



Spotlight Initiative



REGIONAL WORKING GROUP ON THE IMPLEMENTATION OF FAMILY PROTECTION/ DOMESTIC VIOLENCE LEGISLATION



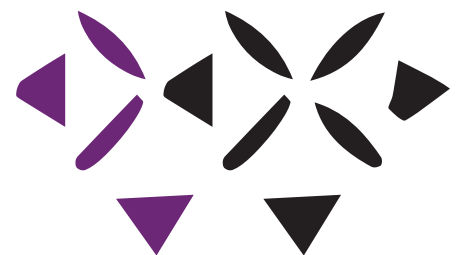
Pacific Community
Communauté du Pacifique

PROCEEDINGS OF THE 2nd ANNUAL MEETING OF THE REGIONAL WORKING GROUP ON THE IMPLEMENTATION OF THE FAMILY PROTECTION/DOMESTIC VIOLENCE LEGISLATION (RWG)



24 - 26 August, 2021

23 - 25 August, 2021 (Cook Islands)





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THE FAMILY PROTECTION/DOMESTIC
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IMPLEMENTATION OF
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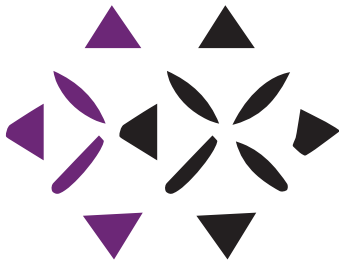


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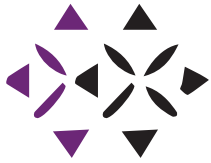
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LIST OF ACRONYMS

CSO	Civil Society Organisation
CWC	Chuuk Women's Council
DFAT	Department of Foreign Affairs and Trade (Australian Government)
DV	Domestic Violence
DVRO	Domestic Violence Restraining Order
EVAWG	Eliminating Violence Against Women and Girls
FP	Family Protection
FWCC	Fiji Women's Crisis Centre
GBV	Gender-Based Violence
HRSD	Human Rights and Social Development Division
MFAT	Ministry of Foreign Affairs and Trade (New Zealand Government)
MWCPA	Ministry of Women, Children & Poverty Alleviation (Fiji Government)
MWYCFA	Ministry of Women, Youth, Children and Family Affairs (Solomon Islands Government)
PIFS	Pacific Islands Forum Secretariat
PJSI	Pacific Judicial Strengthening Initiative
RRRT	Regional Rights Resource Team
RWG	Regional Working Group on the Implementation of Family Protection / Domestic Violence Legislation
SDP	Social Development Program
SPC	The Pacific Community
VAWG	Violence Against Women and Girls
WUTMI	Women United Together Marshall Islands



BACKGROUND AND INTRODUCTION

In 2018, the Human Rights and Social Development (HRSD) division¹ of the Pacific Community (SPC), convened a “Regional Consultation on the Implementation of Domestic Violence Legislation: from Law to Practice” for senior Government representatives from Ministries/Departments responsible for implementation of domestic violence legislation. A key outcome of this meeting was the establishment of the Regional Working Group on the Implementation of Domestic Violence/Family Protection Legislation (RWG) which subsequently had their first meeting in May 2019².

The RWG, with support of the HRSD as ‘the Secretariat’, agreed to convene two meetings annually (one face-to-face and one virtual). The Secretariat, in close consultation with the Chair and Deputy Chair, managed the overall coordination and convening of the meetings. The Chair and Deputy Chair of the RWG, since inception, has been Fiji and Samoa, respectively.

Due to the COVID 19 pandemic and the challenges brought on by Tropical Cyclone Harold, Yasa and Ana, the RWG was unable to hold the annual face-to-face meeting in 2020. However, a smaller virtual meeting was held in 2020. This led to the full virtual meeting held over three days from 24 - 26 August 2021 (23 - 25 August – Cook Islands) as the 2nd annual meeting of the RWG³.

The objectives of this meeting were to:

- ◆ Reflect on the impacts of COVID-19 and recurring natural disasters, such as tropical cyclones, on the implementation of domestic violence legislation in the Pacific region.
- ◆ Identify best practices and discuss innovative ways of working, in the RWG’s priority areas, during crises such as the global COVID-19 pandemic and recurring natural disasters.
- ◆ Develop recommendations for PIC governments, to take on board to ensure that DV legislation can adequately respond during similar emergency situations.

The following report summarises and captures the key deliberations over the three days based on discussion papers from the sub-committees⁴ and presentations from development partners/key stakeholders complementing the work of the RWG in the region. The outcomes document⁵ of the meeting is also included in this report.

1 HRSD Division merged the former Regional Rights Resource Team (RRRT) and the Social Development Program (SDP).

2 Representation at this meeting was from Cook Islands, Federated States of Micronesia (Kosrae & Pohnpei), Kiribati, Marshall Islands, Solomon Islands, Tonga, and Vanuatu

3 RWG Program outline is attached as Annex 1 of this report followed by the full list of participants as Annex 2

4 Sub-committees and key priority areas: Counselling, Advisory Committee/Council, Data collection and M & E

5 Outcomes Document as Annex 3 of this report



DAY 1

THEMATIC AREA: “IMPLEMENTING DV LEGISLATION DURING CRISES: THE PACIFIC EXPERIENCE”

24 AUGUST 2021

23 AUGUST 2021 (COOK ISLANDS)

Moderated by:

Ms. Neomai Maravuakula: Acting Team Leader - Governance & Institutional Strengthening, Human Rights and Social Development Division (HRSD), Pacific Community (SPC)

Chaired by:

Ms. Selai Korovusere (Fiji): Director, Ministry of Women, Children and Poverty Alleviation (MWCPA)

Opening

1. The meeting commenced with a prayer and reflections from **HRSD Manager Programs Nilesh Goundar**. This was followed by opening remarks from the **HRSD Director Miles Young** highlighting the challenges posed by the COVID-19 pandemic and tropical cyclones necessitating virtual meetings and the convening of the 2nd Annual Meeting of the RWG. He also stressed the importance of a coherent regional approach that would ensure regional and national responsiveness to domestic violence (DV), Violence Against Women and Girls (VAWG) and Gender-Based Violence (GBV) consistent with broader regional gender equality outcomes.
2. Welcome remarks from **Deputy Director General (Science & Capability), SPC, Dr Paula Vivili**, echoed similar sentiments emphasising the increase in GBV/DV across the globe and the Pacific, exacerbated by the pandemic. The timeliness of the 2nd Annual Meeting of the RWG allows for immediate reflection on the 14th Triennial Conference on Pacific Women leading to outcomes that can also inform the review of the Pacific Leaders Gender Equality Declaration undertaken by the Pacific Islands Forum Secretariat (PIFS).
3. Chair of the RWG **Ms. Selai Korovusere, Director MWCPA** welcomed members, acknowledging the progress in the work of the RWG through the support of civil society and development partners. She urged members to be guided by the purpose and objectives of the RWG, particularly in the current COVID-19 pandemic and the crisis context as the impetus for intensified collaboration for strengthening domestic violence/family protection (DV/FP) legislation and its implementation.
4. The Secretariat then shared with the RWG; the logo/icon⁶ developed to enhance the visibility of the RWG which has been endorsed by the Chair and Deputy Chair to be used as the RWG branding.
5. Following the introductory remarks, discussion papers⁷ from the sub-committees were presented to the RWG. The development of the discussion papers emanated from reflections of the priority areas from the 1st Annual Meeting of the RWG in 2019 and implementation challenges faced by members. Key recommendations from these papers were further discussed in the breakout sessions along with other suggestions for incorporation into the meetings outcomes document.

Counselling sub-committee presentation

6. On behalf of the Counselling sub-committee, **Ms. Reijieli Mawa Senior Women's Interest Officer (Women's Division) Fiji - MWCPA** highlighted the impact of COVID-19 and tropical cyclones on GBV/DV counselling work in the region along with recommendations to address the gaps in the legislative frameworks and challenges experienced. These key findings included: a notable increase in DV in the region; and a lack of specific legal provisions allowing counseling services to be regarded as "essential services".

Advisory Councils/Committees sub-committee presentation

7. On behalf of the Advisory Committees/Councils sub-committee, **Ms. Polotu Paunga, Deputy Chief Executive Officer (DCEO), Women's Division, Ministry of Internal Affairs, Tonga**, highlighted the scope and accessibility of protective measures and services available to GBV/DV survivors particularly during crises. Key findings included the diversion of resources away from GBV/DV towards the public emergency/crisis, challenges in coordination and provision of essential services, non-recognition of the full range of survivor services and associated referral pathways as "essential services".

⁶ RWG Logo/icon symbols and colours - the man, woman, and child signifying family protection as central to the objective of the RWG, colours signifying the natural environment including purple associated with ending DV against women. The scales of Justice equated to the protection of law and the protective hand symbolising the encompassing love and protection of families.

⁷ Discussion papers from sub-committees: Counselling, Advisory Committee/Council, Data collection and M & E attached as Annex 4 in order of presentation

Data Collection and Monitoring & Evaluation sub-committee presentation

8. On behalf of the Data Collection and Monitoring & Evaluation sub-committee, **Mr. Sokotia Kulene (Tuvalu) Director for Women**, highlighted the scope of collection and analysis of DV data in the region and monitoring and evaluation of the implementation of the respective DV/FP legislation. Key findings included current challenges in capacity constraints, coordination of data collection, its integration and analysis to inform DV/FP legislation implementation which were further exacerbated by the pandemic and crises in the region.

Summary of Day 1 Deliberations

9. Following the presentations from the sub-committees, the RWG deliberated on the key recommendations. To guide deliberations, guiding questions⁸ were provided by the Secretariat. The following summary of the key issues were highlighted, in the discussions, and are incorporated into the outcomes document:
 - ◆ Expanding partnerships and the incorporation of the local/cultural context to meet the counselling capacity constraints and challenges in DV legislation implementation.
 - ◆ Full spectrum of GBV/DV services to be recognised as essential services to ensure availability and accessibility for survivors especially during crises.
 - ◆ GBV/DV services to be survivor-centered and consideration be given to availability and accessibility of these services for men and other marginalised groups.
 - ◆ Challenges in data collection, capacity constraints and centralisation of data, particularly to lead GBV/DV agency to enable informed policy intervention and improved DV/FP legislation implementation.
 - ◆ Human and financial resourcing remains a key challenge in DV/FP legislation implementation. Future funding sources including additional funding from NZ to be equitably distributed among RWG members.
 - ◆ Unique country contexts across the region must always be taken into consideration when discussing RWG outcomes implementation at the national level.
 - ◆ To ensure that GBV/DV services are based on human rights and are survivor-centered, ensuring accessibility also for all survivors including men, people living with disabilities⁹, the elderly, those living in remote and rural areas, and marginalised groups in the national context.

⁸ Guiding questions are included as Annex 5 - for overall guiding questions for Day 1 deliberations and breakout sessions for Day 2 and 3 of the RWG

⁹ Including those complex support needs, survivors with psychosocial or intellectual disabilities and survivors with communication disabilities are properly assisted in the FP/DV system.

DAY 2

THEMATIC AREA: “INNOVATIVE WAYS OF WORKING: RESPONDING TO THE COVID-19 PANDEMIC AND NATURAL DISASTERS”

24 AUGUST 2021

23 AUGUST 2021 (COOK ISLANDS)


Moderated by:

Ms. Julieanne Wickham: Officer - Human Rights and Social Development Division (HRSD) - Pacific Community

Chaired by the RWG Deputy Chair:

Ms Moliei Vaai (Samoa) Chief Executive Officer (CEO) Ministry of Justice and Court Administration



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10. Day 2 of the meeting was an opportunity for partners and stakeholders working in the region to share best practices and discuss innovative ways of working, particularly during crises such as the global pandemic and recurring disasters/crises. The abstracts of the presentations are included in Annex 6 of this report.
 11. The meeting commenced with reflections from HRSD Director Miles Young reciting a poem by Maya Angelou titled “Still I rise” about dignity and resilience in the face of oppression.

Presentations from Partners and Key Stakeholders

Ministry of Women, Children and Poverty Alleviation (MWCPA), Fiji Government

12. **Ms. Selai Korovusere, Director Women, MWCPA** shared Fiji’s National Service Delivery Protocol which outlines the standard operating procedures for interagency response to GBV. Ms. Korovusere also discussed linkages to current gender policy and national women’s machinery and the effectiveness of the protocol is based on the interagency collaboration. In sharing lessons, Ms. Korovusere shared the implementation of the protocol during tropical cyclones and the involvement of the divisional officer in localising the national protocol at the divisional level and further to the district level. The protocol was also adapted to the COVID-19 context and the key lessons which included the importance of preparedness, capacity development, national communication campaign and the opportunity to build on GBV administrative data.

UN Women (Pacific Partnership)

13. **Ms. Abigail Erikson, UN Women (Pacific Partnership)** Ending Violence Against Women (EVAW) Programme Specialist, highlighted EVAW coordination work in the region and how this was focused on supporting and improving services for the survivor. She also stressed the need for strengthened GBV/DV multisectoral coordination and the governance of these mechanisms that were agile and responsive to COVID-19 and ongoing disasters in the region.

SPC Human Rights and Social Development division

14. **Ms. Kim Robertson, Adviser (Gender Data and Statistics) from the Human Rights and Social Development (HRSD) division of SPC**, informed the RWG of the need and complementarity nature of both prevalence and administrative data in relation to monitoring, evaluation and learning of the effectiveness of DV/FP legislation implementation. She also discussed current challenges and the need for multi-stakeholder partnerships with clear information-sharing protocols, along with coordination mechanisms that are critical to support GBV/DV survivors. Given the existing challenges magnified by the pandemic, SPC and development partners must continue to provide technical assistance for GBV data coordinated by a regional GBV data technical working group.

UN Women Multi-Country Office and Solomon Islands Government

15. Presentation from **Ms. Uieta Kaufusi Technical Specialist (UN Women – Fiji)**, **Ms. Doris Puiahi (UN Women – Solomon Islands)** and **Ms. Koisau Sade, EVAWG Policy Coordinator of the Women’s Development Division, Ministry of Women, Youth, Children and Family Affairs (Solomon Islands Government)** focused on their approach and the process undertaken by Solomon Islands to establish counselling guidelines, code of ethics and practice standards. Lessons learned include the importance of engagement of local stakeholders throughout the process to ensure ownership, the required mandate for establishment along with core principles, and standards of GBV/DV counselling that is applicable to various contexts.

16. **Ms. Salaseini Tupou from Pacific Women** presented the telephone counseling initiative in the North Pacific which was in response to COVID-19/crises context globally and in the region. The adaptive counselling initiative was co-designed with Women United Together Marshall Islands (WUTMI) and Chuuk Women's Council (CWC), allowed for telephone counselling to complement face to face counselling.

Summary of Day 2 Deliberations

17. Following the presentations, the RWG went into the pre-assigned rooms in the priority areas to again reflect on the thematic area of innovative ways of working – responding to the COVID-19 pandemic and natural disasters. Each of the groups would then present key recommendations for incorporation in the RWG outcomes document.
18. **Data Collection:** The sub-committee on data collection raised issues in relation to improvement in data collection to minimise gaps and improve coordination; moving towards the centralisation of data and ensuring input from the legal and justice system; a standardised system for all service providers, capturing qualitative data that can capture behavioural change as a result of policy intervention; opportunities for repetition of the prevalence study in 2009; increased multi-stakeholder partnerships; the need for simple reporting tools that align to existing reporting templates and prevalence data to get a true reflection of the rate of domestic violence that women are facing; and ensuring policy effectiveness.
19. **Advisory Committee/Councils:** The Advisory Committee/Councils sub-committee key recommendations to legislate and mandate an advisory committee with specific roles and responsibilities for stakeholders to address EAW. Composition of councils be inclusive particularly of people living with disabilities, a national action plan on EAW with the lead ministries championing initiatives with the support of partners along with technical support from SPC. Multi-sectoral collaboration for GBV/DV prevention and response ensuring Government and CSO collaboration. Ensuring national coordination bodies, protocols, referral pathways are in place and can flex for emergencies and there is a continuous strengthening of national systems. The referral pathways are to be localised at district and/or provincial level with coordination structures in place. There must be sufficient funding for EAW coordination with adequate human and financial resources at national and sub-national levels. Overall, the multi-sectoral coordination is human rights-based/survivor-centered and aligned to global and Pacific evidence and best practice.
20. **Counselling:** The counselling sub-committee acknowledged the resourcing challenges in the roll out of GBV/DV counseling services at the sub-national, community level. There was also a need for improved accountability of counselors and compliance to counselling standards and guidelines which could lead to a framework for counselling that provides for minimum standards to be used as a guide for members. Counselling services must be recognised as essential services during crises, including the current COVID-19 pandemic and other national emergencies and restrictions, training for GBV/DV counsellors, supervision of counsellors, capacity of counsellors to ensure they are responsive and adaptive to the changing contexts ensuring survivor safety and a regional pool of counselors that can act as supervisors for GBV/DV counsellors.

