



# ‘SOMEONE TO SAVE ME FROM HIM’

Findings from the  
Community  
Engagement Study  
on the Design of the  
Violence Against  
Women and Girls  
Support Service in  
the Republic of the  
Marshall Islands.

**Alison Birchall**

Violence Against Women and Girls  
Support Service Adviser  
Women United Together Marshall  
Islands



**Australian  
Aid** 

**PACIFIC WOMEN**  
SHAPING PACIFIC DEVELOPMENT

## Contents

Table of Figures .....	iii
Acronyms & Abbreviations .....	iv
Executive Summary.....	1
1. Introduction .....	9
2. Background .....	9
2.1 Violence Against Women and Girls in the Republic of Marshall Islands .....	9
2.2 Values and Attitudes towards Violence Against Women and Girls in the Republic of Marshall Islands .....	10
2.3 Legal and Policy Context .....	10
2.4 The Case for a Support Service for Survivors of VAW/G in the RMI .....	12
2.5 Review of Support Service Models in the Asia-Pacific Region .....	13
Fiji.....	13
Samoa .....	14
Papua New Guinea.....	15
Hawaii .....	16
3. Methodology.....	16
3.1 Outcomes of the Community Engagement Study .....	16
3.2 Methodological Framework.....	17
3.3 Key Concepts.....	18
Gender .....	18
Gender-Based Violence.....	18
(Male) Violence Against Women and Girls .....	18
Domestic/Family Violence .....	18
Intimate Partner Violence.....	18
Victim/Survivor .....	19
Perpetrator/User of Violence .....	19
3.4 Treatment of the Data .....	19
Data Collection.....	19
Data Analysis.....	21
Language .....	21
3.5 Participants .....	22
4. Findings and Discussion .....	24

4.1 Practical assistance to increase women’s options and safety .....	24
4.2 Community education and awareness raising on violence against women and girls .....	27
4.3 A safe place to stay .....	33
4.4 Work with police to increase their capacity and effectiveness .....	37
4.5 Psychosocial support programs for survivors of violence against women and girls .....	40
4.6 Facilitate access to female health and legal services staff for survivors of violence against women and girls.....	46
4.7 Programs to assist men who are using violence to choose to have respectful relationships with women and girls.....	48
4.8 Help women to access the police .....	51
4.9 Violence against women and girls hotline .....	52
4.10 Strengthening the capacity of institutions and leaders to respond to violence against women and girls.....	54
5. Conclusion & Summary of Recommendations .....	55
Summary of Recommendations:.....	57
6. Appendix 1: List of Participants in the Community Engagement Study .....	64
7. References .....	66

**Report Title:** Taken from case study with Maddy, a survivor of intimate partner violence and participant in the consultation study.

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## Table of Figures

<b>Figure 1.</b> Community awareness raising materials targeting transformation of values & attitudes related to VAW/G.....	10
<b>Figure 2.</b> Fiji Women's Crisis Centre Logo.....	13
<b>Figure 3.</b> Poster Advertising the Samoa Victim Support Group Helpline.....	14
<b>Figure 4.</b> The Project Management Cycle (Piper, 2015) .....	17
<b>Figure 5.</b> Graffiti brainstorm exercise.....	20
<b>Figure 6.</b> Pairwise ranking exercise.....	21
<b>Figure 7.</b> Finding the themes within the results.....	21
<b>Figure 8.</b> Number of Study Participants by Atoll (n=222) .....	22
<b>Figure 9.</b> Participatory Community Consultation Workshop Participants by Age (n=188) .....	23
<b>Figure 10.</b> Institutional Stakeholder Interview Participants by Sectors (n=32) .....	23
<b>Figure 11.</b> Practical assistance, including emergency financial support, is the highest service delivery priority. ....	26
<b>Figure 12.</b> Community education & awareness raising is the second highest service delivery priority. ...	29
<b>Figure 13.</b> Community support is essential to the sustainability of a safe house network.....	36
<b>Figure 14.</b> MIPD DVPU vehicle.....	39
<b>Figure 15.</b> Social abuse education materials used in the consultation workshops.....	53
<b>Figure 16.</b> Violence Against Women & Girls Support Service Model .....	57

## Acronyms & Abbreviations

CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CMI	College of the Marshall Islands
DHS	Demographic Health Survey
DVPPA	Domestic Violence Prevention and Protection Act
DVPU	Domestic Violence Prevention Unit (MIPD)
FHSS	Family Health and Safety Study
FWCC	Fiji Women's Crisis Centre
GBV	Gender-based violence
HoS	House of Sarah
IOM	International Organisation for Migration
IPV	Intimate partner violence
MIPD	Marshall Islands Police Department
MLSC	Micronesian Legal Services Corporation
MoH	Ministry of Health
MoIA	Ministry of Internal Affairs
NZ	New Zealand
NTC	National Training Council
PNG	Papua New Guinea
PPDVP	Pacific Prevention of Domestic Violence Partnership
RMI	Republic of the Marshall Islands
SVSG	Samoa Victim Support Group
TWG	Domestic Violence Prevention and Protection Act Technical Working Group
UN	United Nations
UNFPA	United Nations Population Fund
VAW/G	Violence against women and girls
WHO	World Health Organisation
WUTMI	Women United Together Marshall Islands

## Executive Summary

The prevalence of VAW/G in the Pacific region is the highest in the world (Pacific Women Shaping Pacific Development, 2015a). The violence that women and girls experience damages their health, security, autonomy and dignity, and also limits their social, political and economic participation (Pacific Women Shaping Pacific Development, 2015a; UNFPA, 2008). VAW/G is also harmful to families and communities, and undermines development (United Nations, 2006).

*Pacific Women Shaping Pacific Development (Pacific Women)*, Australia Aid's 10-year initiative to improve women's economic, social and political outcomes in the Pacific region, has partnered with Women United Together Marshall Islands (WUTMI) to develop the first ever national support service for survivors of violence against women and girls in the Republic of the Marshall Islands (RMI).

## Outcomes of the Community Engagement Study

The planned outcomes of the community engagement study included:

- Raise awareness of VAW/G in the RMI.
- Service delivery priorities for a community-based support service for survivors of VAW/G have been identified.
- Women throughout the RMI with diverse experiences have contributed to identifying these priorities and to the design of the Violence Against Women and Girls Support Service.
- Institutional stakeholders have contributed to the design of the Violence Against Women Support Service.

## Methodology

A mixed methods approach to data collection was utilised during this community engagement study, comprising of both quantitative and qualitative data collection through four interrelated yet distinct methods - participatory community engagement workshops, semi-structured interviews with multi-sector institutional stakeholders, case studies with survivors of violence against women and girls, and reflection and debrief workshops with WUTMI staff involved in data collection.

Overall, 222 people participated in the study from across six atolls (Arno, Aur, Jaluit, Kwajalein, Majuro, Wotje):

- 188 women aged 14 years and above participated in 19 participatory community consultation workshops.
- 2 women who were survivors of IPV participated in case studies
- 27 institutional stakeholder interviews were conducted with 32 participants.

## Findings

Ten themes were found in the data gathered from the community engagement study:

1. Practical assistance to increase women's options and safety
2. Community education and awareness raising on violence against women and girls

3. A safe place to stay
4. Work with the police to increase their capacity and effectiveness
5. Psychosocial support programs for survivors of violence against women and girls
6. Facilitate access to female health and legal services staff for survivors of violence against women and girls
7. Programs to assist men who are using violence to choose to have respectful relationships with women and girls
8. Help women to access the police
9. Violence against women and girls hotline
10. Strengthening the capacity of institutions and leaders to respond to violence against women and girls.

## Conclusions and Recommendations

Efforts to address VAW/G in the RMI are entering a new phase of coordinated action, with a focus at this stage on developing the conditions in which women and girls experiencing violence can access support and the protections of the law. The establishment of the RMI's first support service for survivors of VAW/G, that reflects the rights and priorities of women and girls, is a significant element within these developments.

Through participatory engagement, women and girls from throughout the RMI have identified that they want a service that is flexible and inclusive in how it responds to women and girls experiencing violence. Women want the service to provide options to increase their safety, including timely crisis support, access to emergency financial assistance and transport, and a safe place to stay. Women and girls also believe survivors will benefit from having someone to listen to them, to provide them with information, options and emotional support. Women and girls hope that the Support Service will make it easier for survivors of VAW/G to access informed and gender-aware health and legal services, including more effective responses and intervention from the police. Training, advocacy and the establishment of joint working MoUs and referral protocols between the VAW/G Support Service and key agencies will significantly increase opportunities for this to occur.

A model for coordinated first response provided by local stakeholders through the establishment of local, community-based coalitions against VAW/G on each atoll will expand women's options and engage duty bearers in implementing their responsibilities at the local level. Women will also be supported locally by having access to the VAW/G Support Service in both Majuro and Ebeye, which will feature regular outreach visits to the outer islands.

Through this study, women and girls have been able to identify a range of discriminatory and oppressive beliefs about women, men and gender power relations that underpin the practice of VAW/G and which can be addressed through community awareness raising and education, and long-term primary prevention programs and institutional capacity building utilising a gender transformative approach. This includes direct intervention with men who are choosing to use violence, beginning with strengthening the responses of traditional and church leaders to men they know are using violence in addition to professional training and continuous strategic advocacy.

## Summary of Recommendations:

### **Practical Assistance to Increase Women's Options and Safety:**

- The VAW/G Support Service to immediately include a budget for the provision of emergency financial assistance to survivors of VAW/G, including to pay for transport.
- Provision of this assistance to be underpinned by policy and procedures that includes an assessment of risk and need, and safety planning.
- The VAW/G Support Service to have a private vehicle, at least in Majuro, to be used to deliver a crisis response to VAW/G (including after hours) as well as facilitating (non-crisis) access to other services for women and girls experiencing violence, such as police and court.
- As a starting point related to international evacuations, the VAW/G Support Service to develop MoUs with VAW/G support services in Honolulu and Guam.
- Develop & implement an MoU with Micronesian Legal Services Corporation (MLSC) to enable referrals for legal support related to family law and child support, and the establishment of legal clinics and workshops to increase women's legal literacy in relation to their economic rights<sup>1</sup>.
- WUTMI to lobby for the VAW/G Support Service to have access to the Domestic Violence Prevention and Protection Fund as outlined in §926 of the DVPPA 2011 to provide emergency financial assistance to survivors of VAW/G, including for the establishment of the Fund.
- Further investigation of longer-term economic support and security options for women escaping VAW/G are required, to find ways to reduce the burden on women of choosing between living with violence or living in poverty and/or being homelessness. This to include investigation of social security benefits, training and employment programs, and microfinance and income generation programs.

### **Community Education and Awareness Raising On Violence Against Women and Girls:**

- The WUTMI VAW/G Support Service model should include a community development team/unit (separate from the casework team) that develops and implements general and targeted participatory community awareness raising programs, community education curriculum, and primary prevention programs throughout the RMI according to a Primary Prevention Strategy.
- The community development team should recruit male staff to work together with female staff to develop and implement community education and primary prevention activities.
- This work should begin immediately during Phase 1 of the VAW/G Support service implementation by developing a basic, general community education program that utilises a participatory, gender-transformative approach and which addresses the priority issues below, to be progressively rolled out throughout the RMI:
  - Definitions and meaning of VAW/G, with a focus on gender, gender power relations and VAW/G as a pattern of coercive control.
  - Types and tactics of VAW/G, and their impact.
  - The commonly held violence-supporting and victim-blaming attitudes and beliefs based in entrenched gender inequality, including that women cause or provoke the violence, that men are justified in using violence, that IPV is a 'private' matter, that gender discrimination against women and men's VAW/G is 'normal' or 'custom', that women

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<sup>1</sup> Work began on this recommendation in October 2015 and will feature in Phase 1 of the VAW/G Support Service implementation.



who refuse to have sex with their partners must be cheating and therefore violence is justified.

- Women's human rights, respectful relationships, gender equality and core Marshallese values that support these.
- VAW/G and the law
- Responding to VAW/G in the community
- Different curriculum elements tailored to specific audiences, such as young people, people living with disabilities and so on.
- The VAW/G Support Service community development program should implement regular and ongoing national radio programs on gender and VAW/G and/or repair and reinstate the WUTMI radio station.
- The VAW/G Support Service community development team should work towards implementing comprehensive, ongoing and coordinated participatory multi-media primary prevention programs that utilise methodologies such as talkback, podcasts, audio-fiction and digital storytelling, and include educating local media on reporting VAW/G:
  - BBC Radio 4 Women's Hour: <http://www.bbc.co.uk/programmes/b007qlvb>
  - Radio Rookies: <http://www.wnyc.org/shows/rookies/>
  - The Sarah Awards: <http://thesarahawards.com/very-very-short-short-stories-contest/>
- As a primary prevention priority, funding to be provided that enables the WUTMI VAW/G Support Service to partner with the Public School System on a long-term project to develop curriculum on respectful relationships, gender and MVAW/G<sup>2</sup>. This program should start by targeting high school students and their families (including men and boys), and work towards also targeting elementary school students and their families, through a whole of school/community approach. Programs to be inspired by include:
  - Growing Respect: <http://growingrespect.org.au/what-we-do/overview/>
  - Breaking the Silence Schools Program: <http://www.whiteribbon.org.au/schools>
  - The Line: <http://www.theline.org.au/>
  - R+R: <http://www.swova.org/rr/>
  - Raise It Up: <http://raiseitup.wavaw.ca/>
  - The Fourth R: <https://youthrelationships.org/fourth-r-programs>
  - Project Respect: <http://www.yesmeansyes.com/>
  - Safe Dates: <http://www.hazelden.org/web/go/safedates>
- Men and boys should be a prioritised target of research, primary prevention and community education activities that identify and address masculinities and men's use of VAW/G in the RMI, utilising existing groups such as taxi drivers, Waan Aelōñ in Majel students, sports teams (such as basketball, volleyball and baseball), clubs (such as fishing clubs) and church groups.
- WUTMI in general, and the VAW/G Support Service more specifically, to work with other organisations to mainstream gender transformative approaches and VAW/G into their programs. For example, the Youth to Youth in Health teenage pregnancy project, Juran Ae programs, and Waan Aelōñ in Majel, through institutional capacity building of staff as well as collaboration on developing and implementing programs.

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<sup>2</sup> Please note the opportunities for overlap between the radio and multi-media programming and the Public Schools System primary prevention programs, utilising participatory, community development approaches.

- Integrated with community education and primary prevention activities, the VAW/G Support Service should implement activities for annual global campaigns that are integrated with ongoing community education and primary prevention activities, and reflect issues and themes from the both casework and community development work. These activities should include working collaboratively with local groups to develop, distribute and evaluate IEC materials and social marketing campaigns, specifically targeting young women, and men and boys.
- Orange Day campaign to be implemented within WUTMI.
- A campaign specifically targeting men on Father's Day to be developed and implemented annually, in collaboration with men and boys engaged in primary prevention programs.
- The VAW/G Support Service to develop a communications strategy that includes addressing public backlash to awareness raising on VAW/G. Additionally, WUTMI to develop policies and processes to support and care for staff exposed to backlash.

#### **A Safe Place to Stay:**

- The VAW/G Support Service to pilot a safe house network concurrently with a local, community-based coalition providing the first response to women and girls experiencing violence. In the first instance, the model should be piloted in Majuro, Ebeye and two outer islands before being rolled out to other outer islands.
- A comprehensive initial evaluation of the pilot model to be completed within 12 months of implementation.
- The VAW/G Support Service to provide emergency financial assistance to pay for hotel accommodation and/or transport to alternative safe accommodation where an assessment of risk indicates that this is required and appropriate.
- Further investigation into the feasibility of a shelter in Majuro &/or Ebeye to be undertaken.
- The VAW/G Support Service to join with other organisations in the RMI who face similar dilemmas regarding alternative, safe accommodation for clients to form a working group to find solutions.
- The issue of safe accommodation to be placed on the agenda of the DVPPA TWG.
- WUTMI to raise the evaluation of safe accommodation models being used throughout the Pacific Region at the Pacific Women's Network Against Violence Against Women.

#### **Work with Police to Increase their Capacity and Effectiveness:**

- Advocate for plans under the Aeneman Project to build local government police capacity on the DVPPA 2011 to be prioritised and curriculum to be comprehensive.
- The VAW/G Support Service community development team to provide training and capacity building to MIPD and local government police on gender and VAW/G.
- Advocate for the MIPD DV Unit to be a stand-alone police unit that focuses exclusively on VAW/G.
- The VAW/G Support Service to collaborate with the MIPD to develop and implement professional training and community education curriculum, especially in relation to the DVPPA 2011.
- The VAW/G Support Service to advocate for MIPD Domestic Violence Unit staff and other MIPD officers to attend the RTP.
- The VAW/G Support Service to advocate with the MIMA to increase local government capacity to implement their duties in response to VAW/G, including resourcing and monitoring local government police.

- The VAW/G Support Service to advocate that the head of the MIMA be a member of the DVPPA TWG.
- In partnership with local governments, the VAW/G Support Service to establish local, community-based coalitions to provide the first response to survivors of VAW/G. Representatives of local government (preferably the Mayor) as well as local government police to be members of the coalition.
- VAW/G Support Service caseworkers to advocate with the police on individual cases, including having good working knowledge of the MIPD Domestic Violence Law Enforcement Protocol to enable this.
- The VAW/G Support Service to raise breaches in this protocol and any other failures to implement the law with the DV Unit and at the DVPPA TWG.

#### **Psychosocial Support Programs for Survivors of Violence Against Women and Girls:**

- The VAW/G Support Service to have a main office in Majuro (Ratak Chain), and a branch in Ebeye (Railik Chain).
- The VAW/G Support Service model to include the provision of psychosocial support through case management and casework.
- The VAW/G Support Service to provide 24/7 crisis service and/or after-hours on-call crisis service.
- WUTMI to consider investing in ongoing workforce development in gaining accredited counselling qualifications and experience (see also *Responding to Violence Against Women & Girls: Report on the WUTMI Training Needs Assessment 2015*).
- The VAW/G Support Service to auspice the establishment of local, community-based coalitions against VAW/G on each atoll in partnership with local governments.
- The coalition model to be piloted on Majuro, Kwajalein & two outer islands initially (alongside the safe house network).
- WUTMI to find alternative office accommodation as soon as possible, that accommodates the space and security measures required for the VAW/G Support Service.
- VAW/G Support Service staffing to include a receptionist/administration officer in both Majuro and Ebeye.
- Program staff undertake a study tour to learn observe and experience established models for delivering a support service for survivors of VAW/G, to include Pacific island destinations and potentially Australia and/or New Zealand (see also *Responding to Violence Against Women & Girls: Report on the WUTMI Training Needs Assessment 2015*).

