they are effective, and of sufficient quality to address the needs of women and girls. Quality guidelines provide ‘the how to’ for services to be delivered within a human rights-based, culturally-sensitive and women's-empowerment approach. They are based on and complement international standards and reflect recognised best practices in responding to gender-based violence.

The social services sector provides a range of support services to improve the general well-being and empowerment to a specific population in society. They may be general in nature or provide more targeted responses to a specific issue; for example, responding to women and girls experiencing violence. Social services for women and girls who have experienced violence includes services provided by, or funded by government (and therefore known as public services) or provided by other civil society and community actors, including non-governmental organisations and faith-based organisations.

Social services responding to violence against women and girls are specifically focused on victims/survivors of violence. They are imperative for assisting women’s recovery from violence, their empowerment and preventing the reoccurrence of violence and, in some instances, work with particular parts of society or the community to change the attitudes and perceptions of violence. They include, but are not limited to, providing psychosocial counselling, financial support, crisis information, safe accommodation, legal and advocacy services, housing and employment support and others, to women and girls who experience violence.

Stakeholders are all government and civil society organisations and agencies that have a role in responding to violence against women and girls at all levels of government and civil society. Key stakeholders include victims and survivors and their representatives, social services, health care sector, legal aid providers, police, prosecutors, judges, child protection agencies, and the education sector, among others.

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footnote{38} UN Secretary-General’s Study, supra note 1, para 111-112.

footnote{39} Ibid. at para 128.
Victim / survivor refers to women and girls who have experienced or are experiencing gender-based violence to reflect both the terminology used in the legal process and the agency of these women and girls in seeking essential services.\footnote{UN Secretary-General’s Study, supra note 1, notes the ongoing debate the terms victim and survivor. Some suggest that ‘the term ‘victim’ should be avoided because it implies passivity, weakness and inherent vulnerability and fails to recognise the reality of women’s resilience and agency. For others the term ‘survivor’ is problematic because it denies the sense of victimisation experienced by women who have been the target of violent crime’. Therefore, these guidelines use the term ‘victim/survivor’.}

Violence against women (VAW) means ‘any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.’\footnote{Declaration on the Elimination of Violence Against Women, Article 1.}
Annex 3  2014 Family Health and Safety Study Summary

Cases of violence against women and children (VAWC) are mostly either unreported or underreported and the reasons are complex. There is a cultural belief that VAWC issues should be dealt with within the family to avoid shame, along with a lack of legal literacy, lack of access to support services and lack of trust in the law and justice system.

The Family Health and Safety Study (FHSS) sought to document the prevalence of violence against women and girls, both in the home and in the community. The study sought to understand attitudes towards family and sexual violence and what factors impacted on levels of family and sexual violence.

Following are some of the major findings of the Family Health and Safety Study (FHSS).

Snapshot: 2014 Family Health and Safety Study
- Almost one in three ever-partnered women in the FSM (32.8%) have experienced physical and/or sexual violence by a partner at least once in their life.
- Nearly one in four ever-partnered women (24.1%) experienced physical and/or sexual violence by a partner in the 12 months preceding the interview.
- Nearly one in three (33%) of ever-partnered women have experienced emotional violence by a partner in their lifetime and 24.6% have experienced it in the 12 months preceding the interview. The prevalence of emotional partner violence was generally higher in Chuuk.
- Almost 15% of ever-partnered women reported being economically abused by a partner either by refusing to give them money for household expenses or by taking away earnings or savings.
- 6.3% of ever-pregnant women experienced physical partner violence in pregnancy and in almost half of the cases women were punched in the abdomen.
- Slightly over 18% of ever-partnered women have experienced sexual violence by a partner in their lifetime and the most common act of sexual violence was being forced to have sexual intercourse.
- More than one in three ever-abused women (35%) never told anyone about the violence. Those who did disclose it mostly confided in family members and friends.
- 89% of ever-abused women never went to formal services or authorities, such as health centres or police, for support.
- The most common reason for not seeking support from formal services or authorities was that respondents thought the violence was normal or not serious. The most common reason for seeking support was the severity of the violence.
- About 14% of all interviewed women experienced sexual abuse in childhood (before age 15) and the most common perpetrators were male relatives and male friends.