DAY 3

THEMATIC AREA: “ACCESS TO JUSTICE AND SOCIAL SERVICES”

24 AUGUST 2021

23 AUGUST 2021 (COOK ISLANDS)

Moderated by:

Mr. William Nainima: Advisor, Human Rights & Social Development division (HRSD), Pacific Community

Chaired by:

Ms. Selai Korovusere: Director for the Fiji Ministry of Women, Children and Poverty Alleviation (MWCPA)

- 
21. Day 3 was divided into two sessions. The first session focused on presentations from partners on access to justice and social services. Although not within the scope of the priority areas of the RWG but considered as critical elements in the implementation of DV/FP legislation. The abstracts for the presentations are in annex 6. The second session was devoted to the finalisation of the RWG meeting outcomes document.
 22. The meeting commenced with reflections from HRSD Director Miles Young reciting a poem by renowned Pacific Poet and academic, Dr. Konai Helu Thaman on the realities of DV in the Pacific context titled “My Neighbour” and how the generous man and avid church goer frequently beats up his wife.
 23. Partners and donors (MFAT and DFAT) that have been part of the 2nd RWG were acknowledged. Additional funding from the New Zealand Government to fund the work of the RWG over the next few years was welcomed by the RWG.

Presentations from Partners and Key Stakeholders

Access to justice service providers during times of crises: Exploring Opportunities - Pacific Judicial Strengthening Initiative (PJSI)

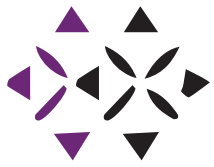
24. Mr. Metzner shared the experience and challenges of the Pacific Judicial Strengthening Initiative (PJSI) in promoting accessible, just, efficient, and responsive justice, especially during the COVID-19 pandemic. To respond to the crises, PJSI supported partner courts in the region to shift and enable some of its services online. Resources and continuous capacity development support/training was made available to enable courts within their local contexts to facilitate ongoing access to justice particularly for remote communities.

Access to social services: Material and Financial Aid during crises - Fiji Women’s Crisis Centre (FWCC)

25. Ms. Stephanie Dunn shared the Fiji experience in providing GBV/DV social services during the COVID-19 pandemic and crises. GBV/DV cases were not prioritised and access to social services were hindered as they were not recognised as essential services. Key recommendations included review of the legislation, long-term funding support and a multi-sectoral approach with clear referral pathways ensuring GBV survivors have a range of options and access to the services they need.

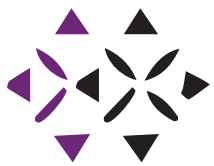
Summary of Day 3 Deliberations

26. Following the presentations, the RWG went into the pre-assigned breakout rooms to highlight key recommendations based on presentations in the two key areas of “access to justice services” and “access to social services”.
27. **Access to Social Services:** The group on ‘access to social services’ acknowledged the DV crises centres in the region that were providing a range of services for survivors, the need for GBV/DV to be prioritised during crises, access to quality, coordinated social services was important during crises, including, but not limited to crisis information, helplines and rights information, children’s services, counselling, safe accommodation, material and financial aid, and information. GBV/DV services were to also be recognised as essential services and helplines as emergency numbers. Accessibility to services for victims and survivors and therefore the need to have online platforms and innovative means. E.g., Marshall Islands established a process where victims or survivors can access online platform to apply for any of their cases and a secure remote room was established to conduct their proceedings with victims. The challenge of meeting basic needs and the need for funds to be made available for various needs of survivors. Awareness raising so that people are made aware of available services and where relevant, for instance health services for victims of GBV/DV must be made free of charge to increase accessibility.
28. **Access to Justice Services:** The group on “access to justice services” highlighted key points, in particular innovation and adaption and the creation of virtual platforms to address the need for access to justice services in the COVID-19/crisis context. Key recommendations included the need to remove legal and policy barriers, for example, courts should remove requirements on physical presence in a courtroom for most hearings. Whenever possible, hearings, counselling, police interviews, DVRO applications should be held online or on the phone. Where virtual meetings were not possible, directives to be issued to establish and implement public health protocols in accordance with recommendations for governments in the context of COVID-19. Court documents (e.g., briefs, non-physical evidence should be submitted via secure online portals where possible. The need to simplify processes and allow for flexibility, and the ability to adapt to ensure an inclusive approach to guide the justice system. Overall, there was a need for a national service delivery protocol to ensure coordinated approach and response to survivors, recognition of access to justice service providers as “essential services”, capacity building to meet the changing needs and circumstances to facilitate access to justice services and the need for review legislation to accommodate changes in context.



OUTCOMES DOCUMENT

29. The RWG went through the outcomes document capturing the key agreements and recommendations under the various thematic areas over the three days. Participants were also given the opportunity to give their comments and proposed inputs. The outcomes document was later circulated to RWG members for their additional inputs with the final version included in this report.



CLOSING

30. The RWG then discussed the final agenda item which was the nomination of the Chair. The Terms of Reference of the RWG sets out that the Chair and the Deputy Chair roles are to be rotated among the member countries annually. Nauru stated its willingness to be the Deputy Chair should Samoa be Chair. There were no objections to Samoa's nomination as Chair. The new Chair and Deputy Chair positions were confirmed to be Samoa and Nauru, respectively.
31. Prior to the closing of the three-day meeting, **HRSD Director Miles Young** also conveyed the appreciation of the RWG members and partners to **Ms. Selai Korovusere Director MWCPA** as Chair to the RWG since its inception.
32. The outgoing Chair, **Ms. Selai Korovusere Director MWCPA** congratulated Samoa as the new Chair and thanked her for her role as Deputy Chair of the RWG. She also thanked the Secretariat for their ongoing support and the RWG members for their commitment and the implementation of the DV/FP legislation.
33. In closing the 2nd RWG meeting, the new Chair **Ms Moliei Vaai, Chief Executive Officer of the Ministry of Justice and Court Administration, Samoa** thanked RWG members and partners for their participation, acknowledging the UN Spotlight initiative for providing funding support for this meeting. Appreciation was also conveyed to the Secretariat, HRSD Director Miles Young and the team for the support throughout the three-day meeting and the Chair for chairing the RWG over the last few years. The new Chair provided final inspirational remarks closing with an appeal for continued collaboration particularly in the current circumstances.





ANNEX 1: THE PROGRAMME OUTLINE



2nd Annual Meeting of the Regional Working Group on Implementation of Family Protection / Domestic Violence Legislation (RWG)

Aug 24 – 26, 2021 / Aug 23 – 25 (Cook Islands)

Program Outline

Objectives:

The objectives of the upcoming RWG meeting are to:

1. Reflect on the impacts of COVID-19 and natural disasters on the implementation of domestic violence legislation in the Pacific region.
2. Identify best practises and discuss innovative ways of working, in the RWG's priority areas, during crises such as the global COVID-19 pandemic and recurring natural disasters.
3. Develop recommendations for PIC governments to take on board to ensure that DV legislation is able to adequately respond during similar emergency situations.

Time	Day 1 – Tues 24 th Aug, 2021	Day 2 – Wed 25 th Aug, 2021	Day 3 – Thurs 26 th Aug, 2021
Total time: 1 ½ hours (2hours max)	<p>Opening prayer & Reflection</p> <p>Welcome - Director, SPC HRSD</p> <p>Remarks - Deputy Director General, SPC</p> <p>Opening Remarks - Chair, RWG</p> <p>Meeting outline & processes - Secretariat</p> <p>Implementing DV legislation during crises: The Pacific Experience</p> <p>Presentation of discussion papers by sub - Committees</p>	<p>Innovative ways of working: Responding to the COVID-19 pandemic and natural disasters</p> <p>Presentations by:</p> <ul style="list-style-type: none"> » Ministry of Women, Fiji Government - Fiji's Service Delivery Protocols for GBV » UN Women (Pacific Partnership) - EVAW coordinating committees / mechanisms » UN Women (Pacific Partnership) - counselling guidelines » Pacific Women - counselling » SPC HRSD - VAW Data 	<p>Access to justice service providers during times of crises: Exploring Opportunities</p> <p>Pacific Judicial Strengthening Initiative (PJSI)</p> <p>Access to social services: Material and Financial Aid during crises</p> <p>Fiji Women's Crisis Centre</p> <p>Breakout session (with presenters)</p> <ul style="list-style-type: none"> » Discussion and recommendations
Total time: 1 ½ hours (2hours max)	<p>Discussions</p> <p>Endorsement of recommendations from sub-committees</p>	<p>Breakout sessions (with presenters)</p> <ul style="list-style-type: none"> » Advisory Council/Committees » Counselling » Data collection and M&E <p>Discussion and recommendations</p>	<p>Outcomes from the RWG 2021 annual meeting: Where to from here?</p> <p>Presentation of final document and endorsement</p> <p>Closing remarks – Deputy chair</p>
	Closing of day's session	Regroup for closing of day's session and announcements/reminders, etc.	Close

The SPC Human Rights & Social Development Division is supported through program funding from the Governments of Australia and Sweden.





ANNEX 2: THE FULL LIST OF PARTICIPANTS

#	Name	Position	Ministry/Office	
COOK ISLANDS				
1	Ms Anne Herman	Secretary	Ministry of Internal Affairs	Member
2	Mata Tangata	National Coordinator Children	Ministry of Internal Affairs	Alternate member (Ag)
3	Angeline Tuara	Director	Ministry of Internal Affairs	Observer
4	Annafaye Newbigging	Senior Adviser for Child & Family Services	Ministry of Internal Affairs	Observer
5	Moana Manuela	Senior Social Worker/Adviser for Child & Family Services	Ministry of Internal Affairs	Observer
6	Tia Nga	Adviser for Child & Family Services	Ministry of Internal Affairs	Observer
7	Emile Rima	Personal Assistant to the Secretary	Ministry of Internal Affairs	Observer
8	Princess Raukete	Social Impact Funds Manager	Ministry of Internal Affairs	Observer
9	Lisianne Messine	Senior Probation Officer	Ministry of Correction Services	Observer
10	Therese Tutai	Deputy Registrar	Ministry of Justice	Observer
11	Rebecca Buchanan	Coordinator	Punanga Tauturu	Observer
12	Sharon Kareroa	Sergeant – Domestic Violence	Police Department	Observer
FIJI				
13	Selai Korovusere	Director	Ministry of Women, Children and Poverty Alleviation	Member
14	Reijeli Mawa	Women’s Interest Officer	Ministry of Women, Children and Poverty Alleviation	Alternate member
FEDERATED STATES OF MICRONESIA - NATIONAL GOVERNMENT				
15	Stuard Penias	Acting Chief of Social Affairs and Gender Development Officer	Department of Health and Social Affairs	Member
16	Mr. Augustine Sue	Data Specialist	Department of Health and Social Affairs	Observer
17	Mr. Johnny Hadley Jr	Child Protection Coordinator	Department of Health and Social Affairs	Observer
18	Edna Akullo	Country Coordination Specialist	United Nations Resident Coordinator Office-FSM	Observer





KIRIBATI				
19	Roreti Eritai	Secretary	Ministry of Women, Youth, Sports and Social Affairs	Member
20	Eera Teakai	Senior Women Development Officer (Officer in Charge - OIC)	Ministry of Women, Youth, Sports and Social Affairs - Women's Development Division (WDD)	Alternate member (Ag)
21	Pauline Ibeatau	Director of Public Prosecutions	Office of the Attorney General (OAG)	Observer
22	Eribwebwe Takiru	Inspector	Kiribati Police Service (KPS) -- Domestic Violence, Child Abuse & Sexual Offences Unit (DCSU)	Observer
23	Christina Reiher	Senior Counsellor	Ministry of Women, Youth, Sports and Social Affairs - Social Welfare Division (SWD)	Observer
24	Melinda Christopher	Safenet Support Officer	Ministry of Women, Youth, Sports and Social Affairs - Women's Development Division (WDD)	Observer
25	Tarota Bwebwetara	Gender Based Violence Prevention Officer	Ministry of Women, Youth, Sports and Social Affairs - Women's Development Division (WDD)	Observer
26	Teretia Tokam		Kiribati Women and Children Support Centre (KWCS)	Observer
27	Abaiti lotua		Kiribati Women and Children Support Centre (KWCS)	Observer
28	Henty Grace	Human Rights Officer	Ministry of Justice (MOJ) - Human Rights Division (HRD)	Observer
MARSHALL ISLANDS				
29	Antari Elbon	Deputy Secretary	Ministry of Culture & Internal Affairs	Alternate member (Ag)
30	Ms Joy Kawakami	Children's Project Manager	Ministry of Culture & Internal Affairs	Observer
32	Mr. Albos Jelmak	Assistant Commissioner	Marshall Is. Police Department	Observer



33	Mr. Richard Hickson	Attorney General	Office of the Attorney General	Observer
34	Dora Jekkar	Gender Office Coordinator	Ministry of Culture & Internal Affairs	Observer
35	Glorina Harris		Public School System - Ministry of Education, Sports and Training	Observer
NAURU				
36	Ms Joy Heine	Secretary	Ministry of Women's and Social Development Affairs	Member
37	Mr Livai Sovau	Senior Government Lawyer	Ministry of Women's and Social Development Affairs	Alternate member
38	Marjorie Karl	Safehouse Counsellor	Ministry of Women's and Social Development Affairs	Observer
39	Dean Dageago	Self Help Ending Domestic (S.H.E.D) Coordinator	Ministry of Women's and Social Development Affairs	Observer
40	Steve Smith	Male Counsellor	Ministry of Women's and Social Development Affairs	Observer
41	Tara Detogia	Director Gender Mainstreaming Unit	Ministry of Women's and Social Development Affairs	Observer
42	Ojay Stephen	Administrative Officer	Ministry of Women's and Social Development Affairs	Observer
43	Ailasha Brechterfield	Assistant Safehouse Counsellor	Ministry of Women's and Social Development Affairs	Observer
44	Sareima Aremwa	Sergeant	Nauru Police Force	Observer
45	Lady Jane Hilo	Sergeant	Nauru Police Force	Observer
46	Kitty Temaki	Senior Constable	Nauru Police Force	Observer
47	Jezza Agadio	Judicial Officer	Nauru Judiciary	Observer
48	George Joram	Judicial Officer	Nauru Judiciary	Observer
49	Patrina Akua	Chief Matron	Health Department	Observer
SAMOA				
50	Moliei Vaai	Chief Executive Officer	Ministry of Justice and Court Administration	Member
51	Faagutu S Vaalotu	Assistant CEO – Corrections, Enforcement & Maintenance Division	Ministry of Justice and Court Administration	Alternate Member
52	Sala Sapolu Margraff	Assistant CEO - Legal Office	Ministry of Justice and Court Administration	Observer

53	Leitu Moananu	Associate Legislative Drafter	Attorney General's Office	Observer
54	Loukinikini Vili	Director of Human Rights	Office of the Ombudsman	Observer
55	Akeripa Misa	Senior Policy & Research	Ministry of Women, Community and Social Development	Observer
56	Tacy Sasagi	State Prosecutor	Attorney General's Office	Observer
57	Faapito Opetai	Representative	Samoa Umbrella for NGOs	Observer
58	Kolotita Silva	Censor Officer	Ministry of Justice and Court Administration	Observer
59	Florita Esther Schuster	Coordinator -Law and Justice Sector (Acting)	Ministry of Justice and Court Administration	Observer
60	David Fau Meredith	Principal Censor	Ministry of Justice and Court Administration	Observer
61	Efo Moalele	Assistant Commissioner	Ministry of Police, Corrections & Prisons	Observer
62	Maseinga Lauina	Senior Sergeant	Samoa Police Service	Observer
63	Michael Tilai	Sergeant	Samoa Police Service	Observer
64	Efo Moalele	Assistant Commissioner	Ministry of Police, Corrections & Prisons	Observer
65	Faapito Opetai	Representative	Samoa Umbrella for NGOs	Observer
SOLOMON ISLANDS				
66	Dr Paul Mae	Permanent Secretary	Ministry of Justice and Legal Affairs	Member
67	Ms Koisau Sade	EVAW Policy Coordinator	Ministry of Women, Youth, Children and Family Affairs	Alternate member
68	Ms Kyla Venokana	Senior Legal Policy Officer	Ministry of Justice and Legal Affairs	Observer
69	Dr Cedric Alependava	Permanent Secretary	Ministry of Women, Youth, Children and Family Affairs	Observer
70	Vaela Ngai	Director, Women's Development Division	Ministry of Women, Youth, Children and Family Affairs	Observer