#### **Facilitate Access to Female Health and Legal Services Staff for Survivors of Violence Against Women And Girls:**

- The VAW/G Support Service to develop MoUs with:
  - MoH (with Human Services initially, moving onto whole MoH during 2016 & 2017)
  - MIPD (the Domestic Violence Unit initially in 2016, moving onto the whole of the MIPD in 2017)
  - Local government police on Majuro and Kwajalein in 2017
  - MLSC (2016)
- The VAW/G Support Service advocates for a multi-agency integrated protocol by 2018.

- The VAW/G Support Service model to include provision of legal assistance and advice from a female lawyer through partnership with MLSC.
- The VAW/G Support Service will advocate for a closed court for all matters related to gender-based violence and child protection, including victims not being identified in media.
- The VAW/G Support Service will advocate for women and girls to have a choice in the gender of doctors treating them in relation to experiences of GBV. This will include lobbying for more female doctors to be recruited by MoH, as well as having an on-call roster of female doctors (or senior forensic nurses) to respond to women and girls needing examination or treatment as a result of GBV.
- The VAW/G Support Service will work with the MoH to increase the capacity of all health staff to understand and appropriately respond to survivors of VAW/G, including implementing screening processes in at least the Emergency, Human Services and Sexual and Reproductive Health Departments.

#### **Programs to Assist Men Who Are Using Violence to Choose to Have Respectful Relationships with Women and Girls:**

- Research programs for working with church leaders/communities to establish formal intervention programs for changing the choices and behaviours of men using violence, with a view to partnering with churches/multi-faith church coalition to implement an intervention program for men using VAW/G in the future.
- Target church leaders for institutional capacity building, including the establishment of a multi-faith steering group on gender equality and to unite on a campaign of zero-tolerance of VAW/G and women's rights-based interpretations of the bible. Examples of programs in the Pacific include the House of Sarah, SVSG and Uniting World.
- Target traditional leaders – Leiroij, Iroij & Alabs - for capacity building on gender and VAW/G.
- In the interim, refer men using violence to church leaders for information and advice.
- Develop a mechanism through which to address inappropriate responses related to VAW/G provided by church and/or traditional leaders, with consideration given to how the TWG can be utilised for this.

#### **Help Women to Access the Police:**

- The VAW/G Support Service to advocate for an increase in female police officers at both MIPD and local government police level.
- Advocate for at least one Domestic Violence Unit officer to be present on-island at all times.

#### **Violence Against Women and Girls Hotline:**

- The VAW/G Support Service model to include a national, freecall VAW/G hotline, in conjunction with a 24/7 crisis support/call-out service.

#### **Strengthening the Capacity of Institutions and Leaders to Respond to Violence Against Women and Girls:**

- As recommended in the *Responding to Violence Against Women & Girls: Report on the WUTMI Training Needs Assessment 2015*, the VAW/G Support Service should develop essential and complementary VAW/G training curriculum that can be marketed to external service providers.
- The VAW/G Support Service to investigate partnering with the National Training Council (NTC) to implement accredited gender training for people working in government and NGO sectors.
- WUTMI to advocate for NTC to include criteria related to gender in training funding proposals.
- The Public School System curriculum specialists to be especially targeted regarding training on gender, gender mainstreaming and gender transformative approaches.
- The VAW/G Support Service to partner with MoIA to implement the Aeneman project, targeting capacity building on the DVPPA 2011 and general VAW/G knowledge for a range of professionals.
- As appropriate, the VAW/G Support Service to develop MoUs/referral protocols with additional services, such as Youth to Youth in Health and Public School System social workers/counsellors.
- Work with the Marshall Islands Journal to increase staff capacity to report on VAW/G in the media.

## 1. Introduction

Violence against women and girls (VAW/G) is a form of gender discrimination and a violation of women's human rights (United Nations, 2006). The relationship between gender and VAW/G is complex, with gender equality being cited as the key determinant of VAW/G (Wall, 2014; WHO, 2009).

The prevalence of VAW/G in the Pacific region is the highest in the world (Pacific Women Shaping Pacific Development, 2015a). The violence that women and girls experience damages their health, security, autonomy and dignity, and also limits their social, political and economic participation (Pacific Women Shaping Pacific Development, 2015a; UNFPA, 2008). VAW/G is also harmful to families and communities, and undermines development (United Nations, 2006).

*Pacific Women Shaping Pacific Development (Pacific Women)*, Australia Aid's 10-year initiative to improve women's economic, social and political outcomes in the Pacific region, has partnered with Women United Together Marshall Islands (WUTMI) to develop the first ever national support service for survivors of violence against women and girls in the Republic of the Marshall Islands (RMI). WUTMI has been the key voice in the RMI calling for gender equality and the empowerment of women based on a women's rights-based framework. Continuing this work, WUTMI undertook this community engagement study to engage community and stakeholders throughout the RMI in exploring what the VAW/G Support Service should focus on. The findings and recommendations of this study will ultimately inform the design of a holistic, integrated community-based VAW/G Support Service program.

## 2. Background

### 2.1 Violence Against Women and Girls in the Republic of Marshall Islands

Violence against women and girls has been the subject of increasing concern and enquiry in the Republic of the Marshall Islands (RMI), in particular since the introduction of the *Domestic Violence Prevention and Protection Act 2011*. The *Republic of the Marshall Islands Demographic and Health Survey 2007* (DHS) (2008) found that one in three women had suffered some form of physical violence since the age of 15 and that almost one in five women had experienced sexual violence. The recent *National Study on Family Health and Safety* (FHSS) (2014)<sup>3</sup>, the first comprehensive study on women's experience of gender-based violence in the RMI, found that an overwhelming majority of 69% of women report having experienced some form of gender-based violence.

Of these women, 48% of ever-partnered women reported experiencing physical violence perpetrated by a partner, while 21% reported experiencing sexual assault perpetrated by a partner. Forty-eight percent of ever-partnered women had experienced emotional abuse from a partner, while more than one quarter (27%) reported experiencing economic abuse. Twenty-one percent of women reported experiencing injuries as a result of violence perpetrated by their partner, with a majority of those women (46%) reporting experiencing injuries more than five times. While intimate partner violence (IPV) is recognised

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<sup>3</sup> For a more comprehensive report on the prevalence and frequency of violence against women and girls in the Republic of the Marshall Islands, please refer directly to the *FHSS*, which can be found here: <http://countryoffice.unfpa.org/pacific/?publications=12038>

globally as the most common form of violence against women and girls, these figures are significantly higher than the global average of 30% (one in three) (WHO, 2013) and amongst the highest in the region.

The study also found that one third of women in the Marshall Islands have experienced physical violence by someone other than an intimate partner, while 13% reported experiencing sexual violence by a non-intimate partner (Jansen & Abraham Takala, 2014).

## 2.2 Values and Attitudes towards Violence Against Women and Girls in the Republic of Marshall Islands



**Figure 1.** Community awareness raising materials targeting transformation of values & attitudes related to VAW/G.

VAW/G has been found to be fundamentally related to patriarchy, which shapes unequal gender norms, gender power inequalities and dominant ideals of masculinity that support violence and control over women (Fulu et al., 2013). Patriarchal gender ideology is reflected in community values and beliefs regarding gender, gender roles and women's rights, and men's use of violence against women. Despite having a history of matrilineal land rights, chief titles and clan and kinship affiliations, the RMI is a patriarchal society in which cultural and religious values and beliefs that shape constructions of masculinity and femininity place women in a subordinate role to men. These gender unequal values, attitudes and practices are repeatedly conflated with tradition or custom. As a result, women are accorded fewer rights and less social freedoms than men, and men's use of VAW/G is justified and largely used with impunity.

According to the *DHS* (2007), over half of all women (56%) and men surveyed (58%) agreed that violence against women was justified under specific circumstances. Among women respondents, the four most accepted reasons for VAW were: neglecting the children, arguing with the husband, going out without telling the husband, and refusing to have sexual intercourse.

More recently, the *FHSS* (2014) found that 66% of women describe men as the head of the household, and 48% believe a 'good wife' obeys her husband even if she disagrees with him. Like the *DHS* (2007), the *FHSS* (2014) also found there was widespread support by women for the use of violence by husbands to control and punish their wives. Sixty-six percent believed husbands were justified to physically assault their wife if she does not complete her housework, 71% if she disobeys him, 38% if she refuses to have sex with him and 75% if he finds out she has been unfaithful to him. Just 15% of women did not agree with any justification for men to use violence against their wives.

## 2.3 Legal and Policy Context

Amongst the development goals emerging for the RMI is the 'need to create the appropriate conditions to make sure that women and men have equal rights, equal opportunities and equal access to services in order to reach their full potential in all areas of life' (Ministry of Internal Affairs, 2014, p. 5). This is



reflected in the country's policy and legal framework. The *Constitution* of the RMI guarantees the equal rights and freedoms of all citizens, including freedom from discrimination on the grounds of gender (*RMI Const.* §12, cl. 2). This commitment has been further endorsed by the ratification of the *Convention on the Rights of the Child* in by the RMI Government 1993, and the *Convention on the Elimination of all Forms of Discrimination Against Women* (CEDAW) in 2006. The ratification of CEDAW in particular placed an increased obligation on the RMI government to continue to work towards gender equality and the elimination of violence against women and girls<sup>4</sup>.

A milestone in the gender and development agenda came in 2011 with the passing of the *Domestic Violence Prevention and Protection Act* (DVPPA) which criminalised domestic violence and introduced further provisions for the safety of survivors of domestic violence such as Protection Orders. Sexual offences outside of family relationships remain a crime under the *Criminal Code 2011*, however outside of domestic relationships, there is currently no criminal provisions explicitly regarding sexual harassment<sup>5</sup>.

Since 2011, there has been limited progress towards implementing the *DVPPA 2011*. As at July 2015, just 16 Protection Orders have been issued since its introduction, and there has not yet been a single prosecution under the *Act* (Personal Communication, CJ Carl Ingram, 2015). In light of this, the Ministry of Internal Affairs (MoIA) was successful in obtaining a grant from the United Nations Trust Fund to End Violence Against Women to assist with closing the gaps in the implementation of the *DVPPA 2011*. The three-year project, titled Aeneman meaning 'to seek and make peace', aims to raise the awareness of the *DVPPA 2011*, while also training key professionals to implement the *Act*, and enhancing the safety and access to justice for women and children through multi-sector collaboration. The implementation of the Aeneman Project during the first 12 months was almost nil, and the MoIA was recently forced to review the project workplan based on two years of funding only.

The Aeneman project prompted the previously established DVPPA Technical Working Group (TWG) to be reconvened, enabling a cross-section of agencies working with survivors and perpetrators of violence to regularly meet to discuss and makes plans to more effectively implement the *DVPPA*<sup>6</sup>. Two partners to the TWG, Marshall Islands Police Department (MIPD) and the Ministry of Health (MoH), have made some progress towards developing and implementing internal protocols for responding to domestic violence, helped significantly by ongoing technical assistance from the Pacific Prevention of Domestic Violence Program and UNFPA-Auckland University of Technology partnership respectively.

Addressing violence against women and girls is further enshrined in the *National Gender Policy of the Republic of the Marshall Islands* (2014, p. 11), with the 'elimination of gender-based violence and protection and care of survivors' named as one of the five priority policy outcomes. In 2015, the government also moved to implement a *National Policy on Disability Inclusive Development: 2014-2018*, which refers to prioritising addressing violence against women living with disabilities, and calls on WUTMI to integrate women with disabilities into all its programs, particularly those focusing on VAW/G.

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<sup>4</sup> Note that the Republic of the Marshall Islands first periodic report on progress towards implementing CEDAW has been overdue since 2007 (OHCHR, 2012; UNHCR, 2015).

<sup>5</sup> Harassment is general is referred to in the *Criminal Code 2011* and could cover sexual harassment in some circumstances. Sexual harassment is prohibited in the Public Service Regulations.

<sup>6</sup> The TWG has struggled to be implemented, having only met around four times since the Aeneman project was implemented. There has been a recent change in leadership of the project within MoIA, which will hopefully result in increased capacity for the TWG to be managed.



The rights of children in the RMI are enshrined in the *Child Rights Protection Act 2015*, which has only recently introduced State civil intervention powers to protect children and/or remove them from homes where they are at risk of or being harmed.

Recently, the *Human Rights Committee Act 2015* was proclaimed, the purpose of which is to establish a human rights committee including a framework for its operation. This follows the outcomes of the US Department of State (2014) report on human rights in the RMI, which found ‘the most significant human rights problems included spartan prison conditions, chronic government corruption, and chronic domestic violence’.

The RMI’s formal and coordinated actions to address VAW/G are in the early stages of development. So far, VAW/G remains prevalent in the RMI, with the *FHSS* (2014) demonstrating that many people, including victims, still find VAW/G acceptable, particularly IPV. Addressing the attitudes and behaviours that sustain VAW/G and discrimination against survivors remains a considerable challenge, one in which the establishment of the country’s first ever support service for survivors will play a key role.

#### *2.4 The Case for a Support Service for Survivors of VAW/G in the RMI*

Despite the magnitude of the problem in the RMI, there is currently no specialised support service for survivors of VAW/G in operation. Evaluations from two domestic violence projects undertaken by WUTMI in the last 5 years have recommended that a domestic violence service be researched and established to provide support to women and children identified as experiencing or being at risk of experiencing domestic violence. Findings from the *FHSS* also resulted in a number of recommendations related to developing a model for intervening in domestic and family violence, including a hotline and training for intervention workers on each atoll.

Women experiencing domestic violence have started to approach WUTMI for assistance, knowing that the organisation has a record as a trusted voice for women throughout the RMI. Types of assistance requested have included information, emotional support and counselling; facilitating access to the police and support to give statements; case advocacy with police; referral and support to apply for protection orders; court support; emergency financial assistance; and assistance to leave the RMI due to safety concerns. Most WUTMI staff know of women in the community who are experiencing violence, and *FHSS* field researchers working on the *FHSS* were confronted by repeated requests for assistance related to IPV from women living on remote atolls (B. Takala Abraham, personal communication, December 2014). Although deeply committed to the safety and well-being of these women and continuing to provide what support the organisation’s limited resources will allow them, WUTMI have not previously had any funding to provide direct support to survivors of VAW/G, and currently lack the infrastructure and capacity to provide the level of assistance that is required.

Additionally, concerns about the effectiveness of the existing multi-agency response has provided limited referral options for women.<sup>7</sup> Findings of the *FHSS* found that of those women who report their experience of domestic violence to authorities, 66% are dissatisfied with the response they received, and where a woman reported the domestic violence to a family member, friend or neighbour, 55% received no help

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<sup>7</sup> In particular, knowing they are not in a position to provide specialist ongoing support, WUTMI staff have reported concerns about being able to guarantee women’s privacy and confidentiality within the ‘system’, resulting in apprehension about referring women to police or health providers for fear this will increase the level of risk they are exposed to and deter women from seeking help in the future.

from those they reported to. Concerns regarding the capacity of the existing health and criminal justice systems, particularly the National and local government police, to respond effectively to violence against women and girls are significant, and the capacity of current, local ‘certified counsellors’ to respond appropriately to survivors of VAW/G has been found to be low – it is unclear whether these staff are in fact providing counselling services at all.<sup>8</sup>

Investment in a support service for survivors of VAW/G is overdue and becoming urgent. These current circumstances point to the need for coordinated and integrated response to VAW/G, that includes a woman-centred, community-based support service to ensure that women have access to a trusted and reliable support service to provide them with emotional support, access to options to increase their safety, and assistance navigating the multi-agency response to VAW/G. However, establishing an inclusive and accessible support service for survivors of VAW/G in the RMI faces a number of challenges, not least of which being the vast and remote geography of the RMI’s atolls and islands.

## 2.5 Review of Support Service Models in the Asia-Pacific Region

Support services for survivors of gender-based violence, and violence against women and children specifically, are increasing throughout the Pacific region, with examples of different models emerging in different country and cultural contexts. In this paper, we will explore examples of services from four countries - Fiji, Samoa, Papua New Guinea (PNG), and the United States of America.

### Fiji



**Figure 2.** Fiji Women's Crisis Centre Logo

By far the most developed model in the Pacific region, the Fiji Women’s Crisis Centre<sup>9</sup> based in Suva provides crisis counselling and legal, medical and other practical support services for women and children who are survivors of violence committed against them by men (Pacific Women Shaping Pacific Development, 2015b). In addition to satellite offices around the country, FWCC has a 24-hour telephone crisis counselling service as well as a mobile counselling service. This combination of services ensures that FWCC is accessible to women throughout Fiji. FWCC has also excelled at developing community education programs, awareness campaigns and professional training curriculum, including the respected Regional Training Program (RTP) that has continuously developed over the last 20 years (Fiji Women’s Crisis Centre, 2015).

Together with sister programs Vanuatu Women’s Centre and the Solomon Islands Family Support Centre, FWCC has effectively role modelled strategies for engaging men and boys in the elimination of VAW/G. In partnership with the National Government, FWCC has implemented the Male Advocacy for Women’s Human Rights and Against Violence Against Women initiative, which trains men from key agencies involved with responding to survivors and/or perpetrators of violence against women.

<sup>8</sup> The term ‘certified counsellor’ is being used in the RMI to refer to someone who has completed a counselling course at the College of the Marshall Islands (CMI). Some of these ‘certified’ counsellors were interviewed for this study. Despite numerous requests, the Marshall Islands Counsellors Alliance could not be convened to meet with during the study and reports suggest that the network is no longer functioning. See also *Responding to Violence Against Women & Girls: Report on the WUTMI Training Needs Assessment 2015*

<sup>9</sup> <http://fijiwomen.com/>

FWCC is active in the regional media, effectively drawing attention to culturally controversial matters related to gender and men's violence against women. The service also publishes a local newsletter, and a biannual regional newsletter on behalf of the Pacific Women's Network Against Violence Against Women, and has regularly convened the regional meeting of the Network.

House of Sarah<sup>10</sup> (HoS) also operates throughout Fiji, promoting equal and respectful relationships within families, churches, schools and communities. HoS is a program developed and implemented by the Association of Anglican Women, and has been endorsed by the Anglican Diocese of Polynesia. HoS provides counselling to survivors of violence, as well as couples where there is conflict in the relationship.

Two aspects of the HoS program stand out. Firstly, they have developed and implemented a program for training and resourcing religious leaders from a variety of church denominations to promote gender equality and zero tolerance of men's VAW/G to their congregation. This program includes bible study for church leaders on human rights interpretations of the bible, as well as engaging church leaders in 16 Days of Activism activities. The key to the success of the church program has been strong leadership from the Archbishop, who implemented a 'zero tolerance' of VAW policy for all Anglican churches in his diocese in 2013. Another essential element to this program is *Talanoa*, a community-based network of Christian women leaders united against VAW/G. *Talanoa* meets monthly to share and plan activities to address domestic violence in their church communities. These women are seen as a radical movement within the Christian church community, unsettling patriarchy for the benefit of all.