The overall result masks state variations. Chuuk (49.9%) and Kosrae (57.8%) reported the highest rates of lifetime prevalence and Pohnpei (18.9%) and Yap (27.0%) reported the lowest (FSM Department of Health and Social Affairs, 2014:40). It must be taken into account that not all of the outer islands in each state were surveyed, mostly due to logistical difficulties—generally outer islands tend to have higher incidences of family violence due to more extreme conditions. Location emerged as a significant factor associated with the risk of experiencing partner violence in a lifetime (Ibid:68).

Other factors included age, sexual abuse as a child and attitudes to dealing with partner violence (Ibid:68-69).

Of particular concern with the findings is that at least one in ten women experienced sexual abuse before the age of 15 years and the perpetrators were often male relatives, those who a child should be able to trust. The prevalence of child sexual abuse was statistically different across states and
across age groups: Kosrae (21.9%) followed by Chuuk (16.9%), Yap (14.7%), and Pohnpei (10.7%) (Ibid:48). The most commonly reported perpetrators of child sexual abuse were male family members (48%), primarily relatives other than fathers/stepfathers (Ibid:49). Although young girls were believed to be the victims of child sexual abuse most often, examples were also provided of boys being abused both by male and female family members (Op cit). The consequences of sexual abuse at any age are serious but particularly for the young and are known to contribute to unhealthy risk-taking behaviour and at times even suicide.

Family violence is intergenerational in FSM and the FHSS shows that it is self-perpetuating. The FHSS found that women who experienced partner violence were more likely to report that their mother was abused by a partner, that their partner’s mother experienced partner violence, and that their partner experienced physical abuse in childhood (FSM Department of Health and Social Affairs, 2014:11). This destructive cycle will continue unless there is national intervention.

Participants indicated that sexual violence against women happens regularly and in public spaces as much as in private spaces. The most common private space mentioned was ‘home/household’ and the most common public space was ‘public events/outdoor public location’. Some female participants indicated that it often happens in the ‘taro patch where women and girls are usually at,’ while others mentioned sexual violence against women happens ‘everywhere’ and ‘within the family’ (FSM Department of Health and Social Affairs, 2014:48).

These findings combined with the low level of reporting indicate a high societal tolerance of family and sexual violence. Zero tolerance should be the aim and community awareness raising is just one mechanism to achieve zero tolerance. Leadership is also required, at the political level, from traditional leaders, from church leaders and from women and men community leaders. Family and sexual violence is suffered by women and children in society as if it is their problem; they who have the weakest voice and the least representation at the political level. Perhaps it is time for those with the strongest voice and the most political representation to take a stand.

As the head of UN Women said in a recent speech, casual indifference has to stop. Changing the response to acts of physical and sexual aggression and acting in solidarity to make it visible and unacceptable is what is required. ‘Good men should not be quiet spectators.’

Annex 4 Especially Vulnerable Populations

The FHSS did not disaggregate for disabilities, nor did it capture violence against homosexual and transgendered populations and female sex workers. Other studies are drawn on here.

Disability

Regional observations are that women with disabilities are most likely to be abused, including sexual abuse, by someone they know, often in a position of authority and trust, such as a care giver (PDF, 2014:87). Women with disabilities are less likely to disclose violence or abuse, sometimes due to communication problems or increased isolation as a result of their disability (PDF, 2014:87). Women with disabilities experience multiple and intersecting forms of discrimination which increases their vulnerability to many different forms of violence and requires unique attention when addressing family and sexual violence (PDF, 2014:88). Currently there are no specific services in FSM to support women and girls with disabilities at risk of family and sexual violence.

The 2010 Census estimated the total disability population at 11% (11,363). Of those, 52% reported one disability and 48% reported two or more (SBOC 2012:10). The Yap disability population was above the national average at 16.9% but the other states hovered around the average (SBOC 2012:6). Data was not disaggregated.

FSM is ahead of much of the Pacific when it comes to disability support. In 2009, FSM adopted a National Policy on Disability 2009–2016 to increase awareness and inclusion of people with disabilities. Women with disabilities are a targeted priority area. The policy is under revision, with support from the Pacific Disability Forum and other regional agencies and, while there have been few achievements so far, the objective of ratification of the Convention on the Rights of Persons with Disabilities (CRPD) was realised in 2016.

The disability policy identifies particular barriers for women and girls with disabilities as being more likely to experience poverty, than boys and men with disabilities, and to face discrimination within the family. Further, it acknowledges greater exposure to the risk of physical and sexual abuse and inadequate sexual health and reproductive rights advice. The policy aims to ensure equal access to health care, education, vocational training, employment and income generation opportunities, and to be included in social and community activities (GoFSM 2009:10).