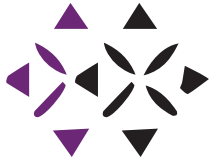
TONGA				
71	Ms Polotu Fakafanua-Paunga	Deputy CEO	Women Affairs Division, Ministry of Internal Affairs	Alternate member
72	Ms Aina Kavaliku	Family Protection Act Co-Ordinator	Ministry of Internal Affairs	Observer
73	Apikale Naitoko	Senior Officer	Ministry of Police	Observer
74	Fitilagi Fa'anunu	Director	Family Protection Legal Aid Centre, Ministry of Justice	Observer
75	Piula Lokotui Vae	Legal Officer	Ministry of Justice	Observer
76	Nimilote Liutai	Assistant Clerk	Ministry of Internal Affairs	Observer
77	Lavinia Palei	M&E Officer	Ministry of Internal Affairs	Observer
78	Filipe Fifita	Superintendent of Police	Tonga Police	Observer
79	Seteone Polutele	Inspector of Police	Tonga Police	Observer
80	Tevita Hofoka	Youth Worker	Ministry of Internal Affairs	Observer
81	Setuuki Tauateugiu	Youth Worker	Ministry of Internal Affairs	Observer
TUVALU				
82	Vavau Fatuuga	Assistant Secretary	Ministry of Health, Social Welfare and Gender Affairs	Alternate Member
83	Sokotia Kulene	Director, Gender Affairs Department	Ministry of Health, Social Welfare and Gender Affairs	Alternate Member
84	Ms Lanieta Faleasiu	Community Affairs Officer	Social Welfare Division, Ministry of Health, Social Welfare and Gender Affairs	Observer
85	Ms. Corinna Ituaso Laafai	Senior Magistrate	Office of the Judiciary	Observer
86	Losafou Arupelosa	Crown Counsel	Peoples Lawyer Department	Observer
87	Lisa Fakalupe	Medical Officer	Ministry of Health, Social Welfare and Gender Affairs	Observer
88	Mano Homosi	Project Manager	Gender Affairs Department, Ministry of Health, Social Welfare and Gender Affairs	Observer
89	Salesa Falisene	Communications Officer	Gender Affairs Department, Ministry of Health, Social Welfare and Gender Affairs	Observer
90	Nele Tuipasa	Lawyer	Peoples Lawyer Department	Observer





VANUATU				
91	Rothina Ilo Noka	Acting Director General	Department of Women's Affairs	Member
92	Rosette Kalmet	Gender and Protection Cluster coordinator	Department of Women's Affairs	Observer
93	Gloria Tarileo	Sanma Provincial Officer	Department of Women's Affairs	Observer
94	Rachael Ores	Malampa Provincial Officer	Department of Women's Affairs	Observer
95	Wendy Tomasi	Tafea Provincial Officer	Department of Women's Affairs	Observer
96	Rockline Eldads	Torba Provincial Officer	Department of Women's Affairs	
97	Jenny Tevi	Policy Advisor	Department of Women's Affairs	Observer
98	Celine Bareus	Gender Officer	Department of Women's Affairs	Observer
99	Lilly Joel	Inspector	Police Family Protection Unit	Observer





ANNEX 3: OUTCOMES DOCUMENT



2nd ANNUAL MEETING OF THE REGIONAL WORKING GROUP ON THE IMPLEMENTATION OF FAMILY PROTECTION/DOMESTIC VIOLENCE LEGISLATION

Theme: Impacts of COVID-19 and other national crises on the implementation of DV legislation in the Pacific

24 - 26 August, 2021

23 - 25 August 2021 (Cook Islands)

OUTCOMES DOCUMENT

A. INTRODUCTION

Background

1. The 2nd Annual Meeting of the Regional Working Group on the Implementation of Family Protection/Domestic Violence (FP/DV) Legislation (RWG) was conducted virtually over three days from Tuesday, 24th August 2021 to Thursday, 26th August 2021¹.
2. The meeting was attended by representatives from the National Governments of the Cook Islands, Federated States of Micronesia, Fiji, Kiribati, Marshall Islands, Nauru, Samoa, Solomon Islands, Tonga, Tuvalu and Vanuatu.
3. The meeting was chaired by Fiji, with Samoa in the role of deputy chair, and the SPC Human Rights and Social Development Division (SPC HRSD) in the role of RWG secretariat.

Objectives

1. The objectives of the meeting were to:
 - a. Reflect on the impacts of COVID-19 and recurring natural disasters, such as tropical cyclones, on the implementation of domestic violence legislation in the Pacific region.
 - b. Identify best practises and discuss innovative ways of working, in the RWG's priority areas, during crises such as the global COVID-19 pandemic and recurring natural disasters.
 - c. Develop recommendations for Pacific Island Country (PIC) governments, to take on board to ensure that DV legislation can adequately respond during similar emergency situations.

¹ Cook Islands dates – Monday 23rd – Wednesday 25th August.



B. SUMMARY OF MEETING KEY ISSUES AND AGREEMENTS

The Regional Working Group:

1. Acknowledges and thanks Fiji and Samoa for their work as Chair and Deputy Chair, respectively, of the RWG since the inception of the RWG in 2018.
2. Notes and congratulates the election of Samoa as the new Chair and Nauru as the Deputy Chair, respectively, of the RWG, effective 26th August 2021.
3. Acknowledges and thanks the European Union and United Nations funded Spotlight Initiative for direct funding support to the 2nd Annual Meeting of the RWG, and the Governments of Australia, New Zealand and Sweden, for funding support for the work of the RWG.
4. Acknowledges that, in addition to COVID-19 and tropical cyclones, other natural disasters¹ and human-induced crises situations (hereinafter referred to as 'crises') also affect the implementation of FP/DV legislation.
5. Acknowledges that crises affect resourcing (financial and human), availability, access, delivery and efficiency of coordinated multi-sectoral GBV/DV essential services² heightening the challenge of implementing of FP/DV legislation.
6. Acknowledges the discussion papers from sub-committees³, and presentations from partners⁴ that contributed immensely to ongoing discussions during the 2nd Annual Meeting and provided invaluable insights into strengthening the work on implementing of FP/DV legislation during normal and times of crises.
7. Acknowledges resourcing challenges (both human and financial) to implement national FP/DV Legislation at the national, sub-national, and community levels during crises, and committed to advocating for the provision of adequate resourcing to meet the current challenges in the implementation of FP/DV legislation.
8. Acknowledges that adaptations must be taken into consideration, in line with the broader GBV/DV prevention and response policy and programming at the regional and national levels, in order to better respond to women, children, and families affected by GBV/DV, and marginalised groups in the national context, ensuring efficient access to justice and social services for survivors during crises.
9. Acknowledges the alignment, and complimentary nature, of the RWG priorities and the broader network of regional and national CSOs⁵ networks and regional End Violence Against Women and Girls (EVAWG) programmes⁶. All agreed on the importance of on-going collaboration and partnership amongst RWG members, CSOs and development partners to ensure continuity of access to high quality care and the provision of appropriate and timely multi-sectorial support services for survivors of DV before, during and after crises.
10. Recognises the need to prioritise the amendment of existing legislation to provide recognition for justice and social service providers as essential services during disaster response, lockdowns and when restrictions on movement are imposed, such as during States of Emergencies and other public health related restrictions.
11. Recognises the continued support and commitment of development partners, reaffirming the need for equitable support for countries in the implementation of FP/DV legislation in time of crises.
12. Commits to ensuring that implementation plans for the DV/FP legislation are developed, resourced and operationalized.
13. Commits to progressing regional gender equality commitments, relating to GBV/DV.⁷

1 Such as floods, droughts and tsunamis.

2 Including access to justice (protection orders, and policing), access social services, including counselling, rehabilitation and reintegration and health.

3 Counselling, advisory committee/councils and data collection.

4 Presentations at the 2nd Annual Meeting of the RWG were from the Fiji Government's Ministry of Women, Children and Poverty Affairs (MWCPA), UN Women (Pacific Partnership), Pacific Women Shaping Pacific Development (Pacific Women), SPC Human Rights and Social Development, Pacific Judicial Strengthening Initiative (PJSI), and the Fiji Women's Crisis Centre (FWCC),

5 Including women's rights and faith-based organisations.

6 Including the Pacific Partnership to End Violence Against Women and Girls Programme (coordinated by PIFS, SPC and UN Women), EU-UN Spotlight Initiative and the Pacific Women Lead.

7 Pacific Leaders Gender Equality Declaration and the 14th Triennial Conference of Pacific Women.

14. Commits to accelerate coordination and strengthen partnership between Government, CSO, development partners and the private sector to ensure inclusivity in the design, implementation and review of legislation, prevention, response and recovery policies and programmes.
15. Requests the support of the ‘Secretariat’ to conduct a legislative review of RWG members’ FP/DV legislation to determine whether existing legislation in countries and states are aligned to model best practices in providing a human rights-based approach and are survivor-centred. The review should also examine whether current legislation is able to respond effectively during crises.
16. Requests the ‘Secretariat’ to continue working towards increasing the visibility and status of the RWG and its corresponding regional and national partnerships and activities.
17. Requests the ‘Secretariat’ to work closely with RWG members to provide technical and funding support for implementing national/sub-national legislation.

C. PRIORITY ISSUES AND AGREEMENTS

The key agreements below share the commitments by the RWG members and recognise that its implementation, monitoring and review will be prioritised within country contexts taking into account national emergencies, social/economic capacities including current legal and policy frameworks.

Information on GBV/DV services provided should be widely disseminated, accessible and understood in local and sign languages.

PRIORITY AREA: Counselling

The Regional Working Group:

1. Recognises the need to prioritise the amendment of existing legislation to provide recognition for GBV/DV counselling as an essential service during crises and other public restrictions on movement⁸.
2. Recognises the resourcing challenges for both governments and CSOs in the roll-out of GBV/DV counselling services at the national, sub-national and community level and recommended careful consideration be given to the resourcing of counselling initiatives.
3. Commits to exploring options that will enable the full range of counselling services necessary for the effective implementation of FP/DV legislation, before, during and after crises. This would include the provision of high quality online, telephone and mobile counselling services.
4. Recognises the need to ensure that the current GBV/DV counselling practices align to relevant standards and opportunities to evaluate and improve current services that are provided. The RWG also commits to establish a Pacific model framework and incorporating key learnings from the region⁹ for providing counselling support before, during and after crises.
5. Commits to advocating for the increase of resources, both human and financial, to establish and strengthen GBV/DV counselling services in countries and states, and to ensure existing counselling services are accountable, culturally appropriate, ethical and have a safe environment to practice in both times of crisis and non-crises.
6. Commits to the full implementation of FP/DV legislation, including working together with existing cultural and faith-based mechanisms to ensure the protection and support of a survivor. Where there is a lack of professional, certified counsellors, consideration be given to train and upskill faith-based and cultural/community leaders in appropriately responding to cases of GBV/DV and survivor-centred approaches.

⁸ Including during States of Emergencies, lockdowns, curfews, and public health-related restrictions.

⁹ Key learnings from the development of counselling guidelines in Fiji, the Solomon Islands and Kiribati that are supported by a suite of public policy measures on gender, GBV including response and referral pathway including standard operating procedures on clinical management of sexual offences and abused should be considered.

PRIORITY AREA: Advisory Committees/Councils

The Regional Working Group:

1. Acknowledges that all multisector coordination be human rights based/survivor centered, aligned to international best practices and informed by Pacific experiences. A multisectoral, coordinated approach to supporting survivors of DV ensures that regardless of when and where a survivor reaches out for assistance, service providers are able to respond to their unique needs, and coordinate referrals across agencies.
2. Recognises the need to establish and/or strengthen existing advisory councils or committees to guide, inform, coordinate, and improve the implementation of FP/DV legislation during crises. These roles and responsibilities must be articulated clearly in their Terms of Reference. Membership to include both government and civil society organization, and may include persons with disabilities, the elderly, those living in rural and remote areas, and marginalised groups in the national context.
3. Recognises the importance of a DV and human rights framework, to ensure full access to justice and social services, for survivors living with disabilities¹⁰, the elderly, those living in remote and rural areas, and marginalised groups in the national context.
4. Recognises the support of development partners and donors¹¹ to support the lead coordinating Ministries to champion these initiatives and to continue to provide technical and financial support for implementation of FP/DV legislation.
5. Commits to establish or commence scoping of the development of a National Action Plan on EAW to outline the basic coordination framework of prevention and response efforts with a clear mandate that sets out roles and responsibilities. This sets out the framework for the governance structure, national actions and coordination taking into account the various country contexts.
6. Commits to ensure the national coordination bodies, protocols, referral pathways to support survivors of GBV/DV are in place and is responsive to national emergencies and there is a continuous strengthening of these national systems and mechanisms. Additionally, ensure that National Referral Pathways are also localized at urban, rural and maritime centers and Coordination Structures are developed.
7. Commits to support and strengthen existing national service delivery/interagency protocols and referral pathways that outlines overall guidelines adapting interagency response and coordination to GBV before, during and after any crises.

PRIORITY AREA: Data Collection and Monitoring and Evaluation

The Regional Working Group:

1. Acknowledges the need of member countries to strengthen disaggregated data collection and monitoring and evaluation frameworks for the effective monitoring and implementation of FP/DV legislation during crises and non-crisis times. This will assist in strengthening services and referral pathways for women, children and families that will provide crucial data to inform policy development and changes.
2. Recognises the need to ensure the collection, analysis and sharing of qualitative and quantitative data that acknowledges the importance of tracking change in behaviour by perpetrators, help-seekers, service providers and those that have specific roles in the legislation.¹²
3. Recognises the need for data to be centralised to support the decision making for key government policies relating to GBV/DV, particularly during times of crises. This also ensures the integrity of data is protected and data is accurately captured, analysed, and stored, and eliminates duplication. The RWG also committed to establish ethical data sharing protocols that allow for this to happen and embedding this within the existing service delivery networks.
4. Acknowledges the need to have updated prevalence data on the status of VAWG in the countries and states, and committed to exploring available opportunities to conduct an update of the prevalence studies undertaken previously.

¹⁰ Including those complex support needs, survivors with psychosocial or intellectual disabilities and survivors with communication disabilities are properly assisted in the FP/DV system.

¹¹ Inclusive of SPC, Pacific Islands Forum Secretariat (PIFS), and other CROP agencies, and UN agencies.

¹² Including the courts, education, police, social welfare, health, etc.

5. Commits to undertake national capacity assessments that identify statistical and data gaps and challenges which will strengthen the collection of baseline DV data and increase the technical capacity in data collection in different sectors.
6. Commits to prioritise the collection of comprehensive, quality and appropriate data on the gendered impacts of COVID-19, including disaggregated data on the sex, gender, age, persons with disabilities and location in order to inform FP/DV legislation implementation, contribute to strengthening its implementation, and inform future policy development and changes. Data will need to be continuously analysed to ensure its continued integrity and relevance for these purposes.
7. Commits to invest in the collection, analysis and use of safe, ethical, culturally sound and survivor-centred data, including prevalence of violence against women and administrative data, to inform legal frameworks, policies and strategies, and for assessments of emergency events.
8. Commits to invest in the training and education of human resources to collect, compile, analyse and report on gender and GBV/DV data. Furthermore, they must be sensitised in collecting and reporting on gender issues, including GBV/DV.
9. Commits to prioritize through planning and budgeting processes the strengthening of statistical capacity and functions by identifying clear sustainable funding sources from within government and development partners.
10. Commits to undertake integrated statistical surveys that incorporate the collection of new DV baseline data that is disaggregated by sex, gender, age, disability, location and related to gender and human rights outcomes and cover the most vulnerable and marginalised women.
11. Commits to developing simple data collection tools that aligns to existing reporting templates and processes.

Building Capacity

The Regional Working Group:

1. Recognises the need to develop capacity building programs for service delivery providers that encourages on-going learning and maintaining of currency of industry knowledge. This would ensure that the service delivery providers are gender sensitised and would exhaust best approaches that are careful, confidential, and safe for survivors.
2. Commits to strengthen collaborations with CSOs, academic institutions and other national stakeholders that can assist with the necessary certification/training courses on counselling and data collection and monitoring and evaluation.

Access to Social Services

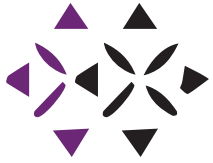
The Regional Working Group:

1. Acknowledges the need to ensure that social services be recognized as essential services, during crises to ensure that DV survivors can access these services (e.g., safe accommodation, food, material and financial aid) before, during and after crises.
2. Recognises the need to ensure that key support services that may be required by a DV survivor (e.g., health) be made free of charge during times of national crises to ensure accessibility for all.

Access to Justice Services

The Regional Working Group:

1. Recognises the challenges that courts face during the COVID-19 pandemic and disasters and the need to ensure that cases are addressed in a timely manner.
2. Acknowledges the need to develop innovative methods to ensure continuation access of legal documents (e.g., protection orders) and provision of service during emergencies and crises
3. Recognises the steps that have been undertaken by justice service providers to adapt their ways of working to respond to survivors during times of crises.
4. Recognises the need to legally acknowledge justice service providers (e.g., legal aid and courts) as an essential service which will in turn allow mechanisms to provide support for survivors to access justice services during crises and other public restrictions on movement.