The second highlight of the House of Sarah model is the 'Sarah Carer's' groups, which are groups of women based in local villages throughout Fiji and who are trained and support to intervene as first responders and community educators in relation to domestic violence. Sarah's Carers provide a local, trusted and immediate option for support and advocacy for survivors of domestic violence.

### Samoa

The Samoa Victim Support Group<sup>11</sup> (SVSG) was established in 2005 with a mission 'to provide integrated, personalised, professional services to all survivors of crime,' although supporting survivors of domestic and sexual violence make up the majority of their work (SVSG Sydney, 2015). SVSG utilises a 24-hour free call helpline staffed by 25 counsellors, as well as providing case work and case management support. In August 2015, the service opened The House of Dreams short-term accommodation service for women and girls aged 13 years and above escaping violence and neglect.

SVSG implements a men's and women's advocacy program, which takes referrals from the Family and Youth Courts for offenders to attend. Interestingly, this appears to include men who have used violence against women. Uniquely, SVSG has also set up a satellite service in Sydney, Australia that works to address violence within expatriate Samoan communities (SVSG, 2015a).



**Figure 3.** Poster Advertising the Samoa Victim Support Group Helpline.

<sup>10</sup> <http://houseofsarah.org/>

<sup>11</sup> <https://www.facebook.com/pages/Samoa-Victim-Support-Group-SVSG/363269208292?fref=ts>

In 2015, SVSG announced the implementation of a ‘rural community alert system’, which involves more than 400 village representatives in 166 villages across Samoa who are available to respond to women in need of immediate protection and support as a result of domestic violence (UN Women, 2015a). The alert system relies on mobile phone communication and informal networks to connect women living in remote villages who are experiencing domestic violence with SVSG through the helpline.

### *Papua New Guinea*

PNG, with the largest developing country population in the region, has a number of emerging support services for their innumerable survivors of gender-based violence and male violence against women. Amongst these, the newly established PNG Family and Sexual Violence Hotline developed by ChildFund in partnership with Papua New Guinea’s Family and Sexual Violence Action Committee and FHI 360, provided the country’s first nationally available crisis information and referral telephone service for survivors of domestic, family and sexual violence.

With widespread availability of telecommunications and rising numbers of mobile phone users throughout PNG, the hotline utilises a toll-free number and is operated by nine crisis counsellors (‘Papua New Guinea helpline flourishes as country deals with endemic violence,’ *The Guardian*, 26 September 2015). The hotline has been initially operating for eight hours a day with a plan to increase this to 12 hours a day later in 2015 (‘Family Violence Hotline Launches in Papua New Guinea,’ *ChildFund*, 19 August 2015). The hotline also provides information and support to men who use violence who wish to change their behaviour, and reports indicate men using violence have made up almost half of the 250 callers during the first month of operations (‘Almost half the callers to Papua New Guinea’s new domestic violence hotline men, operators say,’ *ABC News*, 30 September 2015).

Femili PNG<sup>12</sup> is a local NGO based in Lae that runs a Case Management Centre to assist survivors of intimate partner violence, sexual violence and/or child abuse to access the services that they need. The Case Management Centre (CMC) began operations in 2014 in response to the noted lack of case management of services for survivors of violence. The CMC established a model for coordinating services for survivors across multiple sectors – including medical and psychosocial support, shelter, police, legal services and vocational training - to ensure the services are working together effectively to enhance the safety and well-being of the survivor.

Femili PNG also focuses on three elements of support to survivors of violence – relocation, repatriation and reintegration. Relocation is the response of assisting the survivor of violence to move from the location where she is experiencing violence, to another location where she will be safe. Repatriation is the assistance provided to the survivor to return to her home of origin after experiencing violence at another location. And finally, reintegration is the work done with the community when a survivor experienced violence in her home of origin and wants to return to live there. This is a particularly vital approach for responding to accusations of sorcery as a form of gender-based violence.

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<sup>12</sup> <http://www.femilipng.org/>

## *Hawaii*

The Domestic Violence Action Centre<sup>13</sup> (DVAC) in Honolulu is one of a number of services providing support to survivors of gender-based violence in Hawaii. However, the strength of the DVAC model is that it is one of the few that has a holistic, integrated legal and social support service under the one roof.

The service was established initially as a helpline providing free legal information in the 1980's, and has since grown to provide both legal and psychosocial support and case management for women experiencing IPV. DVAC has seven in-house lawyers and para-legals providing support to survivors of IPV in relation to protection orders, divorce and post-separation and paternity issues. This is complemented by the psychosocial support team who work from a trauma-informed approach to listen to a woman's story, raise her awareness about risk and provide information on options, and support her to make her own decisions about what to do and to make a safety plan. Psychosocial support is based on a comprehensive assessment process.

An interesting element of the DVAC model is the 'Partners in Probation' program. This partnership with corrective services probation officers results in effective communication, information sharing and monitoring of men who are about to be released or who are already on probation for crimes related to IPV.

DVAC notes that it is seeing an increase in clients from Micronesian communities, yet find it difficult to recruit and retain bi-lingual Micronesian staff. DVAC are enthusiastic about partnering with Micronesian services to increase the safety of Micronesian women already living in or coming to Honolulu.

Each of these existing services offer examples and service delivery elements from which WUTMI can build their own support service, learning from the limitations and achievements of these models over time and according to context. Of particular interest are models that provide insight into the VAW/G prevention and intervention through remote first response networks. However, few of the existing service models throughout the Pacific face the same geographical, accessibility and technological challenges as the RMI. With its 29 low-lying coral atolls and five islands spread over 1.9 million square kilometres of the North Pacific, relatively small population but high rates of VAW/G, and irregular transport and sporadic mobile phone and internet availability, one of the greatest challenges facing the support service is sustainable accessibility and inclusivity for all women throughout the RMI.

## *3. Methodology*

### *3.1 Outcomes of the Community Engagement Study*

The planned outcomes of the community engagement study included:

- Raise awareness of VAW/G in the RMI.
- Service delivery priorities for a community-based support service for survivors of VAW/G have been identified.
- Women throughout the RMI with diverse experiences have contributed to identifying these priorities and to the design of the Violence Against Women and Girls Support Service.

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<sup>13</sup> <http://www.domesticviolenceactioncenter.org/>

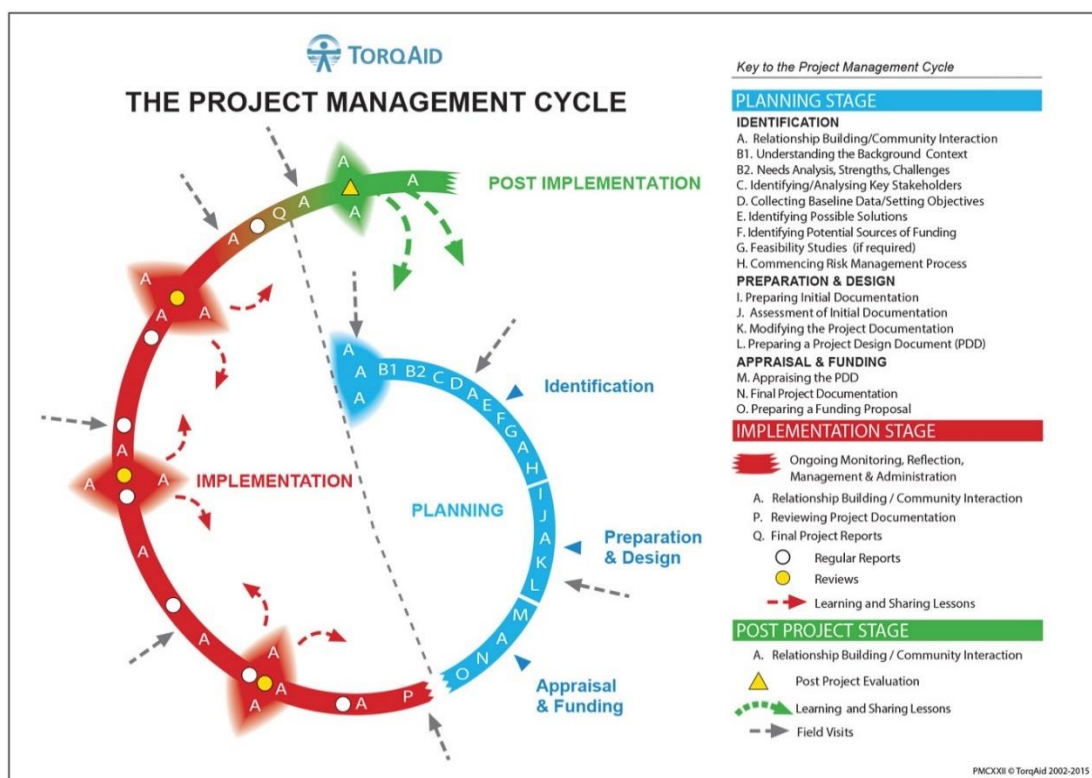
- Institutional stakeholders have contributed to the design of the Violence Against Women Support Service.

### 3.2 Methodological Framework

Community engagement is a 'planned process with the specific purpose of working with identified groups of people ... to address issues affecting their well-being' (The State of Victoria, 2013). Community engagement methods aim for inclusiveness to ensure consideration of diversity and special interests that may be present within the community. This community engagement study was interested in identifying the lived experiences of women in the RMI related to gender and violence, and to engage women and stakeholders in the development of priority service areas for the development and implementation of a support service for survivors of VAW/G. In this sense, the study was primarily informed by phenomenological and feminist participatory research methodology. The study elevates women's voices as the experts on women's lives, and takes their wishes, views and well-being as the starting point of gender and development (Dominelli, 2002). Thus, the study itself is an instrument of gender transformative politics.

The consultation study methodology also reflected a commitment to community-driven development and community development principles, particularly the obligation to maximise participation (Ife, 2013). The study methodology was designed to empower individuals and groups to engage in the decisions that affect their lives, to make informed choices, and to transform choices and decisions into action (Ife, 2013). The model design and implementation process utilised a participatory project management cycle overall, and the consultation study reflects the identification, preparation and design elements within the planning stage of this cycle (Figure 1).

**Figure 4.** The Project Management Cycle (Piper, 2015)





### 3.3 Key Concepts

How we language, define and name violence is the first step in representing what the problem is, so it is important that the acts of naming violence against women are fully considered (Howe, 2008; Pease, 2011). Definitions matter as they ‘determine the policy and program terrain about ‘what counts’ as domestic and/or family violence’ (Breckenridge, Rees, valentine, & Murray, 2015, p. 3). There is a contemporary tendency to use terms to describe VAW/G interchangeably despite the different meanings and socio-political contexts. Therefore, terms used in this study have been carefully defined below.

#### Gender

In this study, gender refers to socially constructed identities and roles given to women and men (UNFPA, 2011). Gender constructs change over time and according to context (UN Women, 2015b). Gender ideology refers to the body of beliefs, values and attitudes regarding the appropriate conduct, roles, rights, and responsibilities of women and men in society. Gender ideology is a cultural construct and patriarchal, in which the masculine is given priority over the feminine (Sultana, 2010).

#### Gender-Based Violence

In this study, gender-based violence (GBV) is ‘any form of violence (physical, sexual, psychological, economic) directed against a person on the basis of his or her gendered identity’ (CEDAW, 1979). VAW/G is a form of GBV. While GBV can affect both women and men, it is acknowledged that the majority of victims of GBV are women and children and the majority of perpetrators of GBV are men.

#### (Male) Violence Against Women and Girls

Within this study, VAW/G is ‘any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life’ (United Nations, 1993, Article 1). Unless otherwise stated, it can be assumed that the use of the term in this study refers to violence perpetrated by men against women and girls. Common forms of VAW/G in the RMI are intimate partner violence, intimate and non-intimate partner rape and sexual assault, trafficking, forced prostitution, and forced marriage.

#### Domestic/Family Violence

In keeping with current interpretations of the definition of domestic violence in the RMI, in this study the term will be used to refer to violence or abuse perpetrated by an individual against a family member. A family member is defined as;

*... a partner, or a member of a person’s family including spouse, child, parent, grandparent, sibling, uncle, aunt, brother-in-law or sister-in-law, or uncle-in-law or nephew, niece or cousin, any other person who is treated by the person as a family member of a member of the same household including by customary adoption (DVPPA 2011, §903).*

In light of this definition, domestic and family violence may be used interchangeably.

#### Intimate Partner Violence

To avoid any confusion with the common understanding of domestic violence in the RMI, the term intimate partner violence (IPV) will be used to refer to:

*Acts of violence that occur between people who have, or have had, an intimate relationship. While there is no single definition, the central element of [intimate partner violence] is an ongoing*

*pattern of behaviour aimed at controlling a partner through fear, for example by using behaviour which is violent and threatening. In most cases, the violent behaviour is part of a range of tactics to exercise power and control over women and their children, and can be both criminal and non-criminal* (Council of Australian Governments, 2011).

Globally, IPV is recognised as the most common form of VAW/G and GBV (WHO, 2013), and is the most frequently referred to experience of VAW/G by participants in this study.

#### *Victim/Survivor*

The use of victim and survivor will be used interchangeably to refer to women and girls who have experienced or are experiencing GBV. The term 'survivor' is preferred, for its recognition of the agency and the capacity of women. However, victim can also be appropriate when foreshadowing the power relationship between a user of gender-based violence and the person experiencing the violence (Laing & Humphreys, 2013). Nonetheless, it is recognised that neither totalising terms nor the victim-survivor dichotomy is ideal, and that women may move between various identities during and after their experience of GBV.

#### *Perpetrator/User of Violence*

These terms are used to refer to people who choose to use VAW/G. In this report, we exclusively refer to users of violence as men as they are the overwhelming majority of perpetrators of gender-based violence against women and girls in the RMI.

### *3.4 Treatment of the Data*

#### *Data Collection*

A mixed methods approach to data collection was utilised during this community engagement study, comprising of both quantitative and qualitative data collection through four interrelated yet distinct methods - participatory community engagement workshops, semi-structured interviews with multi-sector institutional stakeholders, case studies with survivors of violence against women and girls, and reflection and debrief workshops with WUTMI staff involved in data collection. This approach to data collection is considered to be comprehensive and provided, in response to a series of open-ended questions and/or activities, an 'in-depth examination of people and topics' (Minichiello, Aroni & Hays, 2008, p. 520), reflecting the phenomenological and feminist influences on the study. It was also a methodology suitable for engaging participants from both urban and remote settings within the RMI (Wendt, Chung, Elder & Bryant, 2015).

#### *Participatory Community Consultation Workshops*

Informed by the values and principles of participatory action research, a participatory community engagement workshop program was designed and implemented to gather data directly from those most affected by violence against women and girls in the RMI. This was the main method of data collection for the study. The primary objective of the workshops was to enable women with diverse experiences from throughout the RMI to participate in the design of a community-based support service for survivors of violence against women and girls, reflecting the commitment of the project to 'a methodology that argues in favour of the possibility, the significance, and the usefulness of involving research partners in the knowledge-production process' (Bergold, 2007 in Bergold & Thomas, 2012, np). The participatory community engagement methodology also invited the women to not only reflect on 'the problem' but to also identify possible solutions and actions.



The workshops were implemented with groups of five – 15 women, and ran for an average of four hours. Data gathered from these workshops included quantitative results from the participatory activities (i.e. prioritised list of desired services), and qualitative findings from the discussions, debates and decisions made by participants in the workshops (i.e. how the groups decided a particular priority; what gaps in their knowledge and understanding of violence against women and girls could be identified from their discussions). Workshop participation was voluntary and anonymous, however age and pre- and post-workshop participants' experience of gender-based violence data was collected.<sup>14</sup>

The participatory workshops had two elements – community education and awareness raising, and participatory consultation and research, which generally fell into two workshop halves. The first focused on interactive education and information sharing regarding violence against women and girls. This included activities on understanding the definition and prevalence of violence against women and girls, with a particular focus on intimate partner violence. The prevalence activity provided data on participants' general understanding of frequency and extent of intimate partner violence in the RMI.



**Figure 5.** Graffiti brainstorm exercise.

The second half of the workshop included participatory activities designed to elicit ideas and priorities for responding to violence against women and girls through the provision of a support service. There were two main activities – a graffiti brainstorm and pairwise ranking.

The graffiti brainstorm was an opportunity for the participants to write down everything they could think of that they thought would be useful for the support service to do. Participants were encouraged to view no suggestions as 'wrong'. Participants were then asked to vote for the three suggestions they believed were the most important, and/or would be the most helpful to survivors of VAW/G. The top five to seven responses from the graffiti brainstorm were then used for the pairwise ranking activity.

The pairwise ranking activity challenged the participants to rank their chosen items in comparison to each other, asking them to discuss the reasons and evidence their decisions. This resulted in both quantitative, as well as qualitative data.

#### *Institutional Stakeholder Interviews*

Semi-structured, qualitative interviews were conducted with representatives of key agencies involved in the multi-sector response to men's violence against women and girls

in the RMI. In these interviews, institutional stakeholders were asked to identify and prioritise the

<sup>14</sup> Participants' experience of gender-based violence questionnaire was introduced in the fifth workshop.

support services they would like to see available for women and girls who are survivors of gender-based violence. The interviews also provided an opportunity to informally assess stakeholders' knowledge, skills, and attitudes and beliefs regarding gender and men's violence against women and girls which has also been used to contribute to the findings on the design of the support service.

### Case Studies

In order to explore in depth the experiences and support needs of survivors of violence against women and girls, case studies were conducted with survivors of violence against women and girls. These case studies included data gathered directly from the women via semi-structured interviews and conversations, and also from their (formal and informal) support networks. This data assisted to identify in greater detail what is and is not working in the current multi-sector response system and what are the gaps in support from the perspective of women who are survivors of male violence against women and girls and those that have helped them.



**Figure 6.** Pairwise ranking exercise.

### Data Analysis



**Figure 7.** Finding the themes within the results.

The quantitative results of the participatory community consultation workshop activities were analysed by the project team, to identify themes from within the outputs. These themes were ranked in priority using a simple, unweighted calculation of the number of 'votes' the workshop groups had given to the individual results that made up that theme.

The quantitative results were cross-referenced with qualitative data from the consultation workshops, institutional stakeholder interviews and survivor case studies. This provided qualitative data to support the quantitative findings, as well as identifying additional themes.