There is an FSM Forum for Persons with Disabilities that includes representatives from various national and state government departments and state consumer groups such as the Chuuk Parents of Special Children Association and the Pohnpei Consumer Organisation.43

Children with disabilities have a legislated right to special care, education and training up to the age of 21 years. Special programs for children with disabilities are supported entirely by US federal funds along very similar lines to programs operating in the USA. Two grants have been accepted by Congress for FY18, one for $853,081 (CR 20-28) and another for $3,032,657 (CR 20-63).

Included is special preschool and school classes; transition programs between the home, school and work; training for parents and other care-givers; and related services such as speech or physical therapy and vocational guidance (UNICEF 2013b:48). Again, service quality can be an issue. A social indicators survey in 2011, reported that less than 50% of families caring for children with disabilities indicated that community-based service systems were well-organised for ease of access (UNICEF 2013b:50).

Pohnpei Consumer Organisation (PCO) is the only disabled persons organisation that engages with national and state governments on support for people with disabilities. The organisation has a

43http://www.aahd.us/2012/03/micronesia-health-disability-programs/
membership of over 600 consumers, parents and family members with roughly 40% female membership. The five-member Board has one woman.

In 2010 PCO assisted with the establishment of Pohnpei Women with Disabilities but due to lack of funding the group merged with PCO after a year. There is currently no specific advocacy program on the intersection of family and sexual violence against women and girls, and disability. PCO would like women’s groups to be more inclusive of women with disabilities, especially in committee roles, and join with PCO on advocating for women and disability issues.

During consultations, PCO reported gaps in areas of availability, affordability and accessibility. There are no sign language services available at hospitals and no appropriate transportation services to get to service providers. Mental health services are also lacking as is psychosocial support. Similarly, there are no sign language services at police stations and people with disabilities feel particularly intimidated when engaging with police, feeling that they are not treated as human beings. An incident was recounted of two teenage disabled girls who were beaten up by a police officer. PCO intends to provide police training. In relation to courts, people with disabilities are usually not accepted as credible witnesses if they report a crime and there are no sign language services. Similarly, the education system does not offer support with sign language interpretation or braille for disabled students. Concern was also expressed over sexual assault in the workplace of women with disabilities who are not able to protect or defend themselves.

PCO is currently advocating for a separate disability division in the National Department of Health and Social Affairs to establish and support disabled persons organisations in all states. The Health and Social Affairs Standing Committee Report No 20-19 on the FY2018 budget, considered the proposal for a new Disability and Ageing Support Services Unit, with funding for a Support Coordinator salary. The Committee rejected the proposal on the basis that disability and ageing support work is mostly done at the state and municipal level, so the existing DHSA departments should divide any additional reporting requirements. The decision may prove to be short sighted when the first progress report to the UN Committee on the Rights of Persons with Disabilities (CRPD) is due in 2018.

As a result of ratification, FSM has an obligation to put in place effective legislation and policies, including women- and child-focused legislation and policies, to ensure that instances of exploitation, violence and abuse against persons with disabilities are identified, investigated and, where appropriate, prosecuted. This work will require coordination with other essential services, especially justice and policing, and with the states. Both an implementation budget and a desk officer are required to make progress and to monitor and report progress.

SPC-RRRT is currently providing technical support to PCO to develop a national implementation plan for CRPD. The implementation plan will form the basis of a proposal to government for budget allocations over the next five years. Donors may be willing to assist once government demonstrates priority by funding the coordination mechanism within DHSA. State governments need to follow suit and ensure there is a disability desk officer and an adequate budget to achieve the Convention.

Additional information on PCO appears in Section 2 – Pohnpei State.

Lesbian, Gay, Bisexual and Transgender Populations

Although homosexuality is not criminalised, there are no laws prohibiting discrimination against people based on their sexual orientation or gender identity (UNDP, 2016:14). As at 2016, it was reported that there is no information available on the transgender population in FSM (Op cit). Sex work is illegal in Chuuk and Pohnpei, but not in Yap and Kosrae (UNDP, 2016:15).