ANNEX 4: DISCUSSION PAPERS



2021 RWG Annual Meeting

24 - 26 August, 2021

23 - 25 August 2021 (Cook Islands)

Discussion paper on domestic violence counselling to inform the RWG on the impact of COVID-19 and Tropical Cyclones Harold, Yasa and Ana on gender-based violence (GBV)/ domestic violence (DV) counselling work in the region.

1. INTRODUCTION AND BACKGROUND

Counselling is an essential service for survivors of GBV (including violence against women and girls and DV) and can play an invaluable role in helping survivors deal with abusive situations. Counselling provides a safe space to discuss, explore and share experiences of abuse and violence, thus accessing mechanisms of safety planning. Additionally, counselling is confidential and non-judgemental. The support and information survivors gain through counselling play an important role in a survivor's journey towards healing from the impact of domestic and family violence.

This discussion paper has been prepared by the counselling sub-committee of the RWG with the support of the Secretariat (HRSD). Members of the counselling sub-committee include Cook Islands, Fiji, Marshall Islands, Solomon Islands and Tuvalu.

This paper has been informed by a desk review and a questionnaire. The questionnaire was provided to members of the sub-committee to collect data from government on domestic violence counselling services during Tropical Cyclone Harold, Yasa and Ana, as well as the current COVID-19 pandemic.

2. PURPOSE

The purpose of the discussion paper is to inform the RWG on the impact of COVID-19 and Tropical Cyclones Harold, Yasa and Ana on GBV/domestic violence counselling work in the region and provide recommendations to address challenges experienced. The discussion paper intends to:

- a. provide a brief status update on country and regional DV counselling initiatives in the Pacific;
- b. provide an overview of gaps in legislative frameworks in relation to DV counselling services, and
- c. provide recommendations to address these gaps and challenges.

The RWG intends to use this paper as a basis to inform its strategy to address gaps and challenges in relation to available and accessible domestic violence counselling services during emergencies.

3. GBV/DV COUNSELLING IN THE PACIFIC

The DFAT funded Pacific Women Shaping Pacific Development's Review of Counselling Services in the Pacific Final Report published in 2017 and conducted across 14 Pacific Island countries¹ identified 85 counselling service providers spread across the Pacific, with more than one-third (1/3) of these based in only two countries – Fiji and Papua New Guinea. Only limited counselling services were available in most other Pacific Island countries. The review by Pacific Women also included a self-assessment questionnaire survey with organisations providing counselling services. Forty-two percent (42%) of the 43 organisations which responded to the survey reported providing services to perpetrators as well.² The review, identified, that in all fourteen countries counselling services were inadequate and inaccessible to remote areas and outer islands. The geography of most PICs, coupled with transport, communication difficulties, and small dispersed populations make access to counselling difficult in terms of reach and coverage.

In responding to GBV/DV, it is imperative that counselling takes a rights-based, survivor-centred approach and building and maintaining quality and a high standard of counselling services is essential. Since its establishment, the Pacific Womens Network to End Violence Against Women (PWNEVAW) who is the recognized leading network on EVAWG in the region, has been bringing its collective decades of expertise, networks and knowledge on EVAW in the region to support the efforts of Pacific governments, national, regional and international CSO and NGO networks and development partners to lift, build and maintain the quality and standards for GBV and counselling services across the Pacific region. In 1992 the Fiji Womens Crisis Centre (FWCC) facilitated and hosted the First Pacific Regional Meeting on Violence Against Women in Suva comprising women from 15 Pacific Island countries. The inaugural meeting led to the establishment of the Pacific Women's Network Against Violence Against Women. Since then, it has served as a support mechanism for women in the Pacific who are working in the area of gender-based violence and human rights. This, in turn, is reflected in the emergence of several counselling centres in the Pacific region including in Kiribati, Niue, Papua New Guinea, Samoa, Solomon Islands, Tonga, Tuvalu and Vanuatu.


The Governments of Kiribati and the Solomon Islands, with the support of UN Women, have standardized counselling provision through the development of guidelines for DV Counselling Registers as mandated in the FPAs in each country. The national guidelines strengthen the governance of and accountability for DV counselling in the country and at organizational level. They include a complaints mechanism outlining the process for making and dealing with complaints by clients. A system for applying to the register and assessing the skills of applicants to the register has been developed in synchronization with the guidelines and will be implemented during the first call for applicants. As a result of these guidelines, DV Counselling Providing Organizations will be required to provide evidence of supervision of all counsellor staff and volunteers, regular monitoring of counselling services, Child Protection Policies, and service alignment with Minimum Standards for all GBV service providers.

In the Solomon Islands, the development of the Guidelines are in accordance with Sections 54 and 55 of the Family Protection Act 2014, which requires the Solomon Island Government to set up a Domestic Violence Counselling Register, call for and approve applications from qualified domestic violence counsellors and de-register a domestic violence counsellor for misconduct. The four mandatory registered requirements include:

1. Successfully completing one hundred and twenty hours of domestic counselling related training;
2. Having a minimum of two years' experience in domestic violence counselling;
3. Successfully passing the Domestic Violence Counselling Skills Assessment; and
4. Successfully being supervised and/or observed while providing domestic violence counselling.

1 Cook Islands, Fiji, Federated States of Micronesia, Kiribati, Marshal Islands, Nauru, Niue, Palau, Papua New Guinea, Samoa, Solomon Islands, Tuvalu, Tonga and Vanuatu. Niue, Palau and Papua New Guinea also have DV legislation, however, are not currently members of the RWG.

2 Australia's Department of Foreign Affairs and Trade (2017), Review of Counselling Services in the Pacific Final Report, Pacific Women Shaping Pacific Development.



A Code of Ethics and 11 practice standards were developed in each country to standardize the approach to counselling survivors of DV. The DV practice standards outline specific ways in which the values and ethics will be applied and what is expected of all registrants of the registers. They apply to DV counselling practitioners (not for profit and for profit private practitioners) and reflect good practice. Registered counsellors who do not abide by the ethics and standards risk losing their registered status. A competency framework for DV counselling was developed as part of the package of practice standards and to support countries to register their counsellors with appropriate counselling training the FWCC GBV Counselling training manual has been updated in partnership with the PWNEVAW and technical assistance from UN Women to align the FWCC GBV Counselling manual with the competency frameworks of the counselling guidelines.

A regional gender-based counselling curriculum will strengthen the GBV counselling workforce at the regional and national level to sustain the availability and quality of services.

4. PROVISIONS RELATING TO COUNSELLING IN DOMESTIC VIOLENCE LEGISLATION OF RWG MEMBERS

The *Handbook for Legislation on Violence against Women*³ outlines a model framework for legislation on violence against women, including domestic violence. The handbook includes recommendations for providing comprehensive and integrated support services. For example, the framework recommends that legislation should where possible, establish “one women’s advocacy and counselling centre for every 50, 000 women, which provides proactive support and crisis intervention for complainants/survivors, including legal advice and support, as well as long-term support for complainants/survivors, and specialized services for particular groups of women...”. The Handbook also recommends that legislation should also provide that:

- a. protection orders may contain provisions that “order the accused to provide financial assistance to the complainant/survivor, including payment of...counselling fees...”
- b. State actors, family members and relevant professionals to be able to apply for protection orders on behalf of complainant/survivor, while ensuring that the agency of the complainant is respected – a number of PICs provide for counsellors to do this.⁴

There are currently fourteen states/countries in the Pacific region which have domestic violence legislation.⁵ Twelve of these are members of the RWG. All DV legislation from these countries/states with the exception of Cook Islands have counselling provisions. There is also a range of different provisions in the different PIC DV legislation. For example, the Tuvalu DV legislation covers the following:

- S8 (2) - A counsellor may apply for a protection order on behalf of the complainant if she is unable to apply personally
- S14 (3) A emergency protection order may direct the victim or perpetrator or both to attend counselling.
- S19 (2) - The Court may adjourn a hearing for a consent protection order to allow parties to seek legal representation or counselling
- S23 (1) – The Court may adjourn a hearing for an application for a final protection order and order a social enquiry report from a registered counsellor; or direct the complainant or the defendant to attend counselling with a Court appointed counsellor; direct the parties to attend a conciliation conference with the Court Register and a registered counsellor or social welfare worker...
- S24 – Counselling programs must be considered when a conciliation conference is ordered by the Court

3 United Nations Division for the Advancement of Women. Available at <https://www.un.org/womenwatch/daw/vaw/handbook/Handbook%20for%20legislation%20on%20violence%20against%20women.pdf> Accessed on 30 April 2021

4 Te Rau N Te Mweenga Act (Family Peace Act) 2014; Republic of Marshall Islands Domestic Violence Prevention and Protection Act 2011; Tuvalu Family Protection and Domestic Violence Act 2014

5 Cook Islands, Fiji Islands, Kosrae and Pohnpei States – Federated States of Micronesia, Kiribati, Nauru, Palau, Papua New Guinea, Republic of Marshall Islands, Samoa, Solomon Islands, Tuvalu, Tonga and Vanuatu.

- S33 – The Court may recommend parties to an application for a non-emergency protection order to seek counselling or mediation, give counselling and mediation services, information or adjourn the case to allow for counselling or mediation.
- S34 – Registration of counsellors by the Minister and requirements
- S34 (4) – Reporting by the domestic violence counsellor
- s34 (6) – Establishment of a register by the Office of the Attorney General
- s35 – The Court may direct either parties to an application, or both, for a protection order to participate in counselling.

The Kosrae Family Protection Act 2014 in FSM covers the following:

- S16.1332 - The court may make an order recommending either or both parties to participate in counselling.

A summary of counselling provisions in DV legislation of RWG member countries is available at Annex 1.

5. COVID-19 AND TROPICAL CYCLONES HAROLD, YASA AND ANA

On the 11th of March 2020, the World Health Organisation (WHO) declared COVID-19 and global pandemic. As Pacific Island governments responded with various restrictions to curb the virus, Tropical Cyclone Harold, a category 5 tropical cyclone swept through the Solomon Islands, Vanuatu, Fiji and Tonga. The countries were now faced with two national emergencies. Eight months later in December of 2020, a second category 5 tropical cyclone ravished parts of Fiji. This was followed closely by TC Ana in which made landfall on 31 January 2021.

6. IMPACT OF COVID-19 AND TROPICAL CYCLONES ON VAWG/DV

Emergencies have a gendered impact, affecting women and girls in a number of ways including their food security and nutrition, health (including reproductive health), livelihoods, and safety. Rates of violence against women and girls (VAWG) in the Pacific region are among the highest in the world, in some countries twice higher than the global average of 35%.⁶ Anecdotal evidence and a number of studies indicate that intimate partner violence, child abuse and sexual violence are highly prevalent during and after disasters.⁷ The already existing high rates of violence can be further exacerbated during emergencies.

In Vanuatu, a rapid gender analysis conducted by Care International after the TC Harold, found that it could disproportionately affect women and girls in a number of ways including adverse impacts to their food security and nutrition, health, livelihoods, and protection.⁸

With COVID-19 pandemic restrictions, the number of women seeking help for domestic violence support services, in the Pacific region surged.⁹ In Fiji, the Fiji Women’s Crisis Centre reported over a 100% increase

6 World Health Organisation. Violence Against Women – Intimate Partner and Sexual Violence Against Women- Fact Sheet. Retrieved 12 Mar 2021. Violence against women (who.int)

7 https://www.who.int/violence_injury_prevention/publications/violence/violence_disasters.pdf

8 Care International. Tropical Cyclone Harold Rapid Gender Analysis. Available at <https://www.care.org.au/wp-content/uploads/2020/04/TC-Harold-Rapid-Gender-Analysis-14.04.20.pdf> Accessed 20 April 2021

9 UNWomen. Across the Pacific, crisis centres respond to COVID-19 amid natural disasters. Available at Across the Pacific region, crisis centres respond to increased cases of violence against women amid COVID-19 | UN Women – Asia-Pacific Accessed on 20 April 2021

in March and April of 2020, compared to the same months in 2019.¹⁰ There was also a significant increase in calls to the domestic violence national helpline (1560). The helpline recorded 87 calls in February and 187 calls in March 2020. In April this jumped to 527 – approximately 50% of these DV related. Close to 50% of women are reporting a correlation between COVID-19 and an increase of violence, linked directly to the restrictions of movement and economic strains on families.¹¹ According to the Samoa Victim Support Group (SVSG), Samoa saw a 150 per cent increase in the number of helpline calls¹², during the restriction measures that were set in Samoa. In Tonga, there was a significant drop in numbers during the same time period, which may be attributed to restrictions in movement enforced in the country due to the COVID-19 pandemic.

7. GAPS IN LEGISLATIVE FRAMEWORKS IN RELATION TO AVAILABILITY OF AND ACCESS TO VAWG/DV COUNSELLING SERVICES DURING NATIONAL CRISES AND EMERGENCIES

The *Impact of COVID-19 on violence against women and girls and service provision: UN Women rapid assessment and findings report*¹³ establishes that the pandemic has an impact on VAWG service provision. The assessments states that the pandemic and responses to it affect the availability of and accessibility to essential services for women and girls who experience violence. There are a number of different impacts, however, the two outlined below is of significance for the RWG, particularly in relation to the DV legislation

Counselling service providers lack necessary authorisation to operate

In a number of PICs, lockdowns and curfews were imposed to control the movement of people in order to control spread of the COVID-19 virus. During the lockdowns, many counselling service providers could not continue to provide face-to-face services because they were not considered “essential services” (the degree of this differed across the region). A number continued with counselling online and through telephone. However, the ability for women to access online and telephone counselling was hampered due to limited awareness about availability and limited access to mobile technology. In low-income settings, women are less likely than men to own a phone. Even if survivors have access to a phone, they may find using them, in a situation of confinement and close monitoring by abusers at home, challenging and very unsafe. Women and girls with hearing disabilities may also find telephone counselling challenging given their disability. Face-to-face counselling provides a safe space to share experiences in an environment that is confidential and where empathy is practised by the counsellors. However, telephone counselling can be challenging for survivors given their space may not be safe and confidential and the challenges of building rapport and trust over the phone where callers cannot see counsellors. VAWG/DV service providers provide an essential and life-saving service that must continue throughout the course of the pandemic.

Lack of specific provisions in emergency regulations/orders or DV legislation to ensure availability of and access to counselling services during emergencies/disasters

None of the PICs DV legislation have specific provisions to ensure the availability of and access to counselling service providers during national emergencies (e.g., natural disasters or the pandemics), or which allow DV survivors exemptions during difficult circumstances such as lockdowns/curfews to leave their homes for safety and protection. This restricts access to and availability to this important service for survivors, especially during times when numbers of VAWG/DV cases have been proven to increase.

10 ABC Radio Australia. Fiji records spike in COVID-19 domestic violence cases. Available at <https://www.abc.net.au/radio-australia/programs/pacificbeat/spike-in-covid-19-domestic-violence-in-fiji/12218510> Accessed on 29 April 2021

11 <https://www.fiji.gov.fj/Media-Centre/Speeches/English/STATEMENT-BY-MINISTER-MERESEINI-VUNIWAQA-ON-THE-PA>

12 UN Women. Across the Pacific region, crisis centres respond to increased cases of violence against women amid COVID-19. Available at <https://asiapacific.unwomen.org/en/news-and-events/stories/2020/06/across-the-pacific-region-crisis-centres-respond-to-increased-cases-of-violence> Accessed on 20 April 2021.

13 UN Women. Impact of COVID-19 on violence against women and girls and service provision: UN Women Rapid Assessment findings. Available at <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/impact-of-covid-19-on-violence-against-women-and-girls-and-service-provision-en.pdf?la=en&vs=0> Accessed on 30 Apr 2021

NATIONAL AND REGIONAL COUNSELLING INITIATIVES TO RESPOND TO VAWG/DV DURING COVID-19

Despite challenges brought by the COVID-19 pandemic, countries are taking action to respond to the urgent needs of survivors. The following are counselling initiatives conducted to respond to VAWG/DV in the Pacific during the COVID-19 restrictions in PICs. It does not include initiatives responding to VAWG/DV in the aftermath of TC Harold, Yasa and Ana. Information on these were difficult to obtain and so is not included below. The following list is not exhaustive and covers only information from countries which the sub-committee was able to access online from reputable websites, and from feedback from the questionnaire conducted by the sub-committee members.

Disseminating information on VAWG/DV counselling

Counselling service providers as well as government also carried out extensive awareness raising by providing information on helplines and what survivors can do if they experienced violence during COVID-19 restrictions.


In the Cook Islands, text messages were disseminated to inform the public on counselling services which would be available during the restrictions.