### Language

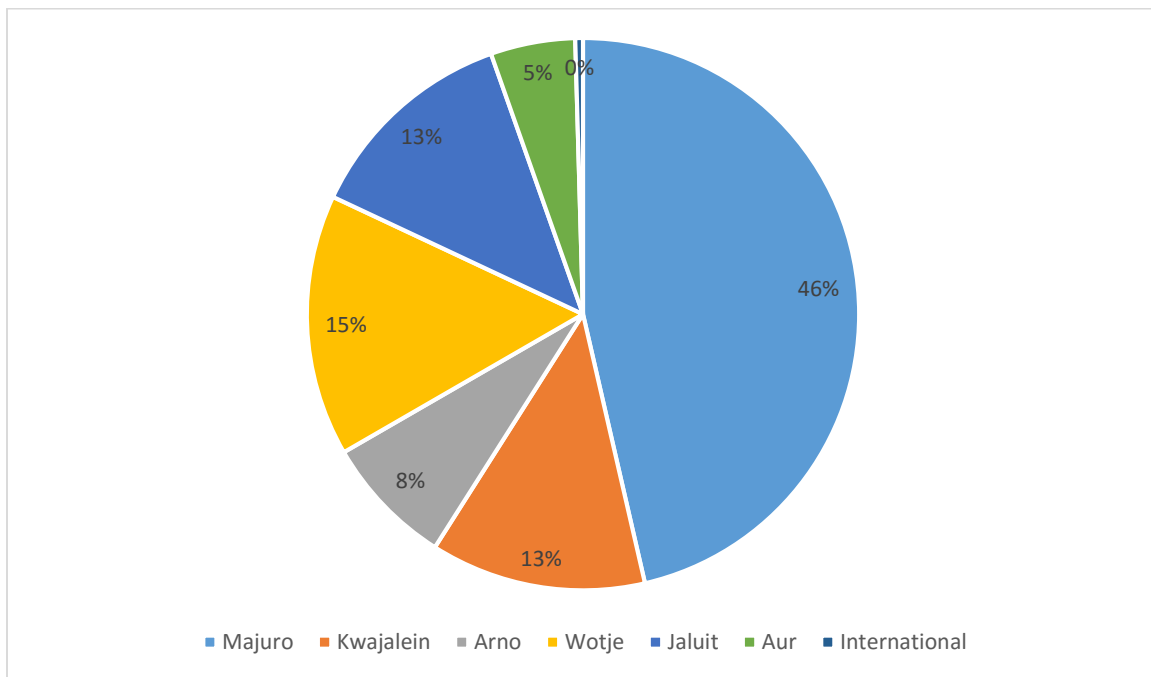
As elements of the community engagement study were undertaken entirely in Marshallese, much of the data has had to be transcribed and translated from Marshallese to English for the benefit of the English-speaking Technical Adviser. Three WUTMI staff undertook the translation work during the process of transcription of the voice recordings.

Even with the greatest attention to detail, it is important to note that translators are not neutral mediums through which words and meaning are transmitted (see Berman & Tyyska, 2011; Tsai et al, 2004; Wong & Poon, 2010). Consequentially, the findings may have 'drifted away' somewhat from the participants' original interpretation of their experience (Tsai et al, 2004, p.9), as it is inevitable that the data has been influenced by the author's assumptions and interpretations of meaning and language during the process of data analysis, as well as those of the translators.

### 3.5 Participants

Overall, 222 people participated in this community engagement study from across six atolls, selected at random but including the two most urban atolls (Majuro and Kwajalein) (Figure 2). The study primarily targeted grassroots women living in communities within the RMI, as well as multi-sector stakeholders currently involved in or being seen to have a role in the response to men's violence against women and girls in the RMI.

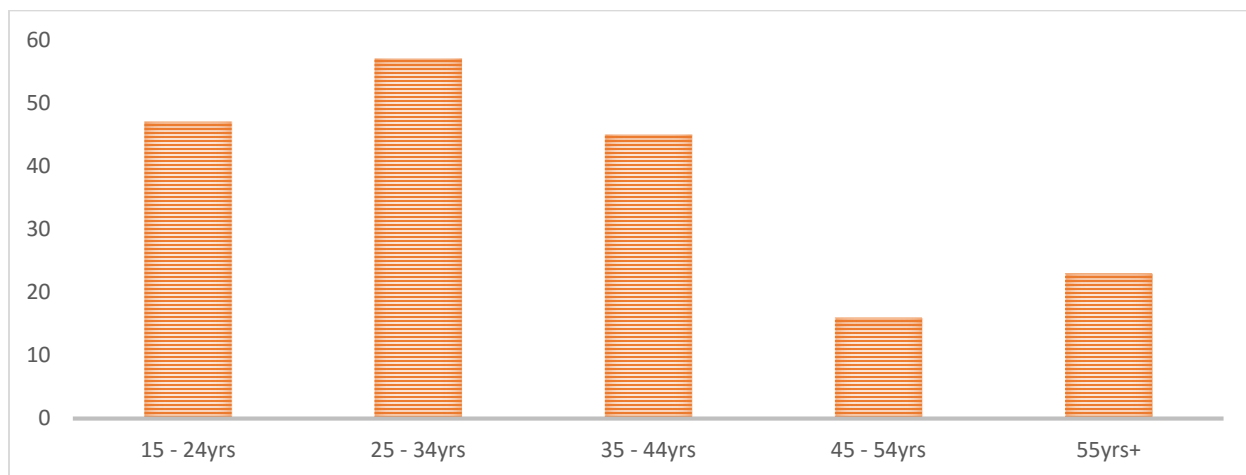
**Figure 8.** Number of Study Participants by Atoll (n=222)



One hundred and eighty-eight women aged 14 years and above participated in 19 participatory community consultation workshops (Figure 8) conducted throughout the RMI between February and September 2015. Amongst the women who participated in the pre- and post- questionnaire on previous or current experience of VAW/G (n=132), 60% self-identified as survivors of gender-based violence.

As shown in Figure 9, most workshop participants were aged between 25-34 years (30%), closely followed by those aged 15-24 years (25%) and 35-44 years (24%).

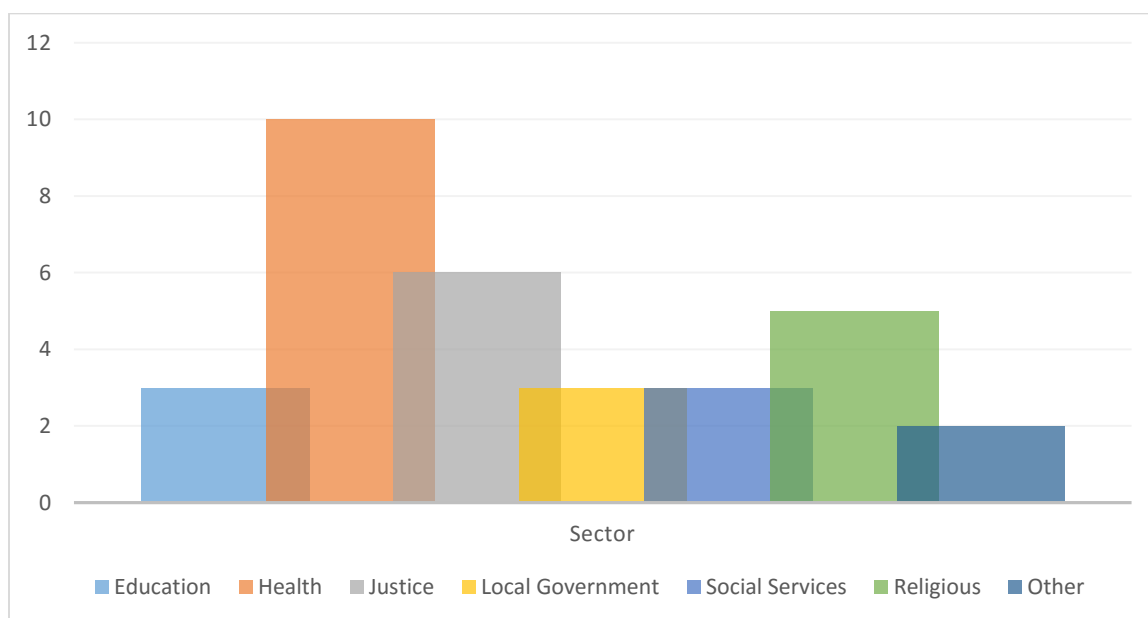
**Figure 9.** Participatory Community Consultation Workshop Participants by Age (n=188)



Two women who were survivors of IPV participated in case studies for the consultation. These women provided accounts of experiences of physical, sexual, psychological, emotional and financial violence perpetrated by their intimate partner, experiences that range in length from a couple of months to more than 13 years of violence. In this report, the participants in the case studies will be referred to as Maddy and Lana<sup>15</sup>.

Twenty-seven institutional stakeholder interviews were also conducted with 32 participants who were representatives of multi-sector agencies and institutions who have a role or interest in responding to violence against women and girls in the RMI, as shown in Figure 10.

**Figure 10.** Institutional Stakeholder Interview Participants by Sectors (n=32)



<sup>15</sup> These are pseudonyms, used to protect the identity of the participants in the case studies.

## 4. Findings and Discussion

This section reports on the main themes within the findings from the community engagement study on the VAW/G Support Service model. These themes have emerged from participants' consideration of what a VAW/G Support Service could do to help women and girls who are experiencing violence. Ten themes were found in the data, and they will be explored below.

### 4.1 Practical assistance to increase women's options and safety

Practical assistance to increase women's safety was the most common theme identified throughout the community consultation workshops, in effect signifying the barriers women and girls experiencing violence face to accessing support and seeking safety. Survivors of VAW/G, particularly IPV, often 'face the impossible choice between physical safety and financial security' (Carey & Solomon, 2014, p.

*'... we believe that having money will also contribute in helping women and girls experiencing domestic violence in their entire lives in moving them away from their partners and families' (Workshop Participant, Arno).*

201) and women who participated in this study frequently shared dilemmas about painful choices between staying in a relationship where they are experiencing violence or living in (deeper) poverty with their children:

*We are afraid to leave the abusive life because we won't have money to buy our basic needs during evacuating, especially when we have our children with us (Workshop Participant, Majuro).*

*We really don't know what to do. We are scared and want to move out, but am afraid what will I feed the kids if I take them with me? (Workshop Participant, Majuro)*

There were two distinct elements to this theme – providing access to transport and providing emergency financial assistance. There was a lot of overlap between these two elements, with several groups referring to the Support Service having money available to pay for transport for women in an emergency; to 'get transportation for women to get away from the man' and 'buy a ticket for the woman to [go] far away somewhere safe'. Some discussions referred in particular situations of high risk where financial assistance for women to be evacuated from the Outer Islands and/or the RMI would assist women to be safer:

*If a domestic violence case happens in an outer island, then the money can bring the victim from there to Majuro or wherever she will be safe at (Workshop Participant, Majuro).*

*We think that when transportation will be available, then when a woman is being badly abused at one of the outer islands then with availability of transportation it will be easier and faster for the victim to evacuate to wherever she is willing to go to, as long as she is away from the perpetrator (Workshop Participant, Majuro).*

This was reflected in a case WUTMI was involved in towards the end of 2014, where safety planning with a women experiencing IPV concluded that she would be safest by being evacuated from Majuro to Hawaii. Plans were developed for raising the money to pay for the flight and how she could remain safe until the

flight departed, including how she would get to the airport and board the flight safely. With a budget for emergency financial assistance, the Support Service could contribute to the costs of flights for women who cannot afford it. Best practice would be to implement this service option together with risk assessment and safety planning processes that are enshrined in service policy. To further strengthen this intervention, memoranda of understanding (MoU) for referrals to VAW/G support services outside the RMI should be developed<sup>16</sup>.

One group of women thought that the Support Service should 'have a vehicle available for responding to reports of violence against women', which would also imply having staff available for emergency/crisis responses. Investment in a service vehicle could also be used to assist women to attend appointments or meetings with police, the court or hospital, and therefore may contribute to an increase in women accessing these services. However, a service vehicle would only be of use on Majuro, and to a lesser extent, Kwajalein (on Ebeye and Gugeegue), and would also require all program staff to be able to drive and have a Driver's Licence, which is not currently the case. There would also be policy issues regarding use of the car by other WUTMI programs and after hours, especially if the vehicle is to be available for crisis response.

Emergency financial assistance was also identified as being useful for other reasons, including sustaining a separation from a violent partner:

*Money is very important to everything, if we want to run away from our house to somewhere, money is what we need. To be in one place during escaping, then we will need money again to buy food and supplies that we will need during evacuation* (Workshop Participant, Jaluit).

Women talked about having access to money during a domestic violence crisis in order to buy food, clothes and other basic necessities such as nappies, and consideration should also be given to paying for short-term crisis accommodation where assessment outcomes suggest this is a suitable option. Financial support can also be used to offset the impact of VAW/G on women and children, for example to replace essential items that may have been destroyed by their partner. In her case study interview, Maddy explained that the provision of emergency financial assistance to buy clothes bought some relief for her from the impact the abuse was having:

*[WUTMI] provided me with money to buy clothes [and] things got less ... things got better and I had support from WUTMI* (Maddy, Survivor of IPV)<sup>17</sup>.

While having access to money to buy clothes helped Maddy emotionally, it also mitigated her dependency on her partner for money and clothing, which he had been using to control and further abuse her. The provision of emergency financial assistance would ensure that women experiencing violence and their children would have access to financial support at crucial and traumatic periods in their lives (Women's Aid, 2011), and may prevent women feeling compelled to return to the relationship where the violence is likely to continue.

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<sup>16</sup> A relationship with Domestic Violence Action Centre and Legal Aid Society in Honolulu, services who are already working with Marshallese communities, has already been established and there are plans to pursue an MoU with at least the Domestic Violence Action Centre.

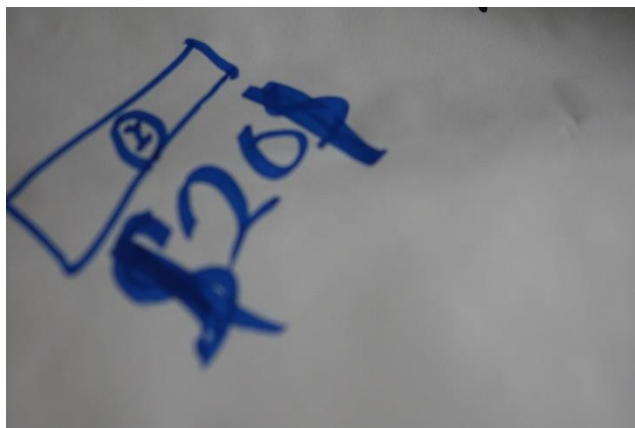
<sup>17</sup> Since February, WUTMI has had a small, interim emergency financial assistance budget to assist survivors of VAW/G. This has been an interim measure, until the first phase of the Support Service is implemented.



Research has found that economic rather than psychological variables more strongly affect whether a woman will leave a relationship where she is experiencing violence (Anderson & Saunders, 2003), with 74% of women experiencing IPV staying with their partner for economic reasons (Berger, 2012). Many times during the consultation study, women raised fears related to securing income and housing for themselves and their children if they leave a violent partner, leaving them trapped in the violence. Some stories also emerged regarding men using strategies of IPV to sabotage women's ability to earn income as a tactic to maintain their power and control over them. This includes threatening and/or harassing women at their workplace, inflicting injuries that mean she is unable to go to work, failing to provide child care as promised, or destroying handicrafts intended for sale:

*Because both of them should share the money among themselves, because whatever belongs to the man belongs to the woman too. So they needs to share everything especially their money together. But [men] are not. They just think about themselves and what they want to do (Workshop Participant Jaluit).*

*[He was] coming back and beating me up ... and then I end up, you know, staying home with all these aches on me, because I couldn't go to work with all the bruises (Lana, Survivor of IPV).*



**Figure 11.** Practical assistance, including emergency financial support, is the highest service delivery priority.

Removing money as a barrier to leaving, even in the short-term, can reduce the leverage partners have over women and girls, giving them options for escaping the violence temporarily as well as permanently. However, ongoing financial and housing security is essential to women staying free of partner violence and regaining control over their lives (Laing & Humphreys, 2013). In the absence of a social security system that provides welfare to the working-aged, alternative strategies to address women's long-term economic security should be explored.

Maddy raised a practice issue for the Support Service to be mindful of when delivering emergency financial assistance:

*Yeah, people having to feel bad for you and give you money because you don't have any [was embarrassing] (Maddy, Survivor of IPV).*

The Support Service will need to be mindful of normalising the provision of practical assistance to women, ensuring that program staff have the skills and regard required to not reinforce any stigma or discrimination of women escaping gender-based violence.

#### *Recommendations:*

- *The VAW/G Support Service to immediately include a budget for the provision of emergency financial assistance to survivors of VAW/G, including to pay for transport.*
- *Provision of this assistance to be underpinned by policy and procedures that includes an assessment of risk and need, and safety planning.*

- *The VAW/G Support Service to have a private vehicle, at least in Majuro, to be used to deliver a crisis response to VAW/G (including after hours) as well as facilitating (non-crisis) access to other services for women and girls experiencing violence, such as police and court.*
- *As a starting point related to international evacuations, the VAW/G Support Service to develop MoUs with VAW/G support services in Honolulu and Guam.*
- *Develop & implement an MoU with Micronesian Legal Services Corporation (MLSC) to enable referrals for legal support related to family law and child support, and the establishment of legal clinics and workshops to increase women's legal literacy in relation to their economic rights<sup>18</sup>.*
- *WUTMI to lobby for the VAW/G Support Service to have access to the Domestic Violence Prevention and Protection Fund as outlined in §926 of the DVPPA 2011 to provide emergency financial assistance to survivors of VAW/G, including for the establishment of the Fund.*
- *Further investigation of longer-term economic support and security options for women escaping VAW/G are required, to find ways to reduce the burden on women of choosing between living with violence or living in poverty and/or being homelessness. This to include investigation of social security benefits, training and employment programs, and microfinance and income generation programs.*

#### 4.2 Community education and awareness raising on violence against women and girls

*Because we believe the if more people know and understand about domestic violence fully, then there won't be any problem happens ... Men, women, children and everybody in the community knows fully, then everybody will know their task in regard to stopping domestic violence (Workshop Participant, Majuro)*

Community education and awareness raising on VAW/G is a high priority response to VAWG for women throughout the RMI, only marginally ranking second to practical assistance. Women see this as essential to changing values and attitudes of men and boys, as well as educating women and girls about their rights.

This was also a popular theme with stakeholders:

*I want to see every program, especially this issue, come to our community to conduct workshops with everybody in the community. In doing this I think all people regardless of age and title should aware and know about this issue. And I believe that if every person in a community understand fully about what is domestic violence than the number of domestic violence will be reduce. An awareness should be done with our traditional leaders, church leaders, women's and men's group, youth groups, and every individual in a community. I want everyone to know about domestic violence in full (Health Sector Stakeholder).*

<sup>18</sup> Work began on this recommendation in October 2015 and will feature in Phase 1 of the VAW/G Support Service implementation.



*A lot of women do not know what their rights are, or what they are capable of. Some are probably even ignorant of whether they're being abused or not. They probably take it as just cultural, as part of life (Religious Sector Stakeholder).*

This theme was able to be broken further down into content and target groups. Mostly, workshop groups identified general community education and awareness raising being useful for the whole community. General community awareness raising was requested to include education related to domestic violence legislation. This need was also confirmed by qualitative data which showed that many women and other community members, particularly outside of Majuro, are not aware of the *DVPPA 2011* and/or its provisions, and often still refer to it as 'WUTMI's law'.