A much smaller study carried out in FSM in 2016 by UNDP and others, found that most transgender interviewees had been physically and sexually assaulted by family members or boyfriends. Sixty nine

percent of survey respondents reported being sexually assaulted in the preceding 12 months (UNDP, 2016:11). The interviewees felt they faced violence from others for not fulfilling the masculine roles expected of them (UNDP, 2016:64).

The Chuuk Council of Women has been managing an ‘HIV and STI Risk Vulnerability among Key Populations’ project for most of 2017 with funding from UNDP. One of those Key Populations is Men who have Sex with Men and Transgender (MSM-TG). Project funding has recently been extended until 2020. The project is coordinated on a half-time basis by a health worker (a former CWC volunteer) with experience in peer education who is trained as an HIV/STI counsellor, drug and alcohol counsellor and clinical counsellor. There are currently 15 MSM-TG in the group, ranging in age from 13 years to 54 years. So far, the project has worked on raising awareness with MSM-TG on avoiding risky behaviour and building self-esteem, condom distribution, and family and community acceptance to break down stigma and discrimination. The coordinator is aware of five abuse cases. Project participants are told that if they experience abuse to come to CWC first and the coordinator will support the participant to access medical or police services. Generally, participants are scared of the police and do not want their families to find out. The next phase of the project will involve peer educator training for willing participants. Then peer educators will be given training in developing IEC materials and a program of outreach will follow to the lagoon communities and outer islands. Awareness raising will be extended to school counsellors and sex educators on support services for MSM-TG. The coordinator suggested that a referral network is required for Key Populations separate to an EVAW network.

There is no similar project in Pohnpei nor elsewhere in FSM but there is in Palau, PNG and other parts of the Pacific.

**Sex Workers**

Women sex workers interviewed for the same UNDP study in FSM reported stories of rape and abuse, often by family members and occasionally clients. All but one of these assaults had gone unreported due to threats made by the abusers. In some cases, the women said that after being raped by family members, earlier in life, they felt worthless and unmarriageable and this led them into sex work (UNDP, 2016:68).

There is still a tendency to deny the existence of sex workers in FSM but the ‘HIV and STI Risk Vulnerability among Key Populations’ project being run by CWC, also focuses on sex workers. So far, 93 sex workers from across all Chuuk islands are involved in the program. Ages range from 13 to 45 years old. The coordinator has heard from participants of several rape cases, including one by a stepfather, one by a church leader and a pack rape. All were reported to police but there have not been any arrests or prosecutions to date. In one case the report was said to have gone missing at the police station.

In the next phase of the project, 60 sex workers will be trained as peer educators and in the design of IEC materials, and will then play a role in outreach to lagoon communities and outer islands on how to stay safe and how to access support services.

Gaps in services were identified as mental health support for rape victims, additional drug and alcohol counselling support and separate clinical health services for sex workers and MSM-TG—a model exists in PNG. Para-legal support was also considered useful to assist sex workers to access their legal rights.

**Anti-trafficking legislation**

Human trafficking has a much higher profile in FSM than family and sexual violence against women and children, especially when comparing the proportions of the population affected. In 2016, the government reported conducting investigations into eight alleged trafficking cases in Chuuk, Pohnpei, and Yap, compared to five in 2015 and two in 2014 (Department of State, 2017:282). The FHSS
found one in four ever-partnered women experienced physical and/or sexual violence by a partner in the 12 months preceding the interview (FSM Department of Health and Social Affairs, 2014:10).

FSM has a national policy on human trafficking supported by anti-trafficking legislation at the national level and in all states. Two states have approved state-level action plans to implement the FSM National Action Plan and the government created an anti-trafficking coordinator position to oversee government anti-trafficking work (Department of State, 2017:282). There is a designated National Anti-Human Trafficking Day as part of the national campaign against human trafficking.

A US State Department report identified the groups most vulnerable to trafficking in FSM to include foreign migrant workers, especially from the Philippines, and Micronesian women in prostitution. Women and girls are allegedly exploited in prostitution--child sex trafficking for girls--by crew members of docked Asian fishing vessels and by foreign construction workers (Department of State, 2017:283). There are anecdotal reports that taxi drivers are complicit.