In Fiji, the Ministry for Women, Children and Poverty Alleviation (MWCPA) established a strong multi-sector GBViE COVID-19 prevention and response plan, which included adapted referral pathways, an emergency phone tree, a national communications and IEC campaign, a resource kit for community workers, guidance for frontline workers (including a tip sheet on how to obtain a DV restraining order online) and a training package on responding to GBV & CP during COVID-19 for frontline and community workers. During the first wave of COVID-19 the MWCPA launched a Nationwide domestic violence awareness campaign that included 18 television adverts and 27 radio adverts (featuring 9 national and community leaders) were produced and aired for three months, promoting the national domestic violence helpline and child helpline, in English, in the three main languages. This was complimented by the development, printing and dissemination of close to 200,000 IEC materials promoting the national helplines, national and community referral guidance for women and children, gender and protection emergency phone tree, and again in the three main languages. In response to TC Harold and COVID-19, almost 800 IEC Stay Informed Booklets, containing essential support numbers and services to 15 Red Cross branches across the country, ultimately contributing to enhancing access for women and girls to essential, potentially lifesaving services during a double emergency.

In Kiribati, SafeNet members and the MWYSSA developed 28 IEC materials addressing COVID-19 impacts on GBV and Child Protection highlighting how women and girls are negatively affected by COVID-19; MHPSS community messaging; and how service providers can better support GBV survivors during COVID-19. Furthermore, GBV services and helpline numbers were widely disseminated ensuring women and girls were aware of how and where to access services in the event of a COVID-19 lockdown. Additionally, the Orange Door initiative was set up and led by the Kiribati Women and Children Support Centre (KWCS) in response to the closure of Our Lady of the Sacred Heart Crisis Centre (the only shelter for women fleeing violence in Kiribati) due to COVID-19 risks. Recognising the significant gap in domestic violence essential shelter services KWCS mobilised resources to set up the temporary shelter complete with counselling services.

In Samoa, the Ministry of Women, Children and Social Development (MWCSD) developed in response to COVID-19, the Community Response and Referral Guidelines for responding to GBV and child welfare. This guideline fits within the Interagency Essential Services Guidelines (IESG) and acts as a referral pathway for community workers who are not formally trained or working in GBV and CP spaces. The guideline outlines confidentiality and a do no harm approach. The document is available in English and Samoan. The guidelines consulted with disabled people's organisation to ensure inclusion.

In the Solomon Islands, community members across the Solomon Islands received MWYCFA messaging in English and Pidgin on SAFENET services, the 132 DV Hotline, self-care and violence prevention via national radio. Two press releases were released by SAFENET that raised DV awareness and informed the public about how to access GBV services.



In Tonga, the Tonga Women and Children’s Crisis Centre (WCCC) worked in partnership with mobile companies to actively promote their helpline numbers and the National Safety and Protection Cluster negotiated fee waivers for organisations providing toll-free DV hotlines, text blasts, radio blasts and talk-back television slots to promote access to available GBV counselling services. Other service providers, including Tonga National Center for Women and Children (TNCWC) and FWC Lifeline Crisis Center, also promoted access to GBV counselling. Tonga Family Protection Legal Aid Center recently launched in July 2021, a mobile app in partnership with UNDP aiming to provide access to GBV counselling services for survivors.

In Tuvalu, the Social Welfare Department conducted face-to-face awareness informing the public of telephone numbers and services available, including counselling, for those experiencing domestic violence during the COVID-19 pandemic restrictions. TV animations on DV safety planning and COVID-19 as well as the availability of counsellors, in both English and Tuvaluan languages, were also developed with the assistance of Pacific Women.

In Vanuatu, thanks to the Vanuatu Womens Centre behavioural change programming in development and humanitarian emergencies, women and girls were able to continue to access domestic violence counselling throughout COVID-19 emergency. In response to Tropical Cyclone Harold, COVID 19 and Tanna Ashfall; VWC implemented 70 mobile counselling visits from March – June 2020. An additional 4 mobile counselling visits were implemented throughout the rest of the year. During the mobile counselling, awareness raising sessions were held on VWC services, domestic violence during disasters and COVID 19. VWC distributed information on their 24-hour counselling line, their violence against women in disasters brochure and other information education and communication materials. Clients were also referred to VWC for further support when required. Women’s stories of their leadership and experiences of violence during the cyclone were documented. Awareness sessions were often held in tents or makeshift temporary shelters, as community spaces had often been destroyed. Due to COVID 19 and social distancing requirements, VWC staff had to innovate through approaches such as setting up tables/tents that enabled small groups and individuals to come to them to collect information and receive help versus the large public gatherings and age targeted community events that were used previously. Mobile counselling visits were also conducted in collaboration with National Women’s Day celebrations in May to boost morale in the affected communities. Through immediate response to the humanitarian emergencies, VWC reached 3498 people during mobile counselling visits across the Provinces of Penama, Tafea, Sanma and during the recovery period were able to reach a further 235 people in Penama during mobile counselling sessions.



Strengthening service providers capacity to respond to and manage the crisis or emergency

Federated States of Micronesia (FSM), Fiji, Tonga, Solomon Islands, Vanuatu and the Republic of Marshall Islands (RMI) counselling service providers participated in a telephone counselling training and exchange conducted in 2020, provided by Pacific Women Shaping Pacific Development (Pacific Women). The exchange sought to build on the counsellors and caseworkers existing knowledge and skills to provide safe and quality counselling to survivors of violence, including remote crisis support that is increasing in demand during the COVID-19 response period. In Tuvalu, the head office of the Tuvalu Christian Church also led a one-week training on counselling to all its pastors in Funafuti as well as others on the outer islands. Members of the Protection Committee in Solomon Islands underwent a series of gender-based violence in emergencies training since 2020.

In frontline service providers undertook training to strengthen understanding of COVID-19 and the impact on women and girls. This included awareness of the updated referral pathways in COVID-19, knowledge on the use of the community referral guidelines and emergency phone tree to refer survivors of violence to services.

Coordinating responses with other actors/ stakeholders

Coordination in a crisis or emergency is crucial. Effective coordination saves efforts, resources, time and, more importantly, lives. In the PICs, government and CSOs, including counselling service providers, sought to coordinate responses to support survivors of violence more effectively.



In Kiribati SafeNet produced an updated referral pathway and emergency phone tree in response to COVID-19 to ensure enhanced coordination and continued access to essential services for women and girls.

In the Solomon Islands, the SAFENET under MWYCFA developed a National and provincial specific COVID-19 referral pathway, emergency phone tree and key messages. These resources clearly articulate the COVID-19 referral standard guidelines for all SAFENET members during COVID-19 preparedness and lockdown stages. The referral pathway was adapted to suit the provinces and established communication trees ensuring that women and girls in rural provinces could continue to access services despite COVID-19 measures. Furthermore all 7 SAFENET partners implemented COVID-19 preparedness plans and victims/survivors are now accessing GBV services that integrate COVID-19 safety measures (i.e., hand sanitizing, social distancing in SAFENET offices).

In Tonga, to address the COVID-19 pandemic and TC Harold, the Government activated the National Safety and Protection cluster, which brings together eight government ministries, 15 CSOs and 1 international NGO in the coordination of emergency. With advocacy at the highest levels of Government, the cluster led by the Ministry of Internal Affairs were able to ensure that the government included addressing GBVIE based on the National Emergency Response Plan that was endorsed by Cabinet in April 2020. The plan included adaptation of referral pathways, building the capacities of emergency first responders on recognizing and addressing GBV cases as well as increasing awareness on existing help and support from GBV service providers during and immediately after an emergency.

Advocacy and lobbying to ensure VAWG/DV service providers, including counselling service providers are recognised as essential services during COVID-19 restrictions

The COVID-19 restrictions meant that the majority of VAWG/DV service providers in the PICs, with the exception of the police, were not considered essential services, therefore, could not continue to operate on normal business or operating hours. In Fiji, the Fiji Women's Crisis Centre (FWCC) successfully advocated for and was recognised as essential services, hence being able to continue opening their doors for survivors. In the Solomon Islands the SAFENET coordination group were successful in obtaining mobility exemptions for all 7 SAFENET members to allow members to respond to GBV incidences during lockdown. In Tonga, social and legal services applied for and received permits from the National Emergency Management Organisation (NEMO) to operate during emergencies, including the COVID-19 lockdowns and TC Harold. The Tonga Ministry of Internal Affairs and GBV counselling stakeholders are currently seeking for legal & social services to become essential services in time of emergencies.

Utilising technology to provide counselling services

Due to restrictions on social distancing, lockdowns and curfews imposed, counselling service providers adapted their mode of service provision, capitalising on available technology, in order to continue to provide counselling to survivors. In Fiji, the FWCC directed more resources towards providing phone counselling from home and in Tonga the Women, Children Crisis Centre (WCCC) developed an online version of the Fanguna Counselling Program to enable women and girls who experience violence to have easier access to information, particularly those underserved in the outer islands. The online platform was piloted with different audiences in Tonga, and the Fanguna Counselling radio and online officially launched on 25 November 2020 to kick start the 16 Days of Activism Against Gender Based Violence. Making counselling services available online responds to COVID-19 restrictions and is also notably a direct response to how community members in Tonga access information.

Rapid Assessments to establish Socioeconomic Impacts of COVID-19

Various countries also conducted rapid assessments on the socioeconomic impacts of COVID-19 and established the need to support and support counselling services. The Tuvalu Rapid assessment of Socio-Economic Impacts of COVID- 19 Report by Ministry of Health, Social Welfare and Gender 2020, strongly recommend the support and establishment of safe spaces and counselling services available to all islands and populated islets




8. CONCLUSION

To conclude, in national emergencies and crises like the current COVID-19 pandemic and recurring natural disasters such as tropical cyclones, numbers of VAWG and DV rise. Availability of and access to services for survivors, including counselling, are being impacted. Current laws do not guarantee the availability of and access to these important services for women and girls affected by violence. The RWG must seek to address this.

9. RECOMMENDATIONS

The counselling sub-committee puts forward the following recommendations for the RWG:

- Conduct a legislative review of RWG members' Family Protection / Domestic Violence legislation to determine whether existing DV legislation in PICs are aligned to the latest model best practices in providing a human rights-based approach and is survivor-centred. The review should also examine whether current legislation is able to respond effectively during national emergencies such as the current pandemic and natural disasters. The review must provide recommendations for PICs.
 - Develop a model framework for counselling for the Pacific region, which is also aligned to best practices for responding during emergencies. The framework will guide national counselling work and standards, using a human rights and survivor centred approach, and aligned to international best practices suitable to the Pacific context.
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ANNEX 1

Table 1: Counselling Provisions in DV legislation of RWG member countries

Legislation	Provisions in relation to counselling
Fiji Family Law (Amendment) Act 2012	<ul style="list-style-type: none"> • S 9-14 – Mechanisms for assistance on marriage counselling • S11 (1) The Director of Counselling must advertise the existence and availability of counselling facilities of the respective Family Division • S11 (2) Director of Counselling to make facilities available when needed.
Fiji Domestic Violence Act 2009	<ul style="list-style-type: none"> • S1 (g) - The Minister may make regulations prescribing counselling programs (for perpetrators), including the criteria to become a counsellor • A safety planning conference must be jointly convened by a Clerk of the Court and a domestic violence counsellor. • S37 (1) - The Court may order the respondent to attend counselling specified by the Court • S37 (2a – 3) - The Court must take into account certain considerations when deliberating to order counselling for the respondent
Kiribati Te Rau N Te Mweenga Act (Family Peace Act) 2014	<ul style="list-style-type: none"> • S7 - Registration and deregistration of counsellors by the Minister • Criteria for becoming a registered counsellor. • S8 - Role/duties of registered counsellors. • S11 (2b) - A counsellor may apply for a protection order on behalf of the complainant • S30 (3b) - Duty of police to obtain counselling services where needed • S32 (1) - Duty of healthcare professional/social service provider to advise complainant of counselling and refer for counselling • S42 (3) - The Advisory council to advise and make recommendations on adequacy of counselling support services and data on referrals to counselling services each year
Kosrae Family Protection Act 2014	<ul style="list-style-type: none"> • S16.1332 - The court may make an order recommending either or both parties to participate in counselling
Pohnpei Domestic Issues Act 2017	<ul style="list-style-type: none"> • s7A-123(1) - Court may order a person to complete a counselling program as a result of being in divers on, entering a deferred plea of guilty to FV, or is adjudged guilty of FV

<p>Republic of Marshall Islands Domestic Violence Prevention and Protection Act 2011</p>	<ul style="list-style-type: none"> • S8 - A court may include a condition in the protection order for one or both parties to attend counselling or to recommend counselling mediation • S12A - counsellor may apply for a protection order on behalf of the complainant • S23 - If a counsellor, in her/his official capacity, believes that DV has occurred to a person or child, or there is evidence that the person is at risk from DV, she/he shall report to the police or apply for a protection order • S25 (2) - A police officer responding to a request for assistance may advise the complainant of where to seek counselling • S23 (1) - The court may adjourn a hearing for a consent protection order to allow parties to seek counselling • S26 (3) - The Domestic Violence Prevention and Protection Fund shall be used to assist domestic violence programs/services, including counselling programs
<p>Samoa Family Safety Act 2013</p>	<ul style="list-style-type: none"> • S2 - “authorised counselling agency” means any organisation, association, incorporated body, person or group of persons or agency with qualified counsellors providing counselling to victims and perpetrators of domestic violence approved by the Minister of Justice and Courts Administration. • S4 (3) Subject to subsection (4), and despite the provisions of any other law, an application [for a protection order] made under this section may be brought on behalf of the complainant by any other person acting on behalf of the complainant and may include a...counsellor...
<p>Solomon Islands Family Protection Act 2014</p>	<ul style="list-style-type: none"> • s28 – Duty of the court to assist an affected person, who has applied for a protection order and wishes to seek mediation with the respondent, to arrange mediation with a registered counsellor. • s46 (b) – Duty of healthcare provider to refer survivor/victim for counselling or further medical treatment, as appropriate. • S47 (1b) – Duty of police officer, who has issued a PSN, to assist the affected person to access counselling • s54 – Registration and deregistration of DV counsellors and requirements to be registered by the Minister responsible for women • s55 – Register of counsellors and responsibility of Permanent Secretary Ministry responsible for women’s affairs to keep the register; register may be inspected free of charge • s60 (1) – offence to obstruct, threaten or intimidate a registered counsellor

Tonga Family Protection Act 2013

- S6 (1) Appointment of counsellors to be done by minister in consultation with family protection advisory council.
- S6 (3) - Role of registered counsellors
- S6 (4) – A counsellor may seek assistance from any police officer
- S7 – Establishment of a register for registered counsellors by the Ministry responsible for internal affairs or Minister assigned responsibility for administration of the Act
- S9 (2) – A registered counsellor may apply to the Court for a protection order on behalf of a complainant who is unable to
- S21 – The Minister shall promote public awareness campaigns and programs for preventing and reducing prevalence of DV, including for counsellors.
- S26 (2) – Duty of police office to, where necessary, make arrangements for complainant for counselling.
- S27 (1) - Duty of health practitioner to refer a complainant for counselling as appropriate
- S27 (4c) – Duty of social service provider to refer person at risk to counselling if required

Tuvalu Family Protection and Domestic Violence Act 2014

- S8 (2) - A counsellor may apply for a protection order on behalf of the complainant if she is unable to apply personally
- S14 (3) A emergency protection order may direct the victim or perpetrator or both to attend counselling.
- S19 (2) - The Court may adjourn a hearing for a consent protection order to allow parties to seek legal representation or counselling
- S23 (1) – The Court may adjourn a hearing for an application for a final protection order and order a social enquiry report from a registered counsellor; or direct the complainant or the defendant to attend counselling with a Court appointed counsellor; direct the parties to attend a conciliation conference with the Court Register and a registered counsellor or social welfare worker...
- S24 – Counselling programs must be considered when a conciliation conference is ordered by the Court
- S33 – The Court may recommend parties to an application for a non-emergency protection order to seek counselling or mediation, give counselling and mediation services, information or adjourn the case to allow for counselling or mediation.
- S34 – Registration of counsellors by the Minister and requirements
- S34 (4) – Reporting by the domestic violence counsellor
- s34 (6) – Establishment of a register by the Office of the Attorney General
- s35 – The Court may direct either parties to an application, or both, for a protection order to participate in counselling

**Vanuatu Family
Protection Act 2008**

- S8 (1) - The Minister may declare persons to be registered counsellors....
- S8 (2) - The Minister may declare a person to be a registered counsellor only if he or she has appropriate qualifications or experience in counselling or mediation in relation to domestic violence.
- S8 (3) - A person who in accordance with the rules of custom conducts counselling or mediation in relation to domestic violence may be considered to have appropriate experience.
- S8 (4) - In making declarations [for a person to be a registered counsellor], the Minister must:
 - (a) consult with the President of the National Council of Chiefs and the Director of the Department of Women's Affairs and the Director General of the Prime Minister's Department; and
 - (b) ensure so far as practicable that there are registered counsellors in each local government region.
- (5) - A declaration must be in writing and a copy of it must be published in the Gazette as soon as practicable after it is made.
- S9 - Establishment of a register of counsellors
- S16 (1) - A court may direct either or both the defendant and the complainant to participate in:
 - (a) counselling; or
 - (b) mediation; or
 - (c) both counselling and mediation;to be conducted by a registered counsellor.
- S16 (2) - A court may make an order for a person who is not a registered counsellor to conduct counselling and/or mediation if the defendant and the complainant agree that he or she conducts the counselling and/or mediation.
- S51 - The Minister may, by Order in writing, make regulations...providing for training programs for...registered counsellors and persons wanting to become registered counsellors

**Nauru Domestic
Violence and Family
Protection Act 2017**

- 19 (1) - On hearing an application, the Court may make a permanent protection order against a respondent if [the Court]

(d) has received a report from a counsellor under Part 5 of the Act that the parties cannot reconcile.
- 26 (1) - In granting a protection order, the Court must make a supplementary order for the parties to jointly or severally attend mandatory counselling.
- S26 (2) - Any person who fails to attend counselling without reasonable cause shall be in contempt of Court and may be liable to imprisonment for a period not exceeding 1 month.
- 27 (1) - The Counsellor must take into account [a number of] factors when providing counselling services:
- S27 (2) - The counsellor must submit to the Court reports of counselling in each separate matter on a fortnightly basis or as directed by the Court.
- S28 – Registration and deregistration of counsellors
- S29 - Register of Counsellors
- S30 (1) - If a patient notifies a health practitioner that he or she has been a victim of domestic violence, the health practitioner must: examine and refer him or her for counselling or further medical treatment, as appropriate;
- S35 (1) - A person commits an offence if the person obstructs, threatens or intimidates a registered counsellor...providing services to a victim.