Generalist primary prevention and community education programs are also an opportunity to engage the communities in bystander intervention, particularly men and boys. Bystander programs mobilise community members to respond to or prevent VAW/G from taking place (Powell, 2014), and are desperately needed in the RMI to address high levels of community tolerance of VAW/G, child abuse and human trafficking. Community education involving men and women would also assist with addressing the culturally embedded stigma and discrimination survivors of VAW/G face in their communities, which often prevents them from seeking help or leaving the relationship.

Some workshop groups requested that the Support Service target men and boys for awareness raising about VAW/G, with three groups specifically noting that the activities targeting men and boys should be on intimate partner domestic violence:

*Because we believed that if they [men & boys] know about domestic violence, then they will cause less or no violence because they will understand fully what is the meaning of domestic violence (Workshop Participant, Jaluit).*

Throughout the workshops, women identified a range of tactics that men use to perpetrate violence against women and girls in the RMI, including physical, sexual, emotional, financial, psychological and social. Women also articulated a range of explanations men use to justify their choice to use of violence, the most common of which was suspicion that their wives/partners are cheating on them, which is used to justify sexual and physical assault, as well as social and emotional abuse. Enabled by cultural gender ideology, this tactic of violence has tricked women into believing that IPV is an expression of jealousy, insecurity and 'too much love' by the men using the violence, triggered by the actions of the women. This interpretation of the violence by women hides the true nature of men's VAW/G as being about power, control and domination and reinforces the gender norms and values that underpin VAW/G. Similarly with the widely reported threat by men to seek other sexual partners if their wives refuse to have sex with them. This is a form of psychological and emotional abuse that results in coercive sex to avoid further violence or abuse. Lana provides an example of these tactics in action:

*And I always have low self-esteem back then when I was being abused, because my husband usually tell me that I worthless, and there is other women other there that would be a very good wife for him (Lana, Survivor of IPV).*

Lana went on to describe frequent experiences of sexual assault that were enabled by threats by her husband to find a new partner, as well as his use of suspicion that Lana as cheating on him. There were

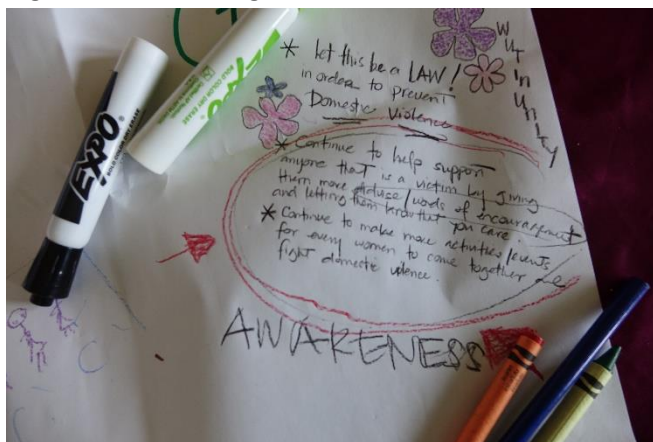
other, more familiar examples of the intersection of gender roles and men's entitlement to use violence against their partners:

*Participant A: She has a black eye ... he punched her head with a rock, maybe because she did not cook the dinner or ...*

*Participant B: When he came home and no food but he is hungry, he will get mad (Workshop Participants, Kwajalein).*

Community education and primary prevention programs targeting men and boys are urgently needed to intervene in these tactics of VAW/G. These programs should work with men and boys to identify cultural constructions of masculinity in the RMI and how these contribute to men's sense of entitlement to use VAW/G. The programs must take a gender transformative approach to harmful cultural beliefs and customs regarding gender, men's power and privilege and women's rights.

When identifying women and girls as target groups for community education activities, the workshop participants specifically wanted the curriculum to cover intimate partner domestic violence. One group felt that if women and girls participate in community education and awareness raising, they will be able to pass that knowledge onto their partners. There were also two groups that explicitly requested that the Support Service develop educational programs on intimate partner domestic violence targeting young women 14 - 15 years of age. This gives us some insight into what women see as the most common form of VAW/G in their communities, and where they believe the greatest impact can be made with young women in relation to preventing and intervening in men's use of violence against women and girls.



**Figure 12.** Community education & awareness raising is the second highest service delivery priority.

A number of areas came to our attention through observations and assessment of the community education component of the consultation workshop, which emphasised that women and girls throughout the RMI would benefit from increasing their knowledge and understanding of VAW/G, especially IPV. Women rarely had any knowledge of the different forms of violence or types of relationships where VAW/G occurs. Their contributions in the workshops indicate that they are most familiar with physical and sexual assault in intimate and family relationships. Women often presented in the workshops as both subjects as well as agents of dominant gender ideology, were active in reproducing the gendered beliefs and values that contribute to their own oppression and experience of GBV. Women very often expressed survivor-blaming attitudes and beliefs about VAW/G that excuse men from responsibility for the violence. For example, some women argued that women should respect men more to avoid having violence used against them, and that men are entitled to use violence to punish their wives for 'disrespecting' them. A common concern that reflected attitudes that excuse men from responsibility and blame the victims were related to young women drinking alcohol:

*I think these girls also contributes when they drink too much and then passed out, sometimes get raped (Workshop Participant, Kwajalein).*

*Also, I want the girls to stop drinking with the boys, because I believe this is where everything start. When the girl got drunk, then the boy have chance to rape her (Workshop Participant, Arno).*

One workshop with young women in particular stands out in relation to women's own attitudes and beliefs about VAW/G. The facilitator of this workshop felt there was almost a hostility emanating from the young women as a group in response to education about women's rights and that women are not responsible for GBV perpetrated against them, including sexual violence:

*I think they were feeling the pressure of having been convinced that they are 'to blame' or the source of risk for everything that is wrong with the community (Workshop Facilitator).*

Beliefs and experiences such as these are evidence that women and girls, as well as men and boys, should be targeted for gender transformative women's human rights, gender and VAW/G education and awareness raising, and support the notion that young women in particular would benefit from community education that is empowering and transformative.

Both Lana and Maddy credited education on intimate partner domestic violence, gender and women's rights as moments that changed their experience of violence. Maddy believed the knowledge gained from attending one of the community engagement workshops was integral to reducing the violence perpetrated against her by her partner:

*Well, like, I finally stood up for myself (laughs), after learning from the workshops and seeing what I have the rights to do and not to do. So one day, I just got tired of it and said if you wouldn't stop, I'd leave. And he did stop, but, like, I said, it's gonna be a cycle ... like everything I learned from the workshops I did with my relationship and then it slowly went away and since then everything has been fine. So far (Maddy, Survivor of IPV).*

Similarly, Lana saw education on intimate partner domestic violence through her workplace as the turning point for her leaving her violent partner:

*... I didn't know that it was ... it was not good until I came to work at the [government ministry], and I gone to many trainings and know that, 'Oh! ...,' thinking back, 'Oh, this is not healthy, I need to move from this guy,' ... They have one physical and verbal abuse training, and I went there and I say, 'Oh, all these things ... It's me that they're talking about. That's my life.' (Lana).*

Observations from workshop facilitators resonate with these findings. It was common for women to experience 'light bulb moments' after attending the workshop community education session:

*So many of the ladies, they think this type of violence from their husbands is normal. I see in the workshop when they realise it is not. It can be hard for them to learn this but also makes them happy to know. And then they want to know more and how to stop it (Workshop Facilitator).*

Lana also further contributed to the view that primary prevention and awareness raising in RMI schools can make a difference for children who are witnessing intimate partner domestic violence being perpetrated by their father against their mother, and can increase opportunities for authorities to intervene and for women experiencing violence to be made safer. Here she tells of a time when her young son called the police during an incident of physical assault perpetrated by her husband:

*... and the policeman, the look around the house and nothing is there. 'One boy reported that the father was abusing the mum,' - they learn that in the States of course. But here? No, they don't. That's why it is important to start with the little kids too. So when they see these things happening at the house, they need to call, you know, someone to help the mother out. My son had the courage to call the policeman. (Lana).*

Education settings are emerging as a key site for addressing VAW/G, and school initiatives that address gender norms and attitudes within the local social and cultural context are showing positive results globally (WHO, 2009). There are a number of excellent models that offer inspirational examples of programs that could be developed to implement throughout the RMI, including programs that are youth-led, based on collaboration between teachers and students, and which can include families and whole of community approaches. These models offer valuable insights in how to recruit families and communities to support the development and implementation program. This will be important to consider in the RMI where conservative religious and cultural beliefs and pressure from the community has previously resulted in sexual and reproductive health programs being removed from high school curriculum.

#### *Recommendations:*

- *The WUTMI VAW/G Support Service model should include a community development team/unit (separate from the casework team) that develops and implements general and targeted participatory community awareness raising programs, community education curriculum, and primary prevention programs throughout the RMI according to a Primary Prevention Strategy.*
- *The community development team should recruit male staff to work together with female staff to develop and implement community education and primary prevention activities.*
- *This work should begin immediately during Phase 1 of the VAW/G Support service implementation by developing a basic, general community education program that utilises a participatory, gender-transformative approach and which addresses the priority issues below, to be progressively rolled out throughout the RMI:*
  - *Definitions and meaning of VAW/G, with a focus on gender, gender power relations and VAW/G as a pattern of coercive control.*
  - *Types and tactics of VAW/G, and their impact.*
  - *The commonly held violence-supporting and victim-blaming attitudes and beliefs based in entrenched gender inequality, including that women cause or provoke the violence, that men are justified in using violence, that IPV is a 'private' matter, that gender discrimination against women and men's VAW/G is 'normal' or 'custom', that women who refuse to have sex with their partners must be cheating and therefore violence is justified.*
  - *Women's human rights, respectful relationships, gender equality and core Marshallese values that support these.*
  - *VAW/G and the law*
  - *Responding to VAW/G in the community*
  - *Different curriculum elements tailored to specific audiences, such as young people, people living with disabilities and so on.*
- *The VAW/G Support Service community development program should implement regular and ongoing national radio programs on gender and VAW/G and/or repair and reinstate the WUTMI radio station.*

- The VAW/G Support Service community development team should work towards implementing comprehensive, ongoing and coordinated participatory multi-media primary prevention programs that utilise methodologies such as talkback, podcasts, audio-fiction and digital storytelling, and include educating local media on reporting VAW/G:
  - BBC Radio 4 Women's Hour: <http://www.bbc.co.uk/programmes/b007qlvb>
  - Radio Rookies: <http://www.wnyc.org/shows/rookies/>
  - The Sarah Awards: <http://thesarahawards.com/very-very-short-short-stories-contest/>
- As a primary prevention priority, funding to be provided that enables the WUTMI VAW/G Support Service to partner with the Public School System on a long-term project to develop curriculum on respectful relationships, gender and MVAW/G<sup>19</sup>. This program should start by targeting high school students and their families (including men and boys), and work towards also targeting elementary school students and their families, through a whole of school/community approach. Programs to be inspired by include:
  - Growing Respect: <http://growingrespect.org.au/what-we-do/overview/>
  - Breaking the Silence Schools Program: <http://www.whiteribbon.org.au/schools>
  - The Line: <http://www.theline.org.au/>
  - R+R: <http://www.swova.org/rr/>
  - Raise It Up: <http://raiseitup.wavaw.ca/>
  - The Fourth R: <https://youthrelationships.org/fourth-r-programs>
  - Project Respect: <http://www.yesmeansyes.com/>
  - Safe Dates: <http://www.hazelden.org/web/qo/safedates>
- Men and boys should be a prioritised target of research, primary prevention and community education activities that identify and address masculinities and men's use of VAW/G in the RMI, utilising existing groups such as taxi drivers, Waan Aelöñ in Majel students, sports teams (such as basketball, volleyball and baseball), clubs (such as fishing clubs) and church groups.
- WUTMI in general, and the VAW/G Support Service more specifically, to work with other organisations to mainstream gender transformative approaches and VAW/G into their programs. For example, the Youth to Youth in Health teenage pregnancy project, Juran Ae programs, and Waan Aelöñ in Majel, through institutional capacity building of staff as well as collaboration on developing and implementing programs.
- Integrated with community education and primary prevention activities, the VAW/G Support Service should implement activities for annual global campaigns that are integrated with ongoing community education and primary prevention activities, and reflect issues and themes from the both casework and community development work. These activities should include working collaboratively with local groups to develop, distribute and evaluate IEC materials and social marketing campaigns, specifically targeting young women, and men and boys.
- Orange Day campaign to be implemented within WUTMI.
- A campaign specifically targeting men on Father's Day to be developed and implemented annually, in collaboration with men and boys engaged in primary prevention programs.

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<sup>19</sup> Please note the opportunities for overlap between the radio and multi-media programming and the Public Schools System primary prevention programs, utilising participatory, community development approaches.

- *The VAW/G Support Service to develop a communications strategy that includes addressing public backlash to awareness raising on VAW/G. Additionally, WUTMI to develop policies and processes to support and care for staff exposed to backlash.*

### 4.3 A safe place to stay

More than half the women who identify as experiencing intimate partner physical or sexual violence report leaving their homes because of the violence (Jansen & Takala Abraham, 2014). This resonates with

*'A shelter ... because I am seeking a safe place'*  
(Workshop Participant, Kwajalein).

the third most popular theme of a safe place for women and girls to stay to escape gender-based violence. Overwhelmingly, the woman participating in the consultation workshops voted to have a shelter in the RMI for women to stay at when they are unsafe, and where they can access other services that are designed to help survivors of VAW/G, such as legal advice and counselling. Some envisaged this shelter to be a short-term option for women to use as respite or to de-escalate the violence before returning home, while others saw it as an opportunity for women to exit their relationships. Some women felt that family and neighbours could not be relied upon to help in times of crisis, particularly in relation to IPV – primarily because communities see IPV is seen as a 'private' matter and they do not want to get involved - and therefore women needed alternate accommodation options, while others noted that men would be 'more angry' if women leave, and would not respect that women have sought refuge with family or neighbours, making refuge with family and friends an unsafe option. The combination of the actions men would take to regain power and control over their partner, and the community fear of the man and belief he is entitled to use violence against her, would combine to make leaving but staying in the community untenable for women and girls unless they have the option of going to a shelter:

*The community won't protect her from the man. If the man goes to the neighbour's house and messes it up because his wife has gone there, the community will blame her and not him. And then the community will refuse to help because they fear he will do like that* (Workshop Facilitator).

*My second thought is for the victim to have a safe place to go too ... I want the victim to be well protected from the perpetrator* (Workshop Participant, Arno).

*A shelter is more like what we need, with a place of counselling and awareness* (Workshop Participant, Kwajalein).

*... the reason we want shelter first is that if things happens to woman now a days, they will have a place to go to* (Workshop Participant, Wotje).

Some women saw that a shelter would fill a gap when other services failed to respond appropriately:

*Sometimes when we call the police they seldom respond right away. But the shelter, we can just go there and feel safe* (Workshop Participant, Kwajalein).



The need for somewhere safe to go was also reflected in Maddy's experience. While experiencing IPV, Maddy was also a survivor of family violence and was unable to safely stay with family members. With no alternative accommodation options, she was vulnerable to her partner's controlling and abusive behaviour and was forced to remain living with him:

*I felt trapped because I had nowhere to go. I had nowhere to be* (Maddy, Survivor of IPV).

Maddy believes that if there had been some form of alternative, safe accommodation service for her, then she would have been spared from experiencing violence every day. The concept of having a safe place for women and girls to go as an alternative option to staying in the relationship was also endorsed by some institutional stakeholders:

*I am assuming here, since there are not alternatives, safe places and that sort of thing, then you just go back* (Religious Sector Stakeholder).

The value of shelters for women and girls experiencing violence is indisputable, and the right of women and girls in distress to safe shelter has been widely acknowledged (UN Women, 2012). The Beijing Platform for Action (United Nations, 1995, para 125(a)) advocates that states must 'provide well-funded shelters and relief support for girls and women subjected to violence.' The provision of refuges and shelters for survivors of VAW/G rests on principles of justice and compassion, and reflect society's 'moral responsibility to act' to protect the vulnerable (Haaken & Yragui, 2003, p. 52).

Studies have shown that shelter programs are 'among the most supportive and effective resources for those with abusive partners' (UN Women, 2014). Women and children benefit from the protection afforded by shelters and the opportunity to improve their psychological well-being (Chanley, Chanley Jr & Campbell, 2001). Shelters have been found to assist women to have increased feelings of hope about the future, greater self-confidence in their own decision-making, to feel comfortable asking for help and talking about their concerns, and increased knowledge about their options (UN Women, 2014)

The benefits to women of shelters and safe houses also improve the communities we live in. Furthermore, shelters act as change agents in the community; their existence can provoke transformation of attitudes and beliefs about VAW/G and survivors (Chanley, Chanley Jr & Campbell, 2001; Farmer & Tiefenthaler, 1997). It is argued that 'it doesn't matter how many resources the police are given, how many laws are passed, how many hotlines or education programs are funded, if women have nowhere safe to go or it's made too difficult for them to leave, they won't' (McMurray, 2015).

There are a number of current models for shelters and refuges already operating in the Pacific, including FWCC, SVSG and various operations in PNG. However, these models have yet not been comprehensively evaluated. Nevertheless, even on the absence of evaluations, there are an obvious range of dilemmas that arise when considering developing and implementing a shelter in the RMI, not least of which is safety and confidentiality within a small island country, with complex social relationships and affiliations. Shelters are resource intensive, security measures would need to be significant, and it is uncertain that a shelter could guarantee women in the RMI the security they seek. For many women living on outer islands, an urban-based shelter would be inaccessible at the times when they need it most, which would limit its use and benefit. A stand-alone shelter may also be less accessible to women living with disabilities who are experiencing violence. There is also a shortage of land and buildings available in the RMI (Majuro) to establish such a service. Based on their experience of establishing several shelters in Samoa, SVSG does

not recommend establishing a shelter in the RMI due to the level of resources, energy and time required to run them.

It is useful to note here that other sectors in the RMI are also struggling with this issue. Discussions with the International Organisation for Migration in the RMI indicate they have similar dilemmas related to safe accommodation for people liberated from trafficking and/or sexual exploitation. Partnering with organisations with a similar need for an alternative accommodation service in the RMI to address these dilemmas, and jointly design and implement a model, is worth pursuing. As is raising this issue formally within the DVPPA TWG.

An alternative option for consideration is a community-based safe house network, providing short-term crisis accommodation to women and children within communities. The safe house network would be provided by local householders who are willing to offer short-term refuge to women and children who are at risk from violence, and would preferably be confidential. A set of criteria for what makes a household suitable to be a safe house network participant would be established collaboratively with the community, especially local women and survivors of VAW/G. Safe house network householders might be community leaders, members of the local coalition (see also section 4.5), or other community members committed to helping. The network would be supported by the VAW/G Support Service community development team through training and community education, developing policies and protocols, householder information and advice, funding and security upgrades as well as case advocacy, and casework and case management support for the women by VAW/G Support Service caseworkers.