Recommendations by the US State Department to the FSM Government were to increase efforts to investigate, prosecute, and convict trafficking offenders, and sentence them to penalties commensurate with the seriousness of the crime, and cease the practice of allowing offenders to pay fines or restitution in lieu of being sentenced to prison; develop and implement procedures for the proactive identification of trafficking victims among vulnerable populations, including in the legal commercial sex industry; develop and implement a victim referral system and establish and allocate funding for specialised protective services for trafficking victims, including shelters (Department of State, 2017:282). The recommendations are relevant for family and sexual violence also and that may have led to multi-agency human trafficking task forces being established in both Chuuk and Pohnpei, headed by Attorney Generals' Offices, that gradually expanded their brief to include deliberations on addressing family violence. The Chuuk Attorney General’s Office is including in future planning the establishment of a shelter for victims of both trafficking and family and sexual violence. While the efficacy of having only one shelter is clear, the concept needs to be worked through so that different types of psychosocial support and other essential services are made available.

Both state task forces were receiving funding and technical support from IOM until 2016 but once the funding ended, the technical support decreased, and the task forces ceased regular meetings. There is a lack of available documentation on what the task forces achieved as a result of their meetings.

A 2016 high-profile prosecution for human trafficking, including for forced prostitution, 45 and a 2017 case involving the prostitution of minors 46 demonstrates that sexual abuse has a variety of forms that sometimes overlap with family and sexual violence and other crimes, such as child abuse and living off the earnings of prostitution. A case earlier in the year in Pohnpei, involving underage girls being trafficked by their parents, was dismissed when the girls denied ever being sold for sex by their parents. Charges against a perpetrator were also dismissed. The presiding judge obligated the underage girls to give evidence, in person, in the court room in front of their parents, the accused. As a result, the children were returned to the custody of the parents. Another case went for sentencing in Chuuk during the field visit. The perpetrator was sentenced to 15-months jail, which disappointed advocates and the community at large.

Not only does sentencing need to reflect the crime, as recommended by the State Department, but operating procedures need to be put in place for judges, on the elements that make a case trafficking or child abuse or family and sexual violence or any other type of crime, and which law a case should be tried under. Of most importance, is that perpetrators do not walk away unpunished and free to continue their criminal behaviour.

The CEDAW Committee made similar recommendations as the State Department, including addressing the root causes of trafficking and exploitation of prostitution, such as poverty, and by reducing the demand for prostitution and developing alternative employment opportunities for women who wish to leave prostitution (CEDAW, 2017:9).

Awareness raising on trafficking laws and FSV laws needs to include the taxi industry. The tourism sector is also an important target group due to international evidence\(^\text{47}\) on the links between tourism and sexual exploitation.

Annex 5   Summary of CEDAW Observations

FSM acceded to the UN Convention on the Elimination of all forms of Discrimination Against Women (CEDAW) in 2004 and submitted its first report to the CEDAW Committee in 2015. A high-level delegation appeared before the Committee in Geneva in February 2017 and the Committee’s concluding observations were released in March 2017. Many of the observations have implications for the states; however, the Attorney Generals Offices were met with in both Pohnpei and Chuuk and neither of those offices was aware that FSM had reported, let alone that an observations report had been released, which will be followed up on by the Committee in two-years’ time. Copies of the observation report were later provided by email.

The CEDAW Committee welcomed the Maternity Leave Act (Public Law No 16-15), the Trafficking in Persons Act (2012) (Public Law 17-38) and the corresponding trafficking laws adopted by the states in 2013. It also welcomed ratification of the Convention on the Rights of Persons with Disabilities (2016) and various Optional Protocols for the Convention on the Rights of the Child and trafficking. The National Strategic Development Plan (2004-2023) was acknowledged, especially the gender equality issues and steps to address them (CEDAW, 2017:2). Then, in stressing the crucial role of the legislative power in implementation of the Convention, it invited the National Congress and the four state parliaments to take necessary steps to implement the concluding observations before the next reporting period (Op cit).

A number of recommendations followed; however, this report will focus only on those related to violence against women and girls.

FSM’s delegation to the meeting highlighted gender violence as a very important challenge facing the country. Results from the 2014 Family Health and Safety Study were reported including that one in three women had experienced physical or sexual violence and one in four had experienced intimate partner violence during the 12 months preceding the survey. 48 A Committee Expert proposed that patriarchal traditions and attitudes could be at the root of some of the challenges. 49

The Committee recommended giving central importance to the Convention as the basis for elimination of all forms of discrimination against women and for the achievement of gender equality. Full incorporation into the national legal system was recommended including all laws, court decisions and policies on gender equality and the advancement of women. Wide dissemination of the Convention and Optional Protocols among public officials and the general public, including in remote areas, was also recommended along with professional training on the Convention and the Committee’s recommendations for all branches of government, the parliament and the judiciary (CEDAW, 2017:3). The Gender Development Unit of the National Department of Health and Social Affairs is about to commence a one-year program of awareness raising on the Convention, with support from a Canada Fund grant. A useful next step would be to provide induction to all new civil service staff on CEDAW and other international and regional obligations, ideally within the first month of commencement. In the absence of a Public Service Commission, induction could be provided by the National Department of Health and Social Affairs and the state equivalents.