2021 RWG Annual Meeting

24 - 26 August, 2021

23 - 25 August 2021 (Cook Islands)

Discussion paper on the data collection and monitoring and evaluation of DV legislation

INTRODUCTION AND BACKGROUND

The Pacific region has made progress in passing legislation that responds and addresses domestic violence (DV). The key focus is the implementation of these legislations to ensure that survivors of DV can access services and information. Data collection and analysis is key to ensure there is effective monitoring and evaluation being carried out and informs the decision making of the lead government ministry on the impacts of the domestic violence/family protection (DV/FP) legislation.

This discussion paper has been prepared by the Data Collection and Monitoring & Evaluation sub-committee, with the support of the Secretariat (Human Rights and Social Development Division (HRSD)). The members of the sub-committee included representatives from the Cook Islands, Federated States of Micronesia (FSM), Marshall Islands, Samoa, Solomon Islands and Tuvalu.

This paper was informed by the contributions provided by members of the sub-committee and research undertaken by the Secretariat.

PURPOSE

The purpose of this paper is to inform and guide the discussions of the RWG of the current scope of collection and analysis of DV data in the region and monitoring and evaluation of the implementation of the respective DV/FP legislation. The discussion paper will also provide recommendations to the RWG on how this priority area may be strengthened to support informed decision making by governments.

Key objectives include:

1. To examine current practices in the region to collect and analyse data to support the implementation of DV/FP legislation.
2. To discuss strategies to improve the monitoring and evaluation (M&E) of the implementation of DV/FP legislation.
3. To provide recommendations to the RWG to stimulate further discussions on strategies to improve data collection and M&E of DV/FP legislation at the national level and at the regional level.

It is intended that the RWG will use the discussions arising from this discussion paper to establish its strategy to address the challenges and gaps in relation to the availability of data on implementation of DV/FP legislation to support stronger decision making and to assist in the effectiveness of the legislation as a response mechanism.

STATUS OF COLLECTION AND ANALYSIS OF DV DATA IN THE REGION

Providing Update Reports on DV Legislation.

Strengthening data collection and ensuring the monitoring and evaluation of the implementation of the DV/FP legislation is key for countries to be able to reflect on the effectiveness of the legislative provisions in the respective DV/FP legislation. Some of the countries in the region specifically provide for the lead Ministry to provide an update report in the law. These include:

Kiribati: Provides a duty on Ministry of Women, Youth, Sports and Social Affairs to prepare a report with statistics annually¹.

Pohnpei State (FSM): The Department of Public Safety have a duty to maintain a complete and systematic record of all DV protection orders².

Solomon Islands: The Minister must set up public awareness programmes and report on these³.

These provisions explicitly provide for the lead Ministry to provide an update and collate data on the legislation. In other countries this role is implied on the lead Ministry to provide this update on the implementation of the law. However, implementation is carried out by various government ministries and civil society organisations. These include the police, hospital, courts, women's organisations and they collect information on the clients they support and the type of support that a person receives, and they may also refer them other services for further assistance. The information is highly relevant for the lead Ministry as it coordinates the wholistic implementation of the legislation. The on-going challenge continues to be the lack of DV data being collected or the available data is not shared with the lead coordinating Ministry. Additionally, the level of expertise, lack of training and knowledge of officials or data collection officers in efficiently collecting and gathering genuine data is lacking, hence, the need for improvements in this area.


Current Data Sources.

Various stakeholders in both government and civil society organisations continue to provide support for survivors of domestic violence. Through this work they collect data on the support that is provided, these include:

- » Lead Coordinating Government Ministries – data on their services provided to assist a survivor, includes also the awareness support.
- » Police – Data on the report received and support that has been provided.
- » Judiciary – protection orders that are issued.
- » Health – patients that are assisted, including counselling support that is provided.
- » Education – children that are assisted as a result of the impacts of DV.
- » Civil Society Organisations – various CSOs collate data on the support that they provided, including awareness programs.
- » Attorney General and Prosecutions Offices – collate data on the cases that are filed.
- » Correction Services – collating information on perpetrators that may come through the system.

There are various organisations that collect data to track and to support the on-going work that they each carry out. It primarily is utilised to track service delivery and operations and not necessarily as data source for implementation of DV legislation. However, with the challenges of reliable data pools, the administrative

1 Kiribati Family Peace Act.
2 Pohnpei State Domestic Violence Act.
3 Solomon Islands Family Protection Act.



data that is collected by these organisations become an important source that is relied upon to understand the effectiveness of the implementation of the law. In addition, it is often not being brought together to better understand the wholistic effectiveness of having a legislative framework. There needs to be better understanding of:

- » The rates of domestic violence that is being reported and where people are most comfortable to report.
- » The types of assistance being sought.
- » The effectiveness of the support and protection that is being provided. Are these addressing the violence or is it continuing?
- » What types of awareness programs are being carried out? Where are the programs and information being provided? What messaging is being provided?

Research and Surveys.

Family Health and Safety Surveys⁴ – these surveys utilise the WHO methodology for GBV prevalence including qualitative ‘focus group’ insights into key findings in the respective countries provided a baseline on the DV statistics in countries. It was an effective tool to support the advocacy campaigns in the countries to pass the respective legislation. It portrayed the various forms of domestic violence that were being experienced by women and girls.

In some cases, government offices that are responsible for gender lead in the FHSS surveys with technical support from CSOs, in other cases it is led by CSOs. In Fiji the Women’s Crisis Centre led the national research that set out the domestic violence statistics. This has been a key research that has been tool for advocacy and assisted in decision making. Fiji’s rates of violence against women are among the highest in the world. According to the Fiji Women’s Crisis Centre’s National Survey, 64% of women who have ever been in an intimate relationship have experienced physical and/or sexual violence by a husband or intimate partner in their lifetime. This compares to 30% of the estimated global prevalence for physical and/or sexual intimate partner violence. The national survey called *Somebody’s Life, Everybody’s Business* shows 24% of women suffer from physical and/or sexual violence each day⁵.

Given the alarming rates of violence against women revealed by the Survey and the disturbingly high number of reported cases of heinous crimes being committed against women, girls and children, it is therefore important for the legislature to take sensitive approaches recognising the gendered nature of domestic violence when making laws.

MULTIPLE INDICATOR CLUSTER SURVEY (MICS)

This is a standardised household survey tool that helps in monitoring data gaps to monitor the status of national development plans and global Sustainable Development Goals (SDGs). The key objectives of MICS are:

1. Collect social development data on health, nutrition, education, child protection, water and sanitation, human capital and well-being of children, women and men
2. Build capacity of national partners in data collection, compilation, processing, analysis and reporting on the situation of children, women and men; and

4 Countries included: Federated States of Micronesia, Samoa, Solomon Islands, Kiribati.

5 Fiji Women’s Crisis Center (2013), *Somebody’s Life, Everybody’s Business! National Research on Women’s Health and Life Experiences in Fiji (2010/2011): A Summary exploring the prevalence, incidence and attitudes to intimate partner violence in Fiji*, Available at : <http://www.fijiwomen.com/wp-content/uploads/2017/11/National-Survey-Summary.pdf>

3. Provide decision makers with evidence on the situation of children's and women's rights and other vulnerable groups in the Pacific.

The 14 countries and territories included in this initiative are: Cook Islands, Federated States of Micronesia, Fiji, Kiribati, Marshall Islands, Nauru, Niue, Palau, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu and Vanuatu⁶.

Demographic Health Surveys (DHS)⁷ – Other countries utilised these surveys to assist them in obtaining similar data on domestic violence. It is key to note that the Domestic Violence module from the DHS is now part of the MICS and the DV module is optional for countries to include

The various sources of information highlighted above provides a scope of the various data that is being collected for various purposes. However, it is often difficult for the lead coordinating ministry to access and be able to reflect on the implementation of the law.

KEY IMPACTS OF COVID-19 AND CRISIS (INCLUSIVE OF THE COVID-19 PANDEMIC AND TROPICAL CYCLONES), DATA COLLECTION AND MONITORING THE EFFECTIVENESS OF THE DV/FP LEGISLATION.

A key impact of the COVID-19 pandemic globally has been the increase in statistics of domestic violence. This has been a ripple effect of the prolonged closed borders, the increased unemployment rates, the reduced working hours, prolonged periods of schools being closed, increase in working from home and home school hours, increased in stress levels as families grapple with the challenges of the pandemic. All these challenges have magnified an already high rate of domestic violence that had already existed. It also brought to the fore the on-going discrimination that women and girls face daily.

In the Pacific, countries swiftly responded to the global pandemic and closed its borders. The region experienced the detrimental impacts that this pandemic inflicted on families. In Fiji as the second wave of the pandemic hit in April 2021 it quickly saw a connecting impact with the high rates of calls to the toll-free number that was supported by the Ministry of Women, Children and Poverty Alleviation and run by the counsellors of the Fiji Women's Crisis Centre. In May they received a total of 800 calls, of which 75% were domestic violence related⁸. There was a range of assistance being requested from financial support, to medical assistance and advice for other support. The trends in numbers of those survivors experiencing violence continued to increase and this was observed through the constant increase in numbers of people that continued to seek assistance through the toll-free number (Domestic Violence Helpline Number: 1560).

In Tuvalu a COVID-19 Rapid Assessment was carried out. There was recognition to fully understand the impacts of DV on the island with the already limited DV support services that were already available. Data was collected through complaints that were received with the police. While the numbers for 2020 was still lower than 2019 there was recognition that overall people would not feel comfortable to report the matter to the police. It was also noted that as a preventive measure for COVID-19 government encouraged the relocation of people on Funafuti to their home island⁹. This may also impact the ability of people to seek assistance through the limited services.

In other countries there were similar trends from key services like the courts, counselling and safe accommodation that were limited in their support during the COVID-19 pandemic. Ways of working had to change to be able to better support and protect survivors. This included counselling services having to be provided through calls, in some countries relooking at options of safe accommodation as the current ones were all occupied. However, it continues to be a challenge to fully understand the effectiveness of the law during times of crisis if there is limited data being collected or shared with the lead coordinating government ministry.

6 Multiple Indicator Cluster Survey, UNICEF, Available at : <https://www.unicef.org/pacificislands/stories/multiple-indicator-cluster-survey-pacific>

7 Countries included: Tuvalu and RMI.

8 Danford, I., *Fiji Women's Crisis Center receives more than 800 calls in May*, Available: <https://www.fijivillage.com/news/Fiji-Womens-Crisis-Centre-receives-more-than-800-calls-in-May-rx854f/>

9 Gender Affairs Department, *Rapid Assessment of the Socioeconomic Impacts of the Global COVID-19 Pandemic*, Ministry of Health, Social Welfare and Gender Affairs, Available at : https://pacificwomen.org/wp-content/uploads/2020/09/Tuvalu-COVID19-Rapid-Assessment-Report_Leaflet.pdf

KEY LESSONS OF APPLYING THE DV/FP LEGISLATION

1. Coordination of data.

There is progress being undertaken in the respective countries to ensure there is better coordination or services/support for survivors. This is through the SAFENET, service delivery protocol and the respective Domestic Violence taskforces that are being established in the countries. These mechanisms also provide an opportunity to ensure that data is being coordinated to be able to reflect the effectiveness of the legislative framework. Recognising that the law is one part of the puzzle of support services that a survivor can access, it is key to therefore understand whether the law addresses DV and whether it is responsive during times of crisis. There is also a need to have clear guidelines on the ethical procedures of sharing and usage of the data that partners share with the lead ministry.

2. In addition, regional programs like UNFPA kNow VAWdata have developed a data collection protocol and decision tree for collecting GBV data and COVID. There may be opportunities in connecting these programs and with the lead Ministry to track *Review of the Legislation*.

Few countries in the region have had their DV/FP legislation for over 5 years. It becomes a key time for a country to reflect on the law and whether it can respond to the high rates of DV in a country. However, a review process and advice for this can only be guided by genuine and reliable data and analysis of effectiveness or usage of the law.

3. Up-to-date data



In difficult times like the COVID-19 pandemic we know that the trends of violence increases. However, there is a need to ensure that up-to-date data is collected in order to establish whether there was a spike (or drop) across the service providers, and to understand the respective responses services that is required. The delay or the lack of accurate data makes it difficult to analyse the trends, makes it challenging to ensure that there are adequate resources that may be required to support the current situation. The law may provide for flexible protection, however without the up-to-date information on the DV trends it will continue to be a challenge to be able to understand the responsiveness of the law.

CONCLUSION

The COVID-19 pandemic has added an additional layer for implementation of the DV/FP legislation in our region. Both COVID-19 and domestic violence are global pandemics. It has highlighted the gaps that need to be addressed to ensure that a survivor receives wholistic support. It has also provided key lessons for service providers in the way that they provide their service. While the Pacific has not been spared with the continued increase in DV cases, the magnitude of the problem and the ability of the law to respond to these cases continue to be a challenge because we do not have the relevant information to be able to see the whole picture of implementation.

RECOMMENDATIONS

1. Prioritise the collection of comprehensive data on the gendered impacts of COVID-19, including disaggregated data on the sex, age and persons with disabilities. Data will need to be continuously analysed to ensure meet immediate needs and inform future policy development and changes.
2. Invest in the collection, analysis and use of safe, ethical, culturally sound and survivor-centred data, including prevalence of violence against women and administrative data, to inform legal frameworks, policies and strategies, and for assessments of emergency events. Data collectors must be well-trained and gender, human rights and disability sensitised, and respondents fully informed.
3. Establish data sharing and ethical protocols that allow for DV data to be streamlined with the lead coordination ministry. Embedding this within the existing service delivery networks that exist in the countries.

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4. Prioritize through planning and budgeting processes the strengthening of statistical capacity and functions by:
 - i. Identifying clear sustainable funding sources from within government and development partners to undertake integrated statistical surveys that incorporate the collection of new DV baseline data that is disaggregated by sex, age, disability, location and related to gender and human rights outcomes and cover the most vulnerable groups
 - ii. undertaking national capacity assessments that identify statistical and data gaps and challenges which will strengthen the collection of baseline DV data;



Spotlight
Initiative



Pacific
Community
Communauté
du Pacifique

2021 RWG Annual Meeting

24 - 26 August, 2021

23 - 25 August 2021 (Cook Islands)

Discussion paper on the scope of protective measures under DV legislation in times of public emergencies and natural disasters.

INTRODUCTION AND BACKGROUND

Coordination and collaboration by government and civil society stakeholders is key when providing support and assistance for survivors of domestic violence. This is important to ensure the effective implementation of Domestic Violence (DV) or Family Protection (FP) legislation. A multisector, coordinated approach to supporting survivors of DV ensures that regardless of when and where a survivor reaches out for assistance there will be relevant service providers that will be able to assist a survivor's unique needs, and coordinated referrals across agencies. During periods of crisis (which includes the pandemic and natural disasters) coordination and collaborative services are required, and at times, additional services required.

This discussion paper has been prepared by the Advisory Council/Committee sub-committee, with the support of the Secretariat (HRSD). The members of the sub-committee included representatives from the Federated States of Micronesia (FSM), Marshall Islands, Samoa, Tonga and Tuvalu.

This paper was compiled from the discussions with the members of the sub-committee and also research undertaken by the Secretariat.

PURPOSE

The purpose of this paper is to inform the RWG of the scope and accessibility of protective measures available to survivors of family violence during times of public emergencies and provide recommendations to the RWG.