There is evidence to support this model. The *FHSS* (2014) found that 80% of women who leave their homes due to physical or sexual violence perpetrated by a partner, go to relatives for help. Thus a community-based safe accommodation option would be more accessible to women help-seeking from local, informal support networks. One of the recommendations of the *FHSS* (2014) was for the construction of traditional thatched houses to be used as women's safe houses & supported by community engagement processes to establish the house.

Additionally, data gathered in the community consultation workshops provide evidence that women are already implementing informal safe house networks in the community, demonstrating women's compassion, courage and solidarity in the face of VAW/G:

*Every weekend, every weekend she comes over to my house. Last weekend she did not come to my house, but somebody told me she went to her neighbour's house. She has been constantly living in every house in her neighbourhood (Workshop Participant, Kwajalein).*

*Our house is a de-facto safe house. Women and young girls run to the house in the middle of the night, more often than not, drunk and/or running from a drunk boyfriend (Personal Communication, Community Member, Enewatak).*

*There is one lady in our congregation, she sometimes come and tell me what happens in her family. I don't know the answer to give her. To tell the honest truth, I told her I would be willing to let her into my house to help her in the middle of the night (Religious Sector Stakeholder).*

*... the one thing about us Marshallese we see these ladies that they're beating them up, and we think that it's okay ... But it's not okay (crying). When I see women being beaten up, I just go straight to that man and push him out, and say, 'this is not our custom' ... So when they see me,*



*they just walk out from the woman ... I say to him, 'just go home and I will talk to your wife, and if she is okay then I'll bring her back there. But if you are going to continue to beat her up, I will take her to her parents' (Lana, Survivor of IPV).*

The proposed safe house network would formalise and support these evolving, pre-existing community practices, and would further shape communities as spaces of possibility for support and safety, rather than places where survivors of VAW/G are stigmatised and blamed (Kim, 2007).

Community support is key to a safe house network being sustainable. The time when women leave a relationship where they were experiencing violence is recognised as a time of increased risk. In order for a woman to be safer in a safe house than if she stayed at home, the community must become intolerant of men's VAW/G. Community attitudes must support women's rights, rather than believing men are entitled to dominate and control women. Communities must be mobilised as active bystanders who believe that men are responsible for the violence being perpetrated, and be committed to processes and procedures that hold men to account including preventing men from accessing women and children while they are staying in safe houses. In this respect, local government police and traditional leaders will play a key role and must be resourced to do so. The cultural preference for maintaining community harmony and avoiding conflict must also be unpacked for the burden it places on women, girls, and children experiencing violence. This cultural value places an unreasonable expectation on women and girls to stay in situations that are unsafe and harmful to them out of cultural responsibility, fear of blame and stigma from the community, and fear of reprisals from the user of violence and/or his family. To achieve these conditions, intensive community awareness raising, community education and primary prevention programs would need to be implemented within the community.



**Figure 13.** Community support is essential to the sustainability of a safe house network.

As will be discussed in more detail later in this report, a local community-based coalition should also be established to provide the first response to women and girls experiencing violence (see also section 4.5) and will co-exist with the community-based safe house network. This coalition would be a key mechanism for monitoring women's safety in the community and taking steps to address the gaps, including providing ongoing community education and awareness raising and intra-community advocacy, with the police, for example. The coalition will also be the link between the community and the VAW/G Support Service. Like a shelter, these measures will also require a large investment of resources, but it is believed that the safe house network model will have greater overall social cost-benefits than a shelter.

The safe house network would not replace informal alternative accommodation options – women would still be free to stay with friends or family and access other formal support from the VAW/G Support

Service. Nor would it be a substitute for evacuating a woman to another location should that be urgently required. However, it would provide women an alternative local option.

While facilitating access to a safe house network, the VAW/G Support Service should simultaneously be taking a policy position in strategic and case advocacy that men using violence should be removed from the house by police and prohibited from returning, rather than women and children being expected to leave. This position should be maintained regardless of who owns the property, whose family dominate the *weto*, who the perpetrator is related to, or who's 'home' island the violence is taking place on.

#### *Recommendations:*

- *The VAW/G Support Service to pilot a safe house network concurrently with a local, community-based coalition providing the first response to women and girls experiencing violence. In the first instance, the model should be piloted in Majuro, Ebeye and two outer islands before being rolled out to other outer islands.*
- *A comprehensive initial evaluation of the pilot model to be completed within 12 months of implementation.*
- *The VAW/G Support Service to provide emergency financial assistance to pay for hotel accommodation and/or transport to alternative safe accommodation where an assessment of risk indicates that this is required and appropriate.*
- *Further investigation into the feasibility of a shelter in Majuro &/or Ebeye to be undertaken.*
- *The VAW/G Support Service to join with other organisations in the RMI who face similar dilemmas regarding alternative, safe accommodation for clients to form a working group to find solutions.*
- *The issue of safe accommodation to be placed on the agenda of the DVPPA TWG.*
- *WUTMI to raise the evaluation of safe accommodation models being used throughout the Pacific Region at the Pacific Women's Network Against Violence Against Women.*

#### *4.4 Work with police to increase their capacity and effectiveness*

*'I want the police to take responsibility when there are abuse case in the community' (Workshop Participant, Arno).*

The women who participated in the consultations workshops are concerned about police capacity and effectiveness in responding to VAW/G, and want to see this enhanced. Women spoke of their belief that police were under-resourced and unaware of their roles and responsibilities to survivors of

VAW/G. It has been the experience of women that police are failing to implement the laws related to VAW/G in their communities and are misusing what resources they do have, with no consequences. A repeated issue within this theme was that when women have reached out to police for assistance, they do not respond. When police do respond to survivors of VAW/G, that response has been noted to be slow and women experience police mostly operating from the belief that the violence is the fault of the woman, and therefore the police do not take any action to intervene, including not taking witness statements:

*But when we call the police, they free the man the next day. So that's why we say these laws have not been enforced yet, but you're saying it's already started (Workshop Participant, Kwajalein).*

*When we report our problems to the police, they don't respond at all. I want them to really enforce these laws to protect. And for your WUTMI office, you should go from place to place to continue helping these women (Workshop Participant, Kwajalein).*

*Because they should do their work properly. When we called them to come for help, they either showed late or couldn't even show up at all (Workshop Participant, Majuro).*

Sometimes, the women described 'conflicts of interest' for the police, who are related to or friends with the user of violence. Women shared that in cases like this, the police might remove the offender, only to drop him off at a house close by or bring him back a short time later. Or as in the example below, return the survivor to a place where she is likely to experience further violence rather than intervening to protect her:

*There was one case, the police was related to the perpetrator. So instead of keeping the girl safe, he returned her to the same place. How come he is a police? There is a conflict of interest (Education Sector Stakeholder).*

One group also noted that the police need to act with courage when responding to VAW/G, suggesting that women have experienced police in some communities to be intimidated by users of violence, and or perhaps by the response from families or the community who believe men should be able to use VAW/G with impunity, and that making men accountable for their use of violence is damaging traditional Marshallese culture.

A local government stakeholder identified the challenges local government councils face with resourcing their police forces:

*For some, no resources to pay salary and wages ... some police could make more selling copra than being a police officer for local government. If they have a special relationship with business people or people with higher resource base, their loyalty can be pledged to them. And those may be the people doing the violence to the women. These are the challenges ... For some, these people are only getting paid once every three months, they could care less. They'd rather go fishing (Local Government Stakeholder).*

In some atolls, it has been suggested that traditional leadership and local government competition for power and resources also undermines community development and the implementation of the law. Additionally, it has been observed that numerous elected and traditional male leaders (and some female) are not in favour of gender equality and the elimination of VAW/G, which is seen by some to be interfering with what is 'normal' or 'natural' use of violence to control women, which would seriously undermine the resources they are willing to invest in this.

Stakeholder interviews with four representatives of police found that, outside of the MIPD Domestic Violence Unit based in Majuro, police officers of various rank have little to no understanding of gender, VAW/G or the DVPPA 2011. One officer, when asked what he would like to see the Support Service do to help women, suggested we lobby the government for a law regarding domestic violence. Another advised us that he does not receive any reports of domestic violence, and if he did the violence would be the women's fault. Outer islands police staff showed little knowledge of what to do if a women experiencing violence contacted them for assistance.

The Pacific Prevention of Domestic Violence Partnership (PPDVP), a joint initiative between the New Zealand (NZ) Aid Programme, NZ Police, and the Pacific Islands Chiefs of Police, has been working with the MIPD to increase capacity to respond to domestic violence for several years. An NZ in-country police technical adviser is expected to be deployed to work within the MIPD Domestic Violence Unit by November 2015, and WUTMI should continue its strong relationship with the PPDVP and the MIPD Domestic Violence Unit through the VAW/G Support Service. This should include providing training to MIPD on gender and VAW/G, as well as collaborating with the same police to develop and implement community education and training to others, particularly on the *DVPPA 2011*. Further, the VAW/G Support Service should advocate that the MIPD Domestic Violence Unit be a stand-alone unit – currently the DV Unit staff are also responsible for the Transnational Crimes Unit and Interpol.



**Figure 14.** MIPD DVPU vehicle.

However the results of this study show most women rely on the local government police for safety and protection from VAW/G, and they are not receiving it. An increase in resourcing and capacity building regarding laws and policing related to VAW/G to those police officers is urgently required to achieve any real progress in relation to increasing the safety of women and reducing VAW/G through policing and criminal justice processes. Local governments need to have increased awareness of their duty to implement the *DVPPA 2011* via local government police. Therefore the Marshall Islands Mayors Association (MIMA) should be included in the DVPPA TWG membership. Local government police are already targeted for training under the Aeneman Project, but the Service should also advocate for PPDVP activities to target local government police. Interviews with local government representatives during this study suggest that some mayors are willing to support this and enthusiastic to partner with WUTMI to reduce men's VAW/G in their local government districts:

*It is something we would be willing to be part of. I mean, we want to be part of everything that is good for our society, and this would one of them* (Local Government Sector Stakeholder).

Police are also keen to engage in opportunities for capacity building related to VAW/G, particularly those working on outer islands:

*I think the only thing that I was going to add is this ... to ask for training to come down to [outer island]. I think this is a must for my staff to learn so in the future they will know and understand their duties in terms of DV cases* (Justice Sector Stakeholder).

Advocacy and capacity building should also focus on establishing clearer protocols between MIPD and local government police for responding to VAW/G on the outer islands. For example, one recent case which was brought to WUTMI's attention involved reports of sexual assault being perpetrated by one man against several women on a remote outer island. This was reported to the local government police, and a traditional leader evicted the man from the island. However, the local government police took no action in response to the reports, and the MIPD Domestic Violence Unit responded by saying they were waiting for a report from the local government police. As a result, no police action has ever been taken and the man's whereabouts is unknown.

As will be outlined later in this report (see section 4.5), the development and establishment of a local, community-based coalition for responding to VAW/G at the local level should be established, and local government representatives as well as local government police should be core members of that coalition. The establishment of the coalition will contribute to increasing local government police capacity, confidence and effectiveness, as well as establishing a mechanism where police will be held to account for implementing to their duties.

#### *Recommendations:*

- *Advocate for plans under the Aeneman Project to build local government police capacity on the DVPPA 2011 to be prioritised and curriculum to be comprehensive.*
- *The VAW/G Support Service community development team to provide training and capacity building to MIPD and local government police on gender and VAW/G.*
- *Advocate for the MIPD DV Unit to be a stand-alone police unit that focuses exclusively on VAW/G.*
- *The VAW/G Support Service to collaborate with the MIPD to develop and implement professional training and community education curriculum, especially in relation to the DVPPA 2011.*
- *The VAW/G Support Service to advocate for MIPD Domestic Violence Unit staff and other MIPD officers to attend the RTP.*
- *The VAW/G Support Service to advocate with the MIMA to increase local government capacity to implement their duties in response to VAW/G, including resourcing and monitoring local government police.*
- *The VAW/G Support Service to advocate that the head of the MIMA be a member of the DVPPA TWG.*
- *In partnership with local governments, the VAW/G Support Service to establish local, community-based coalitions to provide the first response to survivors of VAW/G. Representatives of local government (preferably the Mayor) as well as local government police to be members of the coalition.*
- *VAW/G Support Service caseworkers to advocate with the police on individual cases, including having good working knowledge of the MIPD Domestic Violence Law Enforcement Protocol to enable this.*
- *The VAW/G Support Service to raise breaches in this protocol and any other failures to implement the law with the DV Unit and at the DVPPA TWG.*

#### *4.5 Psychosocial support programs for survivors of violence against women and girls*

*‘Create a space for women to come together and share their experience and get help, with violence and other issues impacting on them’ (Workshop Result, Kwajalein).*

Psychosocial support is another theme that was popular in the data. Women who participated in the workshops often spoke about wanting the Support Service to provide counselling for survivors of VAW/G, and this was also a popular suggestion for institutional stakeholders. One group emphasised that they want counselling support to be accessible in

each community. Another group wanted counselling to be facilitated by the church, while yet another saw family counselling as important to helping survivors of VAW/G:



*I want a counselling service ... There would be times and a place where we can let go of our problems ... I can tell that by sharing our problems we can slowly recover from what we went through. So definitely there should be a place or service or counselling service, they can go from house to house (Workshop Participant, Kwajalein).*

This was also a popular recommendation amongst institutional stakeholders:

*It would be good for woman and women to talk. Sometimes they won't tell me everything what happened. But when women and women talk, they can share from their hearts (Religious Sector Stakeholder).*

*Bring them close to you ... and talk about all these things. I want them to not be afraid to speak out. The only way we can understand is for them to talk about it (Education Sector Stakeholder).*

*A place that everybody knows about it and will report easily about any cases they saw or come up with and the person received the report and then refer it to the appropriate place. The person working in this place will have to concentrate only on domestic violence cases only nothing else, this way I believe it will be easier for people in the community or wherever to report directly to the person (Health Sector Stakeholder).*

These examples from institutional stakeholders introduce qualities of the helping relationship that are seen to be important for supporting survivors of VAW/G, including empathy and compassion, trust, interpersonal communication and listening skills. Here it is also implied that counselling is an important strategy for breaking survivor silence on VAW/G.

However, it has become evident from the consultation study and discussions with professionals working in the human services sector in Majuro that there is not a strong understanding of or capacity to deliver counselling for survivors of VAW/G in the RMI. Many people mistake counselling for 'advice', 'telling women what they should do' and 'fixing' the problem. Some approaches to counselling imply mediation and there was also an undertone of victim-blaming to suggestions of counselling - requests to provide counselling to women on what they can do differently to avoid the violence. Considering that the current capacity for trauma-informed, therapeutic counselling in the RMI is relatively low, it is recommended that WUTMI is cautious at this stage in naming any support they provide as 'counselling'<sup>20</sup>. Although, the pursuit of implementing a trauma-informed, therapeutic psychosocial and counselling support services should continue through investment in workforce development and lobbying of donor partners and government to develop and increase resources for training opportunities.

Nonetheless, caseworkers should immediately be supported to develop some basic counselling skills and knowledge that enable them to provide emotional and practical psychosocial support through crisis intervention, casework and case management from a women's rights and VAW/G informed approach. This form of support is 'crucial' to directly counteracting the 'isolation that the abuser imposes as part of the pattern' of violence (Laing & Humphries, 2013, p. 61) and to assisting survivors to navigate the multi-agency response to VAW/G (Human Rights Watch, 2015).

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<sup>20</sup> The title of the proposed service was changed from 'counselling service' to 'support service' very early on for these reasons.



Case management is the engagement of clients in the ‘collaborative process of identifying, planning, accessing, advocating for, coordinating, monitoring, and evaluating resources, supports, and services’ (National Association of Social Workers, 2013, p.11). The aim of case management is ‘to support and develop the client’s strengths and capacities through their active involvement in the planning and implementation of support and service arrangements’ (Government of South Australia, 2013, p. 10). In a recent review of psychosocial support for survivors of family violence in PNG, Human Rights Watch (2015) criticised the lack of case management services and recommended they be established for victims of family violence in every province to coordinate between agencies and follow up with survivors.

Casework complements case management, and is often considered to be an essential component. The combination of casework and case management approaches will result in continuity and coordinated women-centred care and support:

*A person to run through things and then that person should be the only person that continues on with the case, not passing that client from one person to another, to another and to another (Health Sector Stakeholder).*

During casework, the caseworker will provide direct support to the woman, using active listening and interpersonal communication skills to engage the woman and establish rapport, provide emotional support, information, consciousness raising, advocacy, and practical assistance. Both case management and casework should be underpinned by contemporary knowledge, values and skills related to gender and VAW/G, and will go some way towards supporting women with the emotional and psychological impact violence has on their lives. Research has shown that women-centred advocacy programmes can reduce a woman's risk of further victimisation (Ellsberg et al., 2014). This would reflect the type of service that one of the stakeholders interviewed described:

*When I call you, I want you to come and talk to her so she can share everything with you and you can help her (Religious Sector Stakeholder).*

The psychosocial support element of the VAW/G Support Service should provide a crisis intervention service, which would include an after-hours on-call and/or crisis service. This will enable women to access the Support Service 24 hours a day in response to a recent assault or other crisis (such as feeling suicidal), and will make a caseworker available to broker support from other crisis services such as the police and hospital. This service element reflects expressions of need from the women for a caseworker to be available to respond in an emergency, and to facilitate access to the police. It will also provide women with consistently available support in brokering the attitudes and values of other service providers. The crisis support element of the service would be supported by MoUs with the police and MoH that includes an agreement to refer women (with their knowledge and preferably consent) who present at either of those services as a result of a recent assault, to the VAW/G Support Service *at the time of crisis* (see also section 4.6). A VAW/G Support Service crisis service will necessitate a 24 hour hotline and/or after-hours call-out system (see also section 4.9).

The findings of the community engagement study highlight the need for women to be able to access aspects of psychosocial support in their local communities, mostly due to the barriers women face to accessing support if it is based only in urban centres:

*If there are experts who can help here in on this island, a place for counselling, because Majuro is too far to call. There should be a place and someone we can easily reach out for these kinds of problems (Workshop Participant, Kwajalein).*

*[Build an office locally] so we can easily access, fast, all kinds of information that WUTMI has like this domestic violence (Workshop Participant, Jaluit)*

Two options are proposed to address this. Firstly, the VAW/G Support Service should be based in Majuro with a branch on Ebeye. Access to the service would be managed geographically, with the Majuro main office hosting the community development team and providing casework support, including direct outreach, to survivors of VAW/G living in the Ratak Chain of atolls. The Ebeye branch would provide casework support, including direct outreach, to survivors living in the Railik Chain. Ebeye has an MIPD sub-station and court circuit, as well as a hospital and a branch of the MLSC. Therefore a local branch of the VAW/G Support Service will be vital to facilitating access to these services for women and girls experiencing violence living in the Railik Chain.