The Committee expressed concern that neither the national or state constitutions define discrimination in line with Article 1 of the Convention and there is no specific anti-discrimination legislation (Op cit). There was also concern on the legal status of customary law and discriminatory provisions in legislation in relation to gender-based violence against women. The Committee recommended that mechanisms and institutions are put in place to review, monitor and evaluate compliance with the Convention obligations and pointed out that these actions would contribute to target 5.1 of the Sustainable Development Goals. A definition of discrimination should be incorporated without delay into the national Constitution, and other appropriate legislation and mechanisms should

be established to promote equality and ensure remedies to women victims of discrimination. All legislation should be amended or repealed and all laws, including statutory and customary laws, should be harmonised with international human rights standards. The Committee expressed concern at the slow progress in adopting these reforms to date and called for a clear time frame and deadlines for achieving compliance with the Convention and the Committee’s recommendations. It also encouraged the FSM Government to generate political will to undertake the reforms (CEDAW, 2017:4).

Specific to gender-based violence against women, the Committee commended Kosrae State for enacting the Family Protection Act (2014) and Chuuk State for enacting legislation to raise the age of sexual consent from 13 to 18 years (CEDAW, 2017:7). It expressed concern about the lack of protection and victim safety legislation, and legal gaps and inconsistencies; the corroboration requirement in the prosecution of cases of rape and sexual violence; widespread gender-based violence against women, particularly domestic violence, and high levels of social acceptance of such violence; the lack of prosecutions and convictions of perpetrators; women's reluctance to report due to fear of social stigma; discriminatory evidence requirements; and customary practices of forgiveness and reconciliation over prosecution by the courts. Lastly, on this topic, the Committee expressed concern about the unavailability of appropriate shelters or services, including medical treatment, psychological counselling and legal assistance.

Many other observations and recommendations were made in areas such as justice, health, economic empowerment and political empowerment. These will be reported in relevant sections of this assessment.

FSM ratified the Convention on the Rights of the Child (CRC) in 1993 and the Convention on the Rights of Persons with Disabilities (CRPD) in 2016. One report to the CRC Committee was submitted in 1997 and the second report was completed in October 2017, ready for Presidential approval prior to submission. The SPC-RRRT Country Focal Officer (CFO) has played an integral role in CEDAW and CRC reporting and is working with the FSM Government to prepare an initial mapping for the CEDAW Observations. The CFO also assisted government to prepare an implementation plan for CRPD, which included consulting widely with communities in the four states.
Annex 6  Summary of International Agencies EVAW Activities

Amongst the UN agencies active in FSM are the World Health Organisation (WHO), UNFPA, UNICEF and to a limited extent UN Women. The International Organisation for Migration (IOM), the inter-governmental organisation in the field of migration, has a lengthy presence in FSM. While there are international NGOs (INGOs) working in conservation areas, there are no INGOs working in the social sectors. Micronesian Legal Service Corp (MLSC) is a regional non-government organisation active in Pohnpei and Chuuk. The Australian Federal Police have been providing assistance on strengthening police practices for some years and the Pacific Prevention of Domestic Violence Program (PPDVP) has also actively supported police strengthening in the past, though is not as active in recent times. Australian Volunteers International is investigating ways to focus on EVAW. A brief summary of activities follows.

World Health Organisation (WHO)

Family violence does not directly feature in WHO’s work in FSM; however, the organisation has recently assisted the Pohnpei State Department of Health to complete a rapid assessment of dispensary services, including for family violence and rape. The same assessment is planned for Chuuk in 2018 and other states in due course.