Key objectives include:

1. To examine, identify and discuss the scope of protective measures available to survivors of family / domestic violence during times of public emergencies.
2. To discuss the accessibility of protective mechanisms under DV / FP Legislation during times of public emergencies.
3. To provide recommendations to the RWG to stimulate further discussions, through the work of Advisory Councils or various national coordination bodies, on strengthening the coverage of DV / FP legislation for the safety and protection of survivors of family / domestic violence in times of public emergencies.

It is intended that the RWG will use the discussions arising from this discussion paper to establish its strategy to address the challenges and gaps in relation to the availability of and accessibility to DV protective measures available by law.

The SPC Human Rights & Social Development Division is supported through program funding from the Governments of Australia and Sweden.

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STATUS OF ADVISORY COUNCILS/COMMITTEES IN THE REGION

Advisory councils / National coordinating bodies for DV legislation in the Pacific

In the region, five countries have established advisory councils under their DV/FP legislation. These include Kiribati, PNG, Solomon Islands, Tonga and Tuvalu. There are other countries that have established broad coordinating committees even though not set out in law. The committees or taskforces coordinate the various stakeholders responsible for the implementation of a broad range of EVAWG prevention and response, including relevant DV legislation.

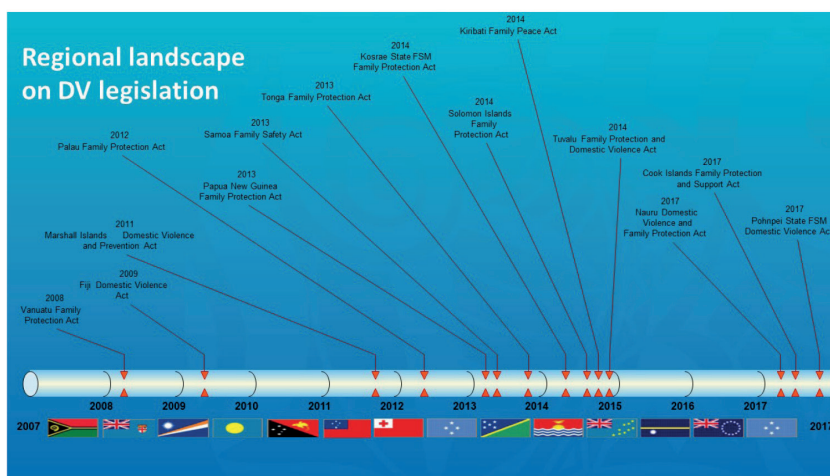
Laws, in these countries that sets out advisory councils, specifically provide for:


- » Establishment of these bodies;
- » A specific role for the advisory body to support and makes recommendations on the services and measures that are able under the law for the lead Minister;
- » May make regulations prescribing matters required to implement the law;
- » A key role of coordinating the various stakeholders that have a role in implementation of the law.

In several countries in the Pacific region have interagency, broad coordination task forces or committees that oversee broad EVAWG actions at national level. For example, in Kiribati, the Ending Sexual and Gender Based Violence (ESGBV Committee) or Fiji with the National EAW Task Force, these have been established by cabinet decision to assist in overall coordination of government and non- government action in the prevention and response to EVAWG. These broader coordination bodies oversee and support broad coordination of efforts to prevent and respond to gender-based violence (GBV), such as coordination of frontline services, carrying out awareness programs and providing policy advice and direction. These coordination bodies sit alongside FP/DV advisory council in countries where both exist.

Several countries in the region have accelerated on establishing protocols, guidelines and coordination bodies specifically for frontline service providers to ensure that women and girls who experience violence benefit from coordination, collaborative care with safe referrals and compassionate care. For example, in Solomon Islands and Kiribati SAFENET and in Fiji, the SDP Working Group. In Tonga this would be the FPAC Referral sub-committee and the Case Management Working Group.

The legal framework for the protection of individuals against the problem of family violence





13 Pacific Island countries now have specific legislation to address the problem of family / domestic violence. The legislations provide a response to address domestic violence in the respective countries. The legislation was developed with a specific purpose which included:

- Provide greater protection from domestic violence and clarify duties of Police (FIJ / TON)
- Provide for the offence of domestic violence and family protection orders in cases of domestic violence (VAN)
- Promote and preserve harmonious domestic relationships and prevent acts of violence within families (POHNPEI)
- To provide for the protection and safety of persons who are subject to physical, sexual or mental abuse occurring within, or as a consequence of their domestic interpersonal relationship with the abuser or abusers. (KOSRAE)
- Provide for the protection of families from domestic violence (SOL)
- Provide for greater protection from violence within domestic relationships (TUV / KIR)
- To ensure investigation, prosecution and punishment of perpetrators of domestic violence. (RMI)
- Provide for the protection of victims of domestic violence and the rehabilitation of persons in domestic relationships against domestic violence (NAR);
- Provide for responses to domestic violence (CKI)

Police Safety Orders / Notices

Police Safety Orders are available under the Domestic Violence Legislation of Cook Islands, Kiribati, Nauru, Palau, Solomon Islands and Tonga.¹

Protection Orders


These are available under the DV legislation of Cook Islands, Fiji, Kiribati, Kosrae (FSM), Palau, Papua New Guinea, Pohnpei (FSM), Republic of the Marshall Islands, Samoa, Solomon Islands, Tonga, Tuvalu, and Vanuatu.

KEY IMPACTS OF COVID-19 AND CRISIS (INCLUSIVE OF THE COVID-19 PANDEMIC AND TROPICAL CYCLONES) AND THE ROLE OF ADVISORY COUNCILS AND COMMITTEES.

At the height of the implementation of COVID-19 measures, people were required to spend more time living in confined spaces. Schools were closed, public gatherings restricted, curfews put in place, there was an increase in unemployment rates with the prolonged border closures. All these stressors have contributed to the already high rates of violence that have been experienced in families in our region. Some countries, such as Fiji experienced tropical cyclones at the same time as COVID-19.

Response services focussed on health responses to the COVID-19 pandemic and also a justice response to those that breached government restrictions. DV services across the region advocated to be deemed 'essential services' to ensure continued operations despite the restrictions. Frontline crisis centre's adapted their modalities to on-line counselling and remote telephone and hotline support because of the challenges with meeting face-to face. Across the region, National Women's Machineries adapted their coordination mechanisms and multisector protocols to ensure they could bend and flex during disasters and the COVID-19 pandemic.

1 In Tuvalu, it is available under the Police Powers and Duties Act.



With the restriction to the freedom of movement during the pandemic has raised a lot of questions with regards to the accessibility and responsiveness of the DV legislation, as well as innovative approaches coming out of countries.

THE MEASURES TAKEN TO PREVENT OR CONTAIN THE SPREAD OF COVID-19

From 31 January, Pacific Island countries started to put in place measures to respond to COVID 19. These measures presumably derived their mandate from either the country's Constitution or legislation.

At the height of the uncertainties associated with COVID-19, most PICs resorted to declaring States of Emergencies.

Other measures included:

Public Health and Disaster Management Legislation also make

- a. Public Health Measures (Fiji)
- b. Disaster Management Measures (Fiji and Nauru)
- c. Emergency Management Act – Tonga

The implementation of these measures were evident in the following ways:


- Closure of schools
- Social distancing
- Curfews

While there have been on-going challenges through the pandemic and the impacts of the various Tropical Cyclones, it has also provided an opportunity to explore and adapt various initiatives. For example, in 2019 Fiji launched its *Fiji National Delivery Protocol for Responding to Cases for GBV* and since then the SDP has been adapted for emergency response and COVID-19. In addition, Tonga also launched in 2021 its *Tonga National Service Delivery Protocol for Responding to GBV*, similarly a key aspect of this document was to ensure the establishment of minimum standards and to establish coordination pathways, that could bend and flex before, during and after emergencies.

KEY LESSONS OF APPLYING THE DV/FP LEGISLATION

1. Accessibility

The COVID-19 pandemic has highlighted the challenge of ensuring the provisions of the law is accessible during times of crisis. The DV/FP legislation in particular was drafted to be understandable and accessible for survivors of DV. To ensure that people were able to seek information and services without the reliance on a lawyer. An example of this is through the application process for a protection order, the various countries have developed simple forms and set out processes. However, the applications still have to be submitted to courts that are mostly based in the urban areas. The COVID-19 pandemic also saw the restriction or closure of the courts and so it made more difficult for survivors to access protection orders. In response to this, some countries developed IEC materials and clear guidance for women on how to access a DVRO online. Many of the FP/DV legislation have existing provisions that allow for phone applications to be made for protection orders, however these systems have not been activated in the countries.



Health care services for both physical injuries and psychological impacts are also covered by the FP/DV legislation. Further, none of the countries in the Pacific had specific provisions in their domestic violence legislation to allow survivors exemptions to access essential services like counselling and DV protection orders during lockdowns and curfew hours, or cross into containment zones to access these. In practice though service providers like Police, etc have been granted status as essential services. Many governments also diverted funding and resources towards efforts to prevent and response to the outbreak of COVID-19 and in doing so, took away much-needed attention from essential services required by survivors of violence. Accessibility to Legal and Social services support during emergencies was a major challenge as they are not considered essential services in Tonga and many other Pacific countries.

2. Coordination and provision of essential services during a pandemic.

The pandemic also highlighted another gap for implementation during a pandemic. To ensure effective responses to DV and implementation of the legislation, it is key that there is a coordinated response. In many countries there are intensive efforts to coordinate response, but it goes beyond the FPA/DV legislation is around the broader GBV coordinated care work (e.g. Safe Net, Samoa IESG, Fiji SDP, etc). These mechanisms are activated also during emergencies, for example, the SDP in the North really accelerated during the GBVIE response to TC Yasa.

However, the pandemic was a health crisis and therefore needed a health response. As countries went into States of Emergency there were only limited services that were considered as essential services during crisis. It is not written in law that GBV services should be considered essential and able to operate. This limited the coordination support that would be required to support a survivor. This is another area of implementation and coordination that must be strengthened to ensure that the DV/FP legislation is more responsive and can be reactive during a crisis.

3. Social service support for a survivor.

A survivor of DV requires various types of assistance and support. In addition to the protection mechanism, the legislation for some countries also provides for financial support to access immediate assistance and safe accommodation. With the increase in DV statistics it tested the ability of social responses to support a survivor. In some countries the safe accommodations were either filled up or difficult for survivors to access with the limitation on movement. This meant survivors of DV had to continue to reside in the home with the perpetrator for prolonged periods of time. In Tonga only the Police and Health Services were considered essential services. Social and Legal services were not – GBV survivors could not access these services and allocation were not available for those requiring assistance during curfew would have not been able to seek assistance if warranted. Tonga does not have a GBV referral pathway in time of emergencies. However, a draft pathway was included in the SDP, 2021. Needs further coordination and collaboration with Emergency front-line Ministries as it differ from the GBV referral front-liners. Legal and social services are not considered essential services in time of emergency in Tonga and many other countries.

4. Implementation of Police Duties - The “No Drop Policy”


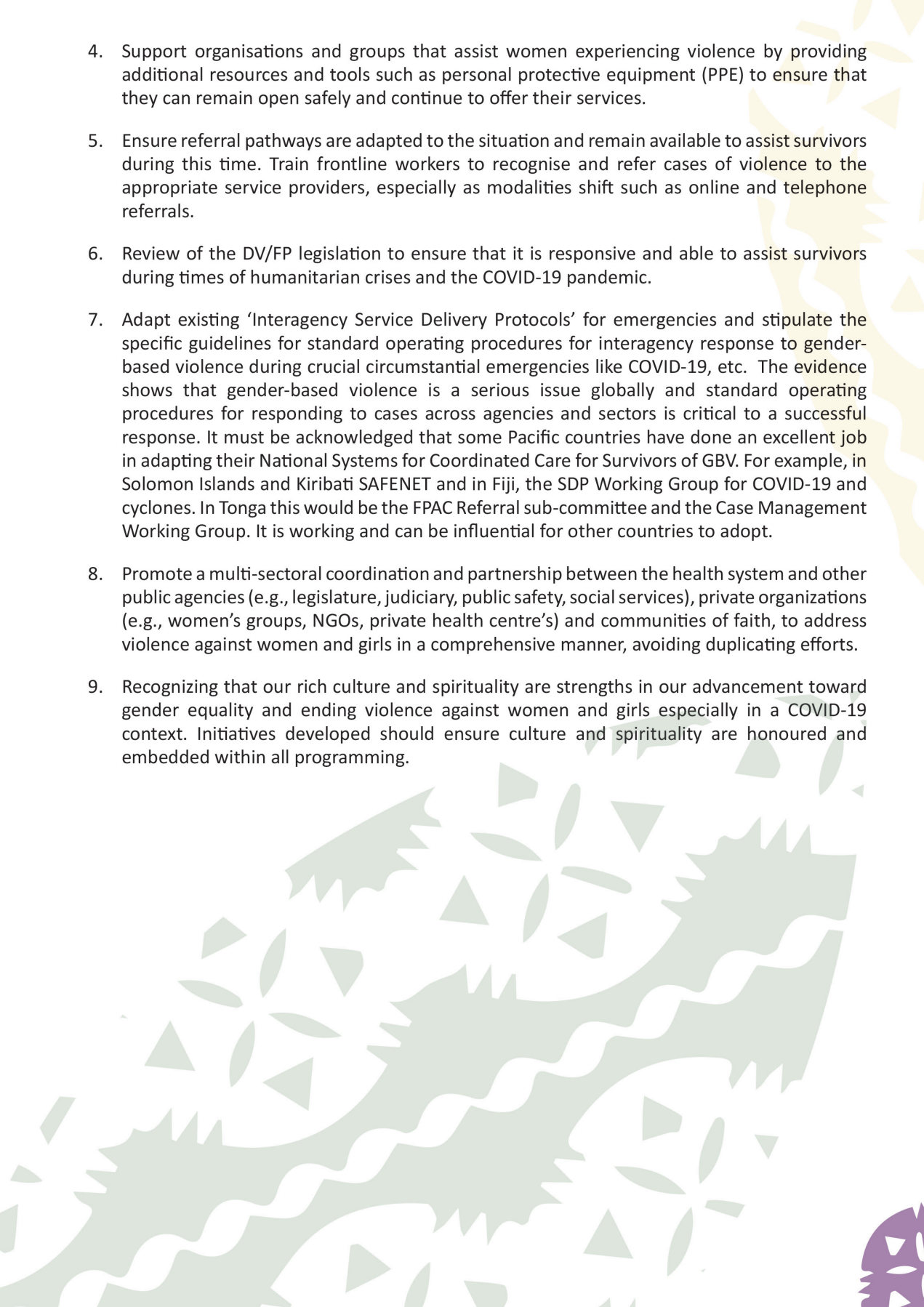
Crucial to the duties prescribed under the law is the enforcement of the ‘No Drop Policy’. The ‘No Drop Policy’ was adopted by the Fiji Police Force and the Royal Solomon Islands Police Force (RSIPF), which effectively removed the discretion from police to reconcile and/or withdraw domestic violence complaints. Unfortunately, during both normal times and now during the COVID-19 pandemic the implementation and application of the ‘No Drop Policy’ has been inconsistent. Often victims are encouraged to reconcile and/or withdraw their complaints rather than informing the abused woman of her rights and assisting her to obtain a safety order or notice. In a breach of the order/notice, police are known to merely warn perpetrators rather than arrest and charge the person with ‘contempt’ as authorized under the Act. This has severe consequences for the safety of survivors who make complaints, including those who have complained of breaches to these safety orders/notices. The reference to the “No Drop Policy” in the Tonga National Service Delivery Protocol for Responding to GBV, will be revised with “evidence-based persecution” implied and not informed.

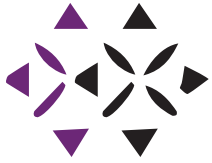
CONCLUSION

The DV/FP legislation in our region are specifically drafted to ensure that a survivor of DV is able to access justice and be able to access the relevant information and services that they may require. However, implementation continues to be a challenge for a range of reasons, and coordination and collaboration between stakeholders continues to be an area that needs to be addressed. The COVID-19 pandemic and impacts of recent Tropical Cyclones have both accelerated efforts to provide coordinated and collaborative care and, in some instances, exacerbated gaps in the FPA/DV legislation and implementation. These need to be addressed to ensure a survivor of DV is protected and also has the relevant assistance. Below are some recommendations for the consideration of the RWG:

RECOMMENDATIONS

1. As the region looks to strengthen its response mechanisms to the COVID-19 pandemic there must be recognition of the continued high rates of DV in our region. It will therefore be important to gather genuine updated data and properly track reported cases of GBV.
2. Establish an ‘Advisory Council/ Committee or sub-committee on Domestic Violence & Emergency Response’ for Coronavirus (COVID-19) and other similar crisis for survivors (Advisory Committee). The Advisory Committee is to advise the medical health official in charge, and has women’s human rights NGO and CSO members on it. Meetings are to be regular. Also ensure that the critical role of the Advisory Committee is to devise a communications strategy. Furthermore, it is important to draft a domestic violence and human rights framework for survivors living with disabilities, the elderly, non-heteronormative/ non-binary survivors, etc to be implemented and accessible everywhere. Ensure people with complex support needs, survivors with psychosocial or intellectual disabilities and survivors with communication disabilities are properly assisted in the DV system.
3. Ensure all organisations and groups that provide services and assistance to women experiencing violence are included as part of their list of essential services and ensure that they remain open for the duration of natural disaster and COVID-19 restrictions.