The presence of the service in the two main urban centres of the RMI will also significantly contribute to increasing institutional capacity to respond to VAW/G throughout the RMI. Throughout the Pacific region, well established services such as FWCC and Vanuatu Women's Centre, have successfully incorporated branches into their support service models, providing accessible and inclusive prevention and intervention services to women and girls experiencing violence and who are living in remote areas.

Secondly, the VAW/G Support Service should auspice the establishment of local, community-based coalitions on each atoll in the RMI, that provide an immediate crisis response for women who are not able to access the Support Service directly. However, the coalition would be a link to the VAW/G Support Service – referring local women for casework and case management support as appropriate. Over time, as their capacity increased, coalitions would be resourced to implement local, ongoing community education programs on gender and VAW/G. This concept resonates with several of the recommendations of the FHSS, as well as suggestions made by two participants in institutional stakeholder interviews:

*A community group may be more powerful, because they're more organised. Even without resources, if they are well networked, with influence in the community, then they can become the focal point. You can rely on them to be a watch group or an awareness group, and a link to those issues. Even without resources, that would be a success (Local Government Stakeholder).*

*You need to coalition, organised and helping each other and standing up to the men (Social Services Stakeholder).*

Membership of the proposed local, community-based coalitions would include:

- Traditional leaders (Iroij/Leiroij and/or Alaps)
- A local government representative, preferably the Mayor
- Local government police
- Health assistants (MoH)
- School Principal/s
- Local church leaders
- Women defenders - community women in each district/weto trained to provide emotional support and advocacy for women and girls experiencing VAW/G.

The majority of members of the coalition would bring with them in-kind contributions as part of their existing responsibilities and duties. However, funding to the coalitions would be provided to assist with initial and ongoing training and support, regular coalition meetings, local provision of practical assistance, and payment of stipends for Women Defenders. This model would also contribute to capacity building and diversification of income for women recruited as Women Defenders, while also enabling them to be role models of women's knowledge, skills and leadership capabilities.

Local coalitions would complement the DVPPA TWG. The TWG operates at a strategic-level and can be a forum where issues related to policy and practice and implementing the *DVPPA 2011* at the local level through the coalitions could be raised and addressed. The strength of the coalitions would depend largely on committed partnership with local government. To this end, discussion has already begun with the MIMA seeking their commitment to pilot the model, and several outer islands leaders requested WUTMI bring the VAW/G Support Service program to their islands at the recently held WUTMI General Meeting Conference.

Similar models to the proposed local coalitions are being implemented by other VAW/G services throughout the Pacific. Earlier in this report, the House of Sarah and SVSG models were briefly outlined. The SVSG model currently has a network of 700 'village representatives' who act as the 'eyes and ears' of SVSG throughout Samoa. The village representatives receive training on interpersonal communication skills, the qualities and values of a helper, and domestic violence. They look out for signs of someone being a victim of violence in their village and will approach them to offer assistance. They will also act as a link between remote villages and SVSG via SVSG's hotline. The village representatives are coordinated by the village council, who takes responsibility to intervene in some cases to ensure the safety and well-being of the woman being harmed. Therefore, some cases are resolved at the community level without being reported to the police or SVSG staff having to intervene further themselves. According to the Executive Director of SVSG, the success of this model is a result of gaining community support over a number of years, resulting in the community believing in the rights of women.

Kiribati uses the SafeNet model to coordinate the multi-sector response to GBV at the national and local level. SafeNet members agree to work in partnership in order to ensure consistency and best practice in response to GBV (*SafeNet Terms of Reference*, np). Currently, there is an active SafeNet group on Tarawa with a second group soon to be mobilised on another nearby island.

Similarly, in the RMI the Kumit-Bobrae coalition implements seven local coalitions on five atolls with a focus on substance abuse prevention and intervention. Each coalition undertakes strategic planning to identify the substance abuse issues in their area, identifying and implementing activities to address the main issues of concern. Each group is supported by a Prevention Specialist and Data Assistant, each a paid staff position based at the Kumit-Bobrae office. The strength of the Kumit-Bobrae coalition has been noted as its commitment in participatory, community-based models of working based on core Marshallese values of 'kumit', the union of a community to accomplish a task, and 'diji im ukoj', uniting peoples' backbones to build strengthen and move an object out of harm's way. This foundation ensured investment from the community from the start. Additionally, the coalition has prioritised data collection and analysis to ensure evidence-based program management. There may be scope to merge the Kumit-Bobrae coalitions and coalitions against violence against women in the future, as well as mainstreaming responses to VAW/G into the Kumit-Bobrae coalitions.

As with the proposed safe house network, the local coalition model relies on the commitment of the community to eliminating VAW/G and supporting survivors. This would be fostered through a community education and awareness-raising program pre-establishment; intense training, monitoring and support to the coalition by the VAW/G Support Service community development team; and simultaneous ongoing community education and awareness campaigns and the implementation of local primary prevention programs after establishment.

The intervention of the local coalition would be followed up with referrals to the VAW/G Support Service for casework and case management support, which would include regular outreach visits to local communities to provide direct support to women. It is recommended that these outreach visits coincide with community education workshops and/or tours by Wa Kuk Wa Jimor to maximise potential for visits with women to be kept confidential within the community.

Finally, WUTMI is aware that the current organisational office space is no longer fit for purpose, and leadership is seeking alternative office accommodation. This is vital for the VAW/G Support Service. The new space will need to have welcoming and comfortable interview rooms for meeting with clients, as well as space for clinics, training, workshops and education sessions, and potentially for group work activities. It will also need to offer a higher level of security than the current space, including secure (screened) entry and reception staff.

#### *Recommendations:*

- *The VAW/G Support Service to have a main office in Majuro (Ratak Chain), and a branch in Ebeye (Railik Chain).*
- *The VAW/G Support Service model to include the provision of psychosocial support through case management and casework.*
- *The VAW/G Support Service to provide 24/7 crisis service and/or after-hours on-call crisis service.*
- *WUTMI to consider investing in ongoing workforce development in gaining accredited counselling qualifications and experience (see also Responding to Violence Against Women & Girls: Report on the WUTMI Training Needs Assessment 2015).*
- *The VAW/G Support Service to auspice the establishment of local, community-based coalitions against VAW/G on each atoll in partnership with local governments.*
- *The coalition model to be piloted on Majuro, Kwajalein & two outer islands initially (alongside the safe house network).*
- *WUTMI to find alternative office accommodation as soon as possible, that accommodates the space and security measures required for the VAW/G Support Service.*
- *VAW/G Support Service staffing to include a receptionist/administration officer in both Majuro and Ebeye.*
- *Program staff undertake a study tour to learn observe and experience established models for delivering a support service for survivors of VAW/G, to include Pacific island destinations and potentially Australia and/or New Zealand (see also Responding to Violence Against Women & Girls: Report on the WUTMI Training Needs Assessment 2015).*

#### 4.6 Facilitate access to female health and legal services staff for survivors of violence against women and girls

The FHSS found that, of those women who told someone about their experience of intimate partner domestic violence, 54% turned to informal support networks while just 9% turned to formal support networks (Jansen & Takala Abraham, 2014). Of the women who did seek formal support for their experience of VAW/G, almost half did so because they were badly injured (Jansen &

Takala Abraham, 2014). This identifies the two hospitals and local health clinics in the RMI as *key entry points* into the formal helping system for women and girls experiencing violence. However, international research has shown that detection rates for victims of violence by health staff is low (Marcus, 2008; Roberts, 1995), with a number of reasons cited such as lack of time for screening, lack of training and understanding of VAW/G, fear of offending the woman, and not knowing where to refer women onto. During the consultation workshops, women concluded that having access to a female doctor/medical staff for medical examinations would make health settings more accessible for women and girls experiencing violence:

*We need the lady to be a doctor to talk to and really doing screening thoroughly, not like a male doctor. We feel confidence in telling the truth about ourselves to a female doctor ... the female doctor will be honest with us in listening and telling us what we should and shouldn't do. When ... we have take off our clothes to do screening for the body, then we won't get shy to do so* (Workshop Participant, Majuro)

While it is worth advocating for gender-specific hospital services for responding to survivors of VAW/G in urban centres of Majuro and Kwajalein, it seems unlikely that there will be efficient progress towards achieving this in health clinics on the outer islands. Therefore, it is recommended that the VAW/G Support Service also advocate for gender training be mainstreamed throughout the health system in the RMI, while also advocating for a roster of female medical staff being available to treat women and girls who present at the two hospitals with injuries or medical treatment related to gender-based violence (for example, forensic examinations following rape).

Women also requested that the VAW/G Support Service has a female lawyer. This service would reduce the barriers women and girls experiencing gender-based violence face to accessing the protections provided under the DVPPA 2011, as well as increasing their access to legal information and advice related to family law and property, including child support:

*They say that to have a lady lawyer it will be easier for woman to share and talk about whatever is happening to them, from the tiniest thing to the big ones* (Workshop Facilitator).

*'Having a lady lawyer is giving us more chance to tell our stories in details because we won't feel ashamed. We know that she will be really listening to us, more concerned and more cared about us because she is a woman'* (Workshop Participant, Aur).

The MLSC has expressed enthusiasm and support for working more closely with WUTMI to provide access to the law for women and girls experiencing violence. MLSC has a main office on Majuro, and a branch also on Ebeye. It is recommended that the VAW/G Support Service work with MLSC to develop and implement a model of sharing a female lawyer that specialises in working with survivors of VAW/G starting with the lawyer being based part-time at the VAW/G Support Service while being managed by MLSC. This model should include free legal clinics and legal literacy workshops at the VAW/G Support Service for women and girls wanting advice and legal support related to VAW/G and family law, collaboration in community education, as well as the lawyer travelling with the VAW/G Support Service team on outreach to the outer islands.

Women and girls who have experienced violence face multiple barriers to discussing their accounts of abuse with others (Othman, Goddard & Piterman, 2014). Studies have found that many women who are survivors of gender-based violence, particularly rape, will experience secondary victimisation and traumatisation through the behaviours and attitudes of social service providers. Attitudes that blame the survivor for the violence, that reflect myths related to VAW/G, and/or which are insensitive to the impact VAW/G has on survivors, can closely mirror the positions taken by users of violence to justify the abuse (Campbell, 2006).

Research has shown that survivors have more positive experiences of the medical and legal systems, and experience less distress, when they were supported by a VAW/G advocate (Allen et al., 2004; Campbell, 2006; Howarth et al., 2009). Survivors who were supported by a caseworker during the contact with hospital emergency departments received a higher level of medical treatment and reported fewer negative encounters with health staff. Similarly, Patterson and Tringali (2015) found multiple elements of advocacy performed by support workers that may address common barriers to survivors participating in the criminal justice system, including approaching survivors with compassion and respect, dispelling myths associated with guilt and self-blame, and providing options to address survivor's fear of retaliation from the user of violence. In the RMI context, a caseworker would also be able to work with the survivor to address their fear of family responses and/or community stigma.

Therefore, in an effort to build gender-sensitivity amongst health and legal services as well as broker increased access to these services for survivors of VAW/G using a gender transformative approach, it is recommended that the VAW/G Support Service prioritise establishing MoUs with the MIPD, MoH and MLSC. The MoUs with MoH and MIPD are to include agreement to having a VAW/G Support Service caseworker present when survivors are accessing their service, including the provision for a caseworker to be called out after hours in a crisis/recent assault, for forensic medical examinations, and for statements or legal advice to be provided at the VAW/G Support Service premises. Data collected in this study suggest the justice sector would welcome this option:

*If we can have that support service, it would help a lot. If you could come when have this case, it would really help us out. I know you guys have more experience and deal with that, so you can really help us out (Justice Sector Stakeholder).*

As VAW/G is a complex issue, single interventions are unlikely to be effective (Laing & Humphreys, 2013). This model of working together would signify progress towards a better coordinated, integrated multi-agency response to VAW/G that will have improved outcomes for women and girls and increased accountability for men who are using GBV.



#### *Recommendations:*

- *The VAW/G Support Service to develop MoUs with:*
  - *MoH (with Human Services initially, moving onto whole MoH during 2016 & 2017)*
  - *MIPD (the Domestic Violence Unit initially in 2016, moving onto the whole of the MIPD in 2017)*
  - *Local government police on Majuro and Kwajalein in 2017*
  - *MLSC (2016)*
- *The VAW/G Support Service advocates for a multi-agency integrated protocol by 2018.*
- *The VAW/G Support Service model to include provision of legal assistance and advice from a female lawyer through partnership with MLSC.*
- *The VAW/G Support Service will advocate for a closed court for all matters related to gender-based violence and child protection, including victims not being identified in media.*
- *The VAW/G Support Service will advocate for women and girls to have a choice in the gender of doctors treating them in relation to experiences of GBV. This will include lobbying for more female doctors to be recruited by MoH, as well as having an on-call roster of female doctors (or senior forensic nurses) to respond to women and girls needing examination or treatment as a result of GBV.*
- *The VAW/G Support Service will work with the MoH to increase the capacity of all health staff to understand and appropriately respond to survivors of VAW/G, including implementing screening processes in at least the Emergency, Human Services and Sexual and Reproductive Health Departments.*

#### *4.7 Programs to assist men who are using violence to choose to have respectful relationships with women and girls*

Some consultation groups felt that one of the best things a VAW/G Support Service could do to assist women and girls experiencing GBV is to develop programs to support men who are using violence to change their choices and behaviour. Some women felt that the only thing stopping men from using intimate partner domestic violence in particular, was knowledge and understanding about VAW/G:

*'If a man [who uses violence] wants help, what does he do?'* (Religious Sector Stakeholder).

*We believe that if men understand about the ... domestic violence, they won't do it* (Workshop Participant, Majuro).

*Even the boyfriend, he also needs counselling. In that situation, he also needs help so he will stop doing that* (Education Sector Stakeholder).

A woman in another group felt that programs targeting men using violence would be a diversion for them, resulting in decreased violence for their female partners. For women who identify violence as being caused by alcohol, the programs were also identified as a diversion from drinking<sup>21</sup>.

Referring in particular to IPV, many women do not want to leave their relationship - in fact, many women cannot leave due to social stigma, financial dependence and/or fear of the user of violence – but want the violence to stop and to be safe from harm in their relationship. As a result, more attention is being given globally to programs that invite men to be accountable for their use of violence while providing counselling, education and skills to influence men to make more respectful, gender-equal choices in their intimate relationships.

The community education and primary prevention programs already recommended will go some way towards addressing men's choice to use VAW/G. In addition, it is recommended that the VAW/G Support Service seeks to develop a partnership with another organisation or community group to develop and establish an intervention and accountability program for men choosing to use violence. One consultation workshop group specifically nominated that churches should deliver services like this, and there was an underlying theme throughout the results that churches have a valuable role to play in VAW/G prevention and intervention.

Churches have a lot of power in the RMI, and working with church leaders is one approach to consider. Communities see the church as a source of guidance and counselling, and as having responsibility for supporting families. Both men and women are already seeking advice from church leaders in response to IPV. However, evidence from this community engagement study demonstrates that while churches and church leaders are a source of opportunity for VAW/G prevention and intervention, they can also be barriers as the following quotes from religious sector stakeholder demonstrate:

*So many women are beat up because of themselves, because they are looking down [on the men]. The law is killing women also. Because now the man sit in the cell and think, 'I didn't beat her, but when I get out I will take her to the small island and have a picnic.' You know, beat her to the maximum (laughing) (Religious Sector Stakeholder).*

*God created men, and then he wanted a helper, not an equal ... Women abuse their position. Instead of helping the man, they looking down on him. Instead of being the missing rib, sometimes they are missing a bone in their head. I always say, 'Women remember that you are the missing rib of a man. He give it to you. And the rib is not over here, it is not over there. It is right under the control of the man.' Women are the missing rib (Religious Sector Stakeholder).*

As these few examples demonstrate, church leaders can be invested in reproducing gender ideology that promotes gender inequality and VAW/G in ways that can be very damaging, and are doing so with the authority of the bible. Some church leaders perceive that the empowerment of women is to blame for VAW/G, and collude with men in their congregation that the pursuit of gender equality is 'a curse' on Marshallese culture. Due to their influence on the worldviews of individuals and communities, it is essential that church leaders are engaged in capacity building and awareness raising on gender and

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<sup>21</sup> Note that it is not the position of WUMTI that alcohol use or being drunk cause's men to use violence against women and girls. While it may be an element present in some incidents of violence, the majority of types of violence are perpetrated when men are sober. Men choose to use violence as a result of patriarchal gender norms and values that permit them to do so with impunity.

VAW/G. However, further research and careful attention to developing church-based specialist programs for intervening with men using violence is needed before any formal service delivery partnerships are pursued.

In the interim, the VAW/G Support Service should focus on both formally and informally developing the capacity of church leaders in relation to gender and VAW/G at the individual and sector levels, so that their capacity to support men seeking help to change their choices and behaviours in relation to perpetrating VAW/G is enhanced. This will build on the proposed training for faith-based organisations included within the Aeneman Project, and should include the promotion of women's rights-based interpretations of the bible.

Additionally, at least one church leader was enthusiastic about setting up a multi-faith panel or steering group for church leaders focusing on gender equality and addressing VAW/G, and having a symposium on religion and women's rights. Another was open to the VAW/G Support Service coming to speak to men participating in his church's men's fellowship program, where he identified men regularly discuss the 'harm' to men and Marshallese culture caused by the empowerment of women. Several churches have social and recreation programs for young people that could be targeted for community education, primary prevention and mainstreaming a gender transformative approach. It should also be noted that the female church leaders spoken to during the community engagement study wanted to gain skills in how to speak to women and girls who they know are experiencing violence and expressed a desire to know more about the DV legislation.

It has also been suggested that Leiroij, Iroij and Alabs should be targeted in the same way, as they are also currently providing intervention where men are perpetrating VAW/G and could benefit from additional support and capacity building to enhance their knowledge and skills in this area. Reports received suggest that traditional leaders are demonstrating a preference for keeping families together regardless of the costs of this to women experiencing violence. When they do intervene strongly with men using violence, they tend to impose informal penalties such as banning the men from the island, rather than implementing the law.

Participation by both traditional and church leaders in the proposed community-based coalitions will also substantially strengthen their capacity to respond to VAW/G, including supporting them to transform their own values and beliefs and hold men accountable.