WHO has four priority areas in its agenda for 2013–2017. They are: Develop policies, strategies and action plans to address NCDs, particularly the WHO Package of Essential NCDs Interventions (PEN), food security and WHO Framework Convention on Tobacco Control, promote mental health, reduce road traffic accidents and other injuries, and mitigate the impact of permanent disabilities; Improve capacity to address vaccine-preventable diseases, prevent and control leprosy, implement and monitor tuberculosis case-finding, and enhance implementation of surveillance and monitoring of all communicable diseases of public health importance; Strengthen management, planning and interagency collaboration for environmental health, water and sanitation, develop and implement multisectoral state policies, plans of action, strategies and regulations on food security, including nutrition and food safety, and on climate change; Develop the health workforce by increasing the pool of prospective health workers, improve the skills and acceptance of current workforce skill mix and distribution, and increase the pool of prospective health workers through supporting the education and training of health workers, as well as in workforce management in collaboration with key stakeholders such as professional associations. Ideally, these priorities will be carried over into the next Agenda as there is still a lot of work to be done.

United Nations Population Fund (UNFPA)

UNFPA has developed a five-year plan for the 14 Pacific Islands Forum countries supporting health systems to respond to violence against women. The immediate focus is on resource mobilisation and once a budget has been established, possibly in the first quarter of 2018, UNFPA will work with DHSA and hospitals to roll out the program.

In 2013, UNFPA assisted the Chuuk education department, with assistance from the health department, to develop a Health and Family Life Education (HFLE) curriculum to be delivered to pupils from Elementary Grades 5 to 8 but the curriculum is still in draft form and has not yet been offered to schools. Changes in leadership at the department have resulted in the HFLE curriculum being shelved. Also, there is a need for teacher lesson plans to be developed and for teacher training on how to deliver the curriculum. Topics covered include: identity, relationship and development; growth, food and nutrition; risk and safety; issues and health promotion strategies; mental health and violence; and personal hygiene. The purpose of developing the curriculum was to address the high prevalence of teenage pregnancies, drugs and substance abuse, violence and bullying, NCDs,

http://apps.who.int/iris/bitstream/10665/136945/1/ccsbrief_fsm_en.pdf
truancy and deteriorating personal hygiene practices among young children and youths in Chuuk. The values reflected in the curriculum are based on the Chuukese culture, the extended family unit, love and respect for one another and honouring the hierarchy of customary and formal leadership systems. The curriculum has the potential to positively impact on reducing family and sexual violence including consequences such as risky behaviour and suicide, developing leadership skills, sexual and reproductive health, and healthy lifestyle choices. It is easy to see how mainstreaming HFLE in schools will contribute to addressing the many social ills that undermine Chuukese society. Once piloted in Chuuk, the curriculum could be rolled out to the other three states as a low-cost intervention to strengthening the social fabric of FSM.

New emphasis is required to take the curriculum to the next stage, finalise it, develop lesson plans and train teachers on delivering the curriculum. The Chuuk Department of Education, with assistance from the Department of Health and UNFPA need to prioritise mainstreaming the HFLE curriculum as a pilot for delivery in all four states.

United Nations Children’s Fund (UNICEF)

Generally speaking, UNICEF’s work in FSM supports the implementation of the Convention on the Rights of the Child (CRC). This includes support for education departments, health departments, the justice sector and prevention of violence against children. In 2014, UNICEF conducted a review of progress on CRC indicators, called ‘Protect Me with Love and Care: A Summary of Key Findings: Federated States of Micronesia Child Protection Baseline Report’. The report found that FSM has legislation on child abuse and neglect but legislation dealing with sexual offences against children only exists under general provisions of the States’ Criminal Code related to sexual offences. There was a Presidential National Advisory Council on Children, a CRC Unit in the Department of Health and Social Affairs, a registry for tracking abuse cases, Special Education Programs within the Departments of Education, the early childhood education program at the College of Micronesia, a Counselling Certificate Program and an Association of Counsellors. Missing was an integrated and comprehensive national policy on child protection. Also, the judiciary’s capacity to protect children was limited due to a lack of resources, and lack of required infrastructures and facilities. Most police have not received any training that was specifically on children.

International Organisation for Migration (IOM)

Until 2016, IOM had been delivering a human trafficking program in FSM but discontinued when funding dried up. Human trafficking referral networks were established in Pohnpei and Chuuk and appear to have functioned well until the program closed down. No documents were available to examine the work of network. The referral networks were multi-disciplinary across the law and justice sector and included CSOs, such as the Chuuk Council of Women and Chuuk Youth Council.