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4. Support organisations and groups that assist women experiencing violence by providing additional resources and tools such as personal protective equipment (PPE) to ensure that they can remain open safely and continue to offer their services.
 5. Ensure referral pathways are adapted to the situation and remain available to assist survivors during this time. Train frontline workers to recognise and refer cases of violence to the appropriate service providers, especially as modalities shift such as online and telephone referrals.
 6. Review of the DV/FP legislation to ensure that it is responsive and able to assist survivors during times of humanitarian crises and the COVID-19 pandemic.
 7. Adapt existing 'Interagency Service Delivery Protocols' for emergencies and stipulate the specific guidelines for standard operating procedures for interagency response to gender-based violence during crucial circumstantial emergencies like COVID-19, etc. The evidence shows that gender-based violence is a serious issue globally and standard operating procedures for responding to cases across agencies and sectors is critical to a successful response. It must be acknowledged that some Pacific countries have done an excellent job in adapting their National Systems for Coordinated Care for Survivors of GBV. For example, in Solomon Islands and Kiribati SAFENET and in Fiji, the SDP Working Group for COVID-19 and cyclones. In Tonga this would be the FPAC Referral sub-committee and the Case Management Working Group. It is working and can be influential for other countries to adopt.
 8. Promote a multi-sectoral coordination and partnership between the health system and other public agencies (e.g., legislature, judiciary, public safety, social services), private organizations (e.g., women's groups, NGOs, private health centre's) and communities of faith, to address violence against women and girls in a comprehensive manner, avoiding duplicating efforts.
 9. Recognizing that our rich culture and spirituality are strengths in our advancement toward gender equality and ending violence against women and girls especially in a COVID-19 context. Initiatives developed should ensure culture and spirituality are honoured and embedded within all programming.



ANNEX 5: GUIDING QUESTIONS

DAY 1

1. Have the provisions of the law been effective during the COVID-19 pandemic or other national challenges? Have you been able to implement these provisions?
2. What changes have been made to the implementation of DV/FP legislation to be able to respond to the COVID-19 pandemic and other realities in the countries? (Focus the discussion to the priority area of that breakout group)
3. For the 3 priority areas – what were some difficulties that were faced in implementation in the past year? How can we address these challenges? What is possible? What opportunities can the RWG provide to progress this priority area? (e.g., developing minimum standards, sharing key learnings in certain areas?)
4. How can we progress implementation in this priority area in the next year? Reflect on the recommendations that are proposed are these feasible in our current situations (whether with existing resources that government has or if there is interest/momentum in govt to progress this)

DAY 2

1. Question and Answer with presenters (20 mins)
2. Discussions - Are initiatives in these other countries something your country can also do? How can we strengthen <priority area> as a region? What should be our specific priorities in <priority area> as a region? What is realistic? What kinds of support will your country need? Etc...add as you see fit (20 mins)
3. Develop key agreements and recommendations to take back to the RWG (20 mins)

DAY 3

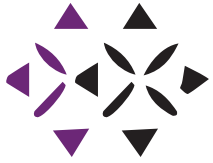
Access to justice service providers during times of crises: Exploring Opportunities

1. Question and Answer with presenters (15mins)
2. How can we strengthen the “access to justice” during times of crisis? (15 mins)
3. Provide viable recommendations on strengthening the coverage of DV / FP legislations for survivors to access holistic justice service providers? (15 mins)

Access to social services: Material and Financial Aid during crises

1. Question and Answer with presenters (15mins)
2. How can we strengthen the “access to social services” during times of crisis? (Focus on service delivery, coordinated referral pathways, etc) (15 mins)
3. Provide viable recommendations on strengthening the coverage of DV / FP legislations for survivors to access holistic and quality social services? (Also look at how DV legislations can address this, by implementing provisions for establishing funds, as well as examining the challenges around these)? (15 mins)





ANNEX 6: STAKEHOLDER PRESENTATIONS – ABSTRACTS



2021 RWG Annual Meeting

24 - 26 August, 2021

23 - 25 August 2021 (Cook Islands)

GBV/EVAW Coordination Committees & Mechanisms

ABOUT THE SPEAKERS:

Speakers will include Ms Selai Korovusere- Director for Women, Fiji Ministry of Women, Children and Poverty Alleviation (MWCPA) and Ms Abigail Erikson, Programme Specialist, EVAWG, UN Women Fiji Multi-Country Office.



OBJECTIVE OF THE PRESENTATION:

To share the innovative approaches for the coordination and governance of multisector GBV services for survivors of violence, that are effective before, during and after emergencies (Including COVID-19). Specifically, to share:

- innovative and efficient methods for establishing GBV Multisector Service Delivery Coordination & Governance Mechanisms that can be adapted for before, during and after emergencies (including COVID 19).
- general context will be provided, based on the UN Essential Services Guidelines and observations from the Pacific context
- a vignette from the Fiji MWCPA strategy used by the Fiji Ministry for Women, Children and Poverty Alleviation (MWCPA) in their experience of leading the coordination and governance of multisector services.

The SPC Human Rights & Social Development Division is supported through program funding from the Governments of Australia and Sweden.



BACKGROUND TO THE PRESENTATION TOPIC:

- This presentation will provide a brief overview of the evolution in overall coordination and governance of multisector (e.g., crisis counselling, shelter, police & justice, health) services and referral pathways, grounded in a survivor centred approach.
- The presentation will share the journey of the first National GBV in Emergencies (GBViE) Referral Pathway, to the development of a full, cabinet endorsed, Fiji National Service Delivery Protocol for Responding to Cases of Gender-Based Violence, to the on-going rollout and implementation of the National system at subnational levels.
- In addition, the presentation will highlight the innovative adaptations to coordination and governance of GBV services from the COVID-19 pandemic. For example, COVID-19 Adapted referrals and procedures (which the rest of the region followed suit, based on Fiji's model); national communications/prevention campaign during COVID-19, and the beginning of COVID-19 GBV Admin Data Collection to help understand the real-time situation facing women and girls.

KEY MESSAGES:

- Highlighting the importance of having national (and sub national) coordination and governance systems for responding to cases of gender-based violence that can bend and flex, before during and after emergencies. Including how emergency response can help further develop national systems, and the role of preparedness during non-emergency times to be able to swiftly respond to disaster for GBV.
- Share lessons learned and innovative approaches undertaken during COVID-19.
- Highlight innovative approaches and highlight how its improving responses for women and girls



2021 RWG Annual Meeting

24 - 26 August, 2021

23 - 25 August 2021 (Cook Islands)

Innovative ways of working: Responding to the COVID-19 pandemic and natural disasters – VAW data

ABOUT THE SPEAKER:

Kim Robertson

Adviser (Gender Statistics)

Since 2014 Kim has worked across all government agencies to support gender mainstreaming including planning and policy processes as well as reporting requirements. More generally she provides technical support to strengthen capacity for planning, reporting and knowledge management; statistical coordination and dissemination. Since 2019 SPC has been working in close coordination and cooperation with UNFPA and kNOwVAWdata and the Spotlight Initiative with a focus on GBV data.

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OBJECTIVE OF THE PRESENTATION:

The objective of the presentation is for the RWG to understand the two types of GBV / VAW data and underpinning coordination mechanisms; framed around the 2019 recommendation to ensure the effective monitoring and implementation of family protection / domestic violence legislation as measuring the outcomes and impacts of the legislation. Due to time constraints the presentation focuses on administrative data.

The SPC Human Rights & Social Development Division is supported through program funding from the Governments of Australia and Sweden.



BACKGROUND TO THE PRESENTATION TOPIC:

Across the region there is two types of DV data commonly collected: a) prevalence (household) survey data and b) administrative data from service providers showing the number of clients accessing services. The Regional GBV Administrative Data Technical Reference Group, comprising UNFPA, UN Women, SPC and University of Melbourne, provides coordination with broader EAWW programs, as well as providing a pool of technical expertise in DV/IPV data. Pacific countries have made considerable investment to provide up-to-date and reliable population and socio-economic data.

This includes investments in VAWG data and research focusing on the prevalence, incidence and drivers for Intimate Partner Violence (IPV) collected in the DHS and prevalence studies carried out with support from international agencies. However, across government and service providers in referral pathways, including the justice system, there is need for an integrated and coordinated approach to data collection across national survey and administrative collection instruments, including harmonised definitions and indicators. In addition, the various survey and administrative data collection systems rarely talk to each other, partially hampered by the fact that many of the government institutions involved use paper based rather than electronic systems.

KEY MESSAGES:

With time, effort, robust partnerships and accountability mechanisms, it is possible for stakeholders to work together to ensure quality, disaggregated (age, ethnicity, location, socio-economic status, disability) and globally comparable data on different forms of VAWG, as well as nationally and contextually relevant DV/IPV to inform legal frameworks, policies and programmes. Administrative data can be challenging in terms of quality and coverage but is essential to support national (and sector) priorities and programs being implemented – one size doesn't fit all in terms of administrative data so a clear plan is required, especially in times of disaster to ensure that service delivery protocols are followed.

Careful planning is required to define what are public data/indicators and what is private/confidential for the purposes of DV/FPA legislation implementation, GBV policy etc. It is important to understand that DV/IPV data from service providers measures the number of services provided, not the prevalence of violence. People may seek support multiple times and from multiple agencies and administrative data will tell us how many times services are requested for GBV. The TWG is asked to note and promote the capacity development opportunities available through UNFPA's kNOwVAWdata Initiative for all DV/IPV stakeholders including from the health and criminal justice sectors.



Spotlight Initiative



Pacific Community
Communauté du Pacifique

2021 RWG Annual Meeting

24 - 26 August, 2021

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Pacific Judicial Strengthening Initiative



ABOUT THE SPEAKER:

Mr. Lorenz Metzner

Team Leader, Pacific Judicial Strengthening Initiative

Lorenz is a justice reform and leadership professional with over 20 years' experience providing strategic and technical advice, and capacity building support to rights-based, rule of law and capacity building initiatives across the Pacific, Asia, and Africa.

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OBJECTIVE OF THE PRESENTATION:

This presentation aims to showcase the experience of the Pacific Judicial Strengthening Initiative (PJSI) in promoting accessible, just, efficient and responsive justice - in particular during the COVID-19 pandemic. Particularly, enabling the courts to remain open, remotely; and to respond to sharp increases in gender-based and family violence.

PJSI is a partnership between the judiciaries of 15 Pacific Island Nations, the New Zealand Ministry of Foreign Affairs and Trade and the Federal Court of Australia.

BACKGROUND TO THE PRESENTATION TOPIC:

The operating realities facing Pacific courts and the needs of the communities they serve were radically affected by COVID-19. Isolation, restrictions on movement, and physical distancing requirements presented unprecedented challenges to courts to remain open, and to deliver well governed and accountable justice, it also resulted in rapid and sharp increases gender-based and family violence.

To respond to these rapidly emerging needs, the Initiative was re-built. We pivoted all our activities to be conducted remotely, enabling our partners to be supported to adapt quickly and confidently to the new operating environment. We equipped partner courts with the technological tools, processes, and capacity to remain open, while continuing to also function effectively and efficiently.

The SPC Human Rights & Social Development Division is supported through program funding from the Governments of Australia and Sweden.



KEY MESSAGES:

Initially our partners found it challenging to adapt to using new and more technologies. Quickly however, acceptance and deployment of remote technologies became widespread. This represents a fundamental transformation in court operational culture across the region.

Urgent cases, and those involving vulnerable witnesses, are being heard, even in crisis conditions, and/or when parties and judges cannot be physically present in the court room. This has substantially improved access to the courts in a way that is cost-effective and sustainable.

PJSI has continued supporting courts to better respond to gender and family violence cases. This has been through (remote) training on international and domestic law and contemporary attitudes towards the unacceptability of gendered violence.

Targeted resources and toolkits on Gender and Family Violence, Human Rights and Conducting Remote Hearings have been developed, socialised, translated to support partner court in these endeavours.

We have also supported outreach to remote communities previously marginalised from the formal system.

As a result of this support, Pacific courts are measurably more responsive to gender and family violence cases and there is evidence of significant improvements in the way they are administering justice. A number of courts have conducted community perception surveys. They record substantial improvements in public trust in the judiciary and more cases are being filed as a result. Additionally, delay and backlog have, in some courts, been halved and case disposal rates have correspondingly increased.

COVID-19 has had a silver lining. It has spurred our partner courts to innovate and improve their performance and services. These innovations have improved access, responsiveness and accountability. They have enabled courts to better administer justice to their respective communities during the COVID-19 pandemic. And these major improvements will outlive the pandemic.



Spotlight Initiative



REGIONAL WORKING GROUP ON THE IMPLEMENTATION OF FAMILY PROTECTION/ DOMESTIC VIOLENCE LEGISLATION



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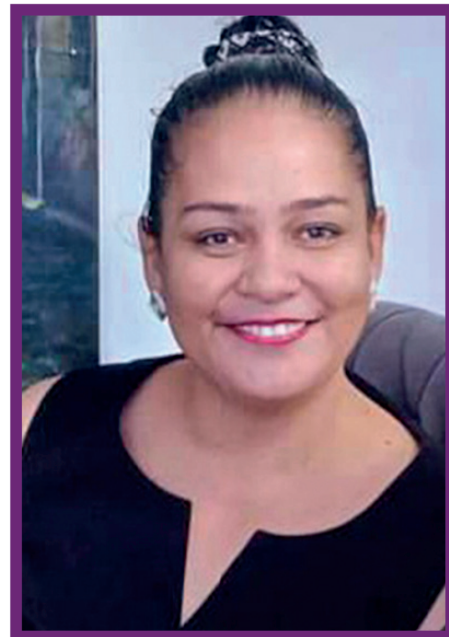
Access to Social Services: Material and Financial Aid during Crises

ABOUT THE SPEAKER:

Stephanie Dunn

Stephanie Dunn has been a Legal Officer with the Fiji Women’s Crisis Centre since 2017 and is passionate about advocating for women’s human rights. She is also part of the Asia Pacific Forum on Women, Law and Development through its Pacific Sub-regional committee, Regional Council and the Program Organising Committee of the Feminist Law and Practice Program (FLP-POC). Prior to joining FWCC she was with Legal Aid Commission, Fiji for over 3 years whereby she acquired an extensive background in litigation work within the Family, Civil and Criminal Law jurisdiction. She is also an accredited mediator and is a proud feminist and Activist.

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OBJECTIVE OF THE PRESENTATION:

The presentation will focus on the challenges that is faced during crisis in accessing social services especially by the survivors. It will also help the participants understand the importance of material and financial aid during crisis in assisting survivors to access crucial services that they would have been able to access during normal times. In addition, it will also look at the possible solutions in improving the accessibility of Social services for survivors during crisis.

The SPC Human Rights & Social Development Division is supported through program funding from the Governments of Australia and Sweden.



BACKGROUND TO THE PRESENTATION TOPIC:

The Pacific region, home to just 0.1 percent of the world's population, has some of the highest rates of violence against women and girls globally. COVID-19 has exacerbated the situation for women and has created a "crisis within a crisis". It has increased the demand for social services like Fiji Women's Crisis Centre and the need for material and financial aid to assist survivors in accessing crucial services. Lockdowns, curfews and other COVID-19 restrictions have created challenges for survivors of GBV in accessing much needed services. The presentation will provide details on these challenges and recommendations.

KEY MESSAGES:

Violence against women and girls has always been a pre-existing issue globally. With COVID-19 and disasters the situation of women is exacerbated and accessing crucial services is even more difficult. Options that are available to women is greatly reduced and more burden is put on social services like FWCC because the existing systems do not address their needs.

Having material and financial aid during crisis is vital in assisting the survivors in accessing the services that they greatly need and would have accessed during normal times. Also during crisis, a multi-sectoral and holistic approach is needed to ensure that the survivors receive appropriate and timely assistance. We have seen some success in Fiji in responding to GBV cases during crisis with the formation of the Gender Based Violence (GBV) Working Group under the Fiji Safety and Protection Cluster that was made up of government and Civil Society Organisations as well as the establishment of the National Service Delivery Protocol.

While there are gaps in legislations, policies and enforcement, during crisis these gaps become one of the biggest barriers in responding to survivors of GBV. These gaps must be addressed and equally important is ensuring that adequate budget provisions are put towards addressing GBV especially during crisis. In Fiji we have seen the success in the establishment of 24/7 toll free government funded helplines that is the Domestic Violence and Child Helplines. It is important to keep in mind that during a crisis all women are affected therefore it is important that they are part of the solution.