IOM’s main focus now is on Disaster Mitigation, Relief and Reconstruction Programme with funding from the US Agency for International Development (USAID) and Climate Adaptation, Disaster Risk Reduction, and Education (CADRE) Programme funded by Australian Aid. This program will target approximately 10,000 school-aged students at up to 50 schools and surrounding communities.

An IOM representative advised that EVAW is a component of the CADRE work. Extra efforts are being made to increase the participation of women in meetings. After a typhoon in 2015, IOM heard many anecdotal reports of an increase in family violence. Funding has been obtained from the Canada Fund to do a study on the post-emergency health and safety of women and girls. It was also advised that IOM had at one time tried to establish a shelter for victims of family violence and trafficking, but it had not worked out.

52 https://www.iom.int/countries/federated-states-micronesia
Micronesian Legal Service Corp (MLSC)

The Micronesian Legal Service Corp (MLSC) is a not-for-profit regional organisation headquartered in Saipan. MLSC offers a free legal aid service, funded through the US. Representatives from both the Pohnpei and Chuuk offices were met with for the consultation.

MLSC’s Annual Report for 2017 provides information resulting from an annual community needs assessment. The report summarises the main recurring and persistent needs as: matters of domestic violence; human trafficking; land; civil rights; typhoons; outmigration and immigration; name change, adoption, probate, divorce, and other family matters; employment; social security and other benefits; consumer and collection; health and health care; and access to education. Those who are considered to need assistance most are those who are subject to abuse: victims of domestic violence; women; children; elders; persons who are abused for labour or sex; migrants; persons with disabilities; and others whose status puts them at a disadvantage.

Pohnpei

MLSC has noticed an increase in women seeking protection orders because of physical violence. Police are not able to issue protection orders, only the court can, so police refer clients to MLSC. The suggestion of establishing a formal referral network was considered to be useful.

A gap area was identified as the lack of a transition house for clients experiencing family violence, which results in the client returning to the violent situation. Issues around securing a safe house were acknowledged. The need for a law to be in place was emphasised. The lack of counselling services was also cited as a gap area, as was the social acceptability of family violence, victims being advised by others to deal with it and not report it, and protections provided to perpetrators by family, friends and traditional leaders.

Substance abuse was considered to be less of a trigger than jealousy, especially since the gradual reduction in the number of alcohol bars since the 1960s. Abuse of sakau was acknowledged as a trigger, in relation to depleting household income, but this was considered to be minor.

No incest cases or teen pregnancy cases had come to MLSC, but it was considered that these were more likely to be reported to the Public Defender. It was estimated that there are at least six perpetrators of incest in prison at present.

Chuuk

The MLSC office 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 in Chuuk. 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.

53 https://drive.google.com/file/d/0B2iE7YCRtFwWUpoMFpvbUR3YVU/view
54 Ibid
55 Sakau is a drink known in other parts of the Pacific as kava. The plant (Piper methysticum) is a member of the pepper family and has been grown on Pohnpei for many generations. It is pulped and mixed with water to create an almost-narcotic effect.
Case numbers for both offices were requested from the regional office in Saipan but so far, no information has been provided. It is possible that the increase in demand from victims of family violence since 2014, experienced in the Pohnpei office, is the result of awareness raising over the Family Health and Safety Study.

**Australian Federal Police Support**

FSM is one of seven countries where the Pacific Police Development Program-Regional (PPDP-R) is delivered by 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.⁵⁶

In April 2017, AFP supported the Guam Police Department to host a work study program for domestic assault. This was one of a series of regional trainings held in Guam with support from AFP. The workshop involved learning about the policies and procedures of: the Guam Police Domestic Assault Response Team (DART); their victim assistant; and the other organisations with whom they work in responding to domestic violence. Participants were from Pohnpei, Chuuk, Palau and RMI. At the end of the workshop, participants had completed plans for police/NGO joint community presentations on domestic violence legislation, amongst other areas of follow up.

AFP, and in the past PPDVP, have support Pohnpei and Chuuk police forces with training, database development, record keeping and case management. This assessment found that the results were short-lived and ongoing support is required to make permanent improvements.

**Australian Volunteers International (AVI)**

AVI is becoming increasingly active in the EVAW space. Recruitment is underway for a policy specialist to be assigned to the national DHSA office. Two positions are being recruited for Chuuk State: one to work with police and one to work with Chuuk Council of Women. Consideration is being given to recruiting a volunteer for each state, to work on EVAW issues.