The consultation workshops and VAW/G Support Service Project team discussions have identified that there are often times when the men charged with intervening in men's VAW/G across all levels, are actually perpetrators of violence themselves and are reluctant to give up their own gender power and privilege. It was implied in some workshops that women who are married to police officers are experiencing IPV, and a number of community leaders are known to be using violence against their wives. To address this issue, any mechanism that is set up to intervene with men using violence should have a code of conduct that stipulates how members of that mechanism will be responded to if they are found to be using violence. The Support Service should also continue to advocate for internal police protocols regarding police officers using violence to be rigorously implemented. Finally, WUTMI needs to urgently resolve its position on the implementation of collaborative reporting as required under the §.923 of the *DVPPA 2011*.

#### Recommendations:

- *Research programs for working with church leaders/communities to establish formal intervention programs for changing the choices and behaviours of men using violence, with a view to partnering with churches/multi-faith church coalition to implement an intervention program for men using VAW/G in the future.*
- *Target church leaders for institutional capacity building, including the establishment of a multi-faith steering group on gender equality and to unite on a campaign of zero-tolerance of VAW/G and women's rights-based interpretations of the bible. Examples of programs in the Pacific include the House of Sarah, SVSG and Uniting World.*
- *Target traditional leaders – Leiroij, Iroij & Alabs - for capacity building on gender and VAW/G.*
- *In the interim, refer men using violence to church leaders for information and advice.*
- *Develop a mechanism through which to address inappropriate responses related to VAW/G provided by church and/or traditional leaders, with consideration given to how the TWG can be utilised for this.*

#### 4.8 Help women to access the police

*'Report it to the police and give them the information, so things stop from getting worse' (Workshop Participant, Kwajalein).*

In addition to building the capacity of police as discussed earlier, there was a second theme featuring the police. This theme was about women requesting that the Support Service assist them to call the police and report the violence they are experiencing:

*Create program or service to help when needs help call the police (Workshop Participant, Kwajalein).*

Some stakeholders highlighted that women need help to talk to the police because they 'feel shy'. Others also suggested a barrier to women accessing police protection and criminal justice in cases of IPV is fear that their husband will be arrested.

The MIPD Domestic Violence Unit based in Majuro is largely inaccessible and unfamiliar to almost all women living on outer islands, where local law and order is supposed to be maintained by local government police<sup>22</sup>. In these small and isolated communities, barriers women face to accessing local government police include police having no knowledge of their duty to women experiencing violence, police being friends with or related to the user of violence, or the police officer being a user of violence themselves and therefore women are unable to trust that he will respond appropriately to their situation.

Anecdotally, evidence also suggests that the MIPD Domestic Violence Unit is often unavailable due to being off-island attending training.

Proposed services discussed above will assist with addressing this, including implementing local coalitions, the VAW/G Support Service developing an MoU with police that includes advocacy and call-outs/outreach

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<sup>22</sup> MIPD do have sub-stations in Laura (Majuro), Jaluit, Wotje and Kwajalein. However, the specialist Domestic Violence Unit is located in Majuro, Majuro only.

during statements, having a 24 hour crisis service that can provide advocacy and support to survivors to access police, and providing capacity building to police to increase their knowledge and awareness of gender and VAW/G. Casework and case management support should include providing support and advocacy when women give police statements, and follow up with police on the progress of their investigation and gathering of witness statements and other corroborating evidence. This approach is supported by research findings that have demonstrated that ‘survivors who had the assistance of an advocate were significantly more likely to have police reports taken and were less likely to be treated negatively by police officers’ (Campbell, 2006, p. 30). They also reported feeling less distress as a result of their contact with the criminal justice system.

An additional strategy is to advocate that both the MIPD and local government police employ more female officers. This would also be consistent with the theme of facilitating access to gender-sensitive legal services (see also section 4.6):

*We notice if it is a female officer taking all the information, it’ll come easier than if it’s a male officer. Information is much more easily forthcoming when it is female dealing with female* (Justice Sector Stakeholder)

Currently, MIPD have just five female sworn officers all based in Majuro, and the DV Unit has one female officer. Majuro local government police also reportedly have five female police officers, but it is unlikely there are any on outer islands. Recruiting more female police could increase the trust and accessibility of the police to survivors, resulting in increased reporting and more motivated investigations and less distress experienced by women, especially in a cultural context where it is still highly taboo for women to speak to men about intimate personal matters.

*Recommendations (see also section 4.4):*

- *The VAW/G Support Service to advocate for an increase in female police officers at both MIPD and local government police level.*
- *Advocate for at least one Domestic Violence Unit officer to be present on-island at all times.*

#### *4.9 Violence against women and girls hotline*

Just two consultation workshop groups and a few stakeholders considered a hotline a priority for the Support Service design. While it has been a popular element within other Support Service models being implemented across the Pacific Region and was a recommendation from the FHSS (2014), the benefits of a hotline may be limited in the RMI due to the relatively low uptake of

*‘... if there was, like a toll-free number or something. A hotline or something like that, I think that would be an excellent idea. They could keep their privacy and be helped’* (Religious Sector Stakeholder).

mobile phones and mobile phone network coverage currently only available on 6 of the 29 atolls. The National Telecommunication Authority (NTA) has rolled out local ‘telecentres’ on 21 atolls, giving the public access to the internet and domestic and international telephone calls and fax. However, these telecentres are not located in a private and confidential space, are reported to be managed and controlled



**Figure 15.** Social abuse education materials used in the consultation workshops.

by local men<sup>23</sup>, and are not available 24/7. These factors limit the usefulness of telecentres for access to a VAW/G hotline.

Some women noted that a hotline might not be useful where men are restricting and/or monitoring their partner's use of their mobile or landline telephone, having learned about tactics of social abuse in the community education session within the consultation workshop (Figure 2). Further, if the local operator of a telecentre is the user of violence, or related to or a friend of the user of violence, women would also be restricted from safely accessing this service.

However, if the Support Service is to provide a 24/7 crisis service for survivors of VAW/G, then some form of hotline and/or after-hours call-out mechanism will be required to support this. Having a hotline will provide a distinct entry point into the multi-sector response system, something at least one stakeholder felt was an important

issue to address, particularly for young women:

*I see a need for them to have easy access to the service so they know who to go to. All these young girls, they need to know where to go (Health Sector Stakeholder).*

It is also predicted that the hotline will be used by family and friends of women and girls experiencing violence, requesting information and support to intervene. In their first month of operation, almost half the calls received by the PNG hotline were from men using violence, reportedly wanting information on how to change their behaviour.

It will be useful to establish and monitor use of the hotline service for the atolls who currently have access to telephone network coverage, and use this information to lobby NTA to bring forward their plans to roll out network coverage to additional atolls and increase private access to the telecentres and atolls where they are already established.

#### *Recommendations:*

- *The VAW/G Support Service model to include a national, freecall VAW/G hotline, in conjunction with a 24/7 crisis support/call-out service.*

<sup>23</sup> Access to the telecentre is available only when the local operator is available. As a consequence, the telecentre might not be available at all if the local operator is off island.



#### 4.10 Strengthening the capacity of institutions and leaders to respond to violence against women and girls

The data from the stakeholder interviews was quite revealing in relation to the pressing need to address gaps in knowledge and understanding of gender, women's rights, gender equality and VAW/G in the RMI amongst the NGO, government and religious sectors. Most interviewees had little to no knowledge and understanding of

these issues, including the law, and showed no signs of mainstreaming gender into their programs. Observations of other stakeholders also indicates low capacity related to program management and VAW/G, including key staff involved in implementing gender and VAW/G programs.

None of the institutional stakeholders interviewed for the community engagement study indicated they were screening for VAW/G and some stakeholders were unable to accept that VAW/G is a cross-cutting issue and how it might benefit their clients to mainstream screening into their existing and future programs, even in programs where this may be obvious such as family planning and sexual and reproductive health programs:

*We don't do screening here. That area, its one area we are not dealing with. We hear about it, but they don't come here and tell us about it. We don't deal with that. We're here for prevention and treatment* (Health Sector Stakeholder).

Even where VAW/G is indicated, programs are ignoring the signs out of anxiety and lack of knowledge of what to do and/or ignoring their legal obligations to report for responding:

*We don't really have a structure for that, like where do you go and there and there. What I did was take her to the doctor, and then the doctor had to tell the police. The police came there, but they didn't show that they were there. The doctor just reported the case to the police from her findings* (Health Sector Stakeholder).

Section 923 of the DVPPA 2011 introduced a responsibility for mandatory reporting of domestic violence by proscribed professions and organisations in the RMI. However, this section of the Act is not well understood and is not currently being implemented by any organisation. The data also reveals a weak culture of referral, with some stakeholders confused that they would have to 'deal' with VAW/G themselves if they started talking to clients about it. This is perhaps a reflection of there being few referral points within the RMI, including no existing VAW/G Support Service:

*This interview has helped us to see, to open up that this is an area we really need and to collaborate with your organisation. Because that is something we never really knew that we can work together. There have been cases, but we've not really wanted to ask. Now we can start to work in collaboration* (Health Sector Stakeholder).

*'I don't know if there are legal frameworks where it's enacted into the law about the protection of them [women experiencing violence]. That is where it should start. Maybe that's already in place?'* (Local Government Sector Stakeholder).

Confidentiality for professionals living in small communities was identified as a challenge, and as something that prevents women from requesting help from formal support services. Confidentiality practices of authorities such as police, health and social services staff in both government and non-government services were also identified as preventing professionals from referring women and girls onto those services. However, representatives of these institutional stakeholders demonstrated a willingness to commitment to ethics of confidentiality and privacy, with one social services sector participant revealing that she has told her family not to ask her about her work and vowing never to share any information regardless of what the user of violence and/or his family said or did.

A couple of stakeholders expressed fear of men using VAW/G that prevents them from intervening both professionally and personally in VAW/G, and this is also a fear for some WUTMI staff. Staff are afraid of being harmed themselves by those men, of interfering in what most still refer to as ‘private’ business, and are also concerned about familial politics where they themselves are related to the user of violence or have some other hierarchical social relationship to the perpetrator or his family (for example, the user of violence is a member of the family of the traditional leaders or elected government representatives). Public backlash to the pursuit of gender equality and elimination of VAW/G is common:

*It’s sometimes scary. I mean, sometimes I get scared, especially of the father. It’s kind of scary because we all know each other, this is a small island* (Education Sector Stakeholder).

Individual organisations, as well as multi-agency forums, should develop policies and practices to address worker safety in VAW/G contexts, including zero-tolerance of intimidation by users of violence and their families or representatives.

*Recommendations (see also Section 4.2 & 4.7):*

- *As recommended in the Responding to Violence Against Women & Girls: Report on the WUTMI Training Needs Assessment 2015, the VAW/G Support Service should develop essential and complementary VAW/G training curriculum that can be marketed to external service providers.*
- *The VAW/G Support Service to investigate partnering with the National Training Council (NTC) to implement accredited gender training for people working in government and NGO sectors.*
- *WUTMI to advocate for NTC to include criteria related to gender in training funding proposals.*
- *The Public School System curriculum specialists to be especially targeted regarding training on gender, gender mainstreaming and gender transformative approaches.*
- *The VAW/G Support Service to partner with MoIA to implement the Aeneman project, targeting capacity building on the DVPPA 2011 and general VAW/G knowledge for a range of professionals.*
- *As appropriate, the VAW/G Support Service to develop MoUs/referral protocols with additional services, such as Youth to Youth in Health and Public School System social workers/counsellors.*
- *Work with the Marshall Islands Journal to increase staff capacity to report on VAW/G in the media.*

## 5. Conclusion & Summary of Recommendations

Efforts to address VAW/G in the RMI are entering a new phase of coordinated action, with a focus at this stage on developing the conditions in which women and girls experiencing violence can access support and the protections of the law. The establishment of the RMI’s first support service for survivors of VAW/G, that reflects the rights and priorities of women and girls, is a significant element within these developments. This together with the implementation of the *National Gender Policy of the Republic of the Marshall Islands* (2014), the full implementation of the *DVPPA 2011*, and other efforts gaining

momentum at the organisational and individual level, should see a major mobilisation of commitment and resources towards the goal of eliminating VAW/G in the RMI in 2016.

This community engagement study provided insights into the lived experience of women and girls experiencing violence and how this translates into rights violations and service delivery specifications, and in itself stands as an intervention in VAW/G. Through participatory engagement, women and girls from throughout the RMI have identified that they want a service that is flexible and inclusive in how it responds to women and girls experiencing violence. Women want the service to provide options to increase their safety, including timely crisis support, access to emergency financial assistance and transport, and a safe place to stay. Women and girls also believe survivors will benefit from having someone to listen to them, to provide them with information, options and emotional support. Women and girls hope that the Support Service will make it easier for survivors of VAW/G to access informed and gender-aware health and legal services, including more effective responses and intervention from the police. Training, advocacy and the establishment of joint working MoUs and referral protocols between the VAW/G Support Service and key agencies will significantly increase opportunities for this to occur.

A key element to the success of the interventions of the VAW/G Support Service will be impact at the local level within the remote outer islands of the RMI. A model for coordinated first response provided by local stakeholders through the establishment of local, community-based coalitions against VAW/G on each atoll will expand women's options and engage duty bearers in implementing their responsibilities at the local level. Women will also be supported locally by having access to the VAW/G Support Service in both Majuro and Ebeye, which will feature regular outreach visits to the outer islands (see Figure 16).

Transforming entrenched gendered values and beliefs that underpin gender inequality is vital to creating an enabling environment for the support survivors of VAW/G and eventually eliminating it altogether. Through this study, women and girls have been able to identify a range of discriminatory and oppressive beliefs about women, men and gender power relations that underpin the practice of VAW/G and which can be addressed through community awareness raising and education, and long-term primary prevention programs and institutional capacity building utilising a gender transformative approach. This includes direct intervention with men who are choosing to use violence, beginning with strengthening the responses of traditional and church leaders to men they know are using violence in addition to professional training and continuous strategic advocacy.

**Figure 16.** Violence Against Women & Girls Support Service Model



These service elements combine to form a holistic, multi-level, integrated support service that will best serve the needs of survivors of VAW/G throughout the RMI, as depicted in Figure 12.

The implementation of Phase 1 of the VAW/G Support Service from January 2016 will be the realisation of the hopes and aspirations of many dedicated Marshallese women. The Support Service will launch with the provision of a freecall number and case management and casework support for survivors of VAW/G. The first phase will also focus on the development and implementation of a comprehensive, general community education curriculum suitable for a range of audiences. Additionally, the VAW/G Support Service will maintain WUTMI's dedication to systemic advocacy and campaigning on behalf of women and girls, continuing to challenge gender status quo in the pursuit of women's human rights.

#### *Summary of Recommendations:*

##### **Practical Assistance to Increase Women's Options and Safety:**

- The VAW/G Support Service to immediately include a budget for the provision of emergency financial assistance to survivors of VAW/G, including to pay for transport.
- Provision of this assistance to be underpinned by policy and procedures that includes an assessment of risk and need, and safety planning.
- The VAW/G Support Service to have a private vehicle, at least in Majuro, to be used to deliver a crisis response to VAW/G (including after hours) as well as facilitating (non-crisis) access to other services for women and girls experiencing violence, such as police and court.

- As a starting point related to international evacuations, the VAW/G Support Service to develop MoUs with VAW/G support services in Honolulu and Guam.
- Develop & implement an MoU with Micronesian Legal Services Corporation (MLSC) to enable referrals for legal support related to family law and child support, and the establishment of legal clinics and workshops to increase women's legal literacy in relation to their economic rights<sup>24</sup>.
- WUTMI to lobby for the VAW/G Support Service to have access to the Domestic Violence Prevention and Protection Fund as outlined in §926 of the DVPPA 2011 to provide emergency financial assistance to survivors of VAW/G, including for the establishment of the Fund.
- Further investigation of longer-term economic support and security options for women escaping VAW/G are required, to find ways to reduce the burden on women of choosing between living with violence or living in poverty and/or being homelessness. This to include investigation of social security benefits, training and employment programs, and microfinance and income generation programs.

### **Community Education and Awareness Raising On Violence Against Women and Girls:**

- The WUTMI VAW/G Support Service model should include a community development team/unit (separate from the casework team) that develops and implements general and targeted participatory community awareness raising programs, community education curriculum, and primary prevention programs throughout the RMI according to a Primary Prevention Strategy.
- The community development team should recruit male staff to work together with female staff to develop and implement community education and primary prevention activities.
- This work should begin immediately during Phase 1 of the VAW/G Support service implementation by developing a basic, general community education program that utilises a participatory, gender-transformative approach and which addresses the priority issues below, to be progressively rolled out throughout the RMI:
  - Definitions and meaning of VAW/G, with a focus on gender, gender power relations and VAW/G as a pattern of coercive control.
  - Types and tactics of VAW/G, and their impact.
  - The commonly held violence-supporting and victim-blaming attitudes and beliefs based in entrenched gender inequality, including that women cause or provoke the violence, that men are justified in using violence, that IPV is a 'private' matter, that gender discrimination against women and men's VAW/G is 'normal' or 'custom', that women who refuse to have sex with their partners must be cheating and therefore violence is justified.
  - Women's human rights, respectful relationships, gender equality and core Marshallese values that support these.
  - VAW/G and the law
  - Responding to VAW/G in the community
  - Different curriculum elements tailored to specific audiences, such as young people, people living with disabilities and so on.

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<sup>24</sup> Work began on this recommendation in October 2015 and will feature in Phase 1 of the VAW/G Support Service implementation.

- The VAW/G Support Service community development program should implement regular and ongoing national radio programs on gender and VAW/G and/or repair and reinstate the WUTMI radio station.
- The VAW/G Support Service community development team should work towards implementing comprehensive, ongoing and coordinated participatory multi-media primary prevention programs that utilise methodologies such as talkback, podcasts, audio-fiction and digital storytelling, and include educating local media on reporting VAW/G:
  - BBC Radio 4 Women's Hour: <http://www.bbc.co.uk/programmes/b007qlvb>
  - Radio Rookies: <http://www.wnyc.org/shows/rookies/>
  - The Sarah Awards: <http://thesarahawards.com/very-very-short-short-stories-contest/>
- As a primary prevention priority, funding to be provided that enables the WUTMI VAW/G Support Service to partner with the Public School System on a long-term project to develop curriculum on respectful relationships, gender and MVAW/G<sup>25</sup>. This program should start by targeting high school students and their families (including men and boys), and work towards also targeting elementary school students and their families, through a whole of school/community approach. Programs to be inspired by include:
  - Growing Respect: <http://growingrespect.org.au/what-we-do/overview/>
  - Breaking the Silence Schools Program: <http://www.whiteribbon.org.au/schools>
  - The Line: <http://www.theline.org.au/>
  - R+R: <http://www.swova.org/rr/>
  - Raise It Up: <http://raiseitup.wavaw.ca/>
  - The Fourth R: <https://youthrelationships.org/fourth-r-programs>
  - Project Respect: <http://www.yesmeansyes.com/>
  - Safe Dates: <http://www.hazelden.org/web/go/safedates>
- Men and boys should be a prioritised target of research, primary prevention and community education activities that identify and address masculinities and men's use of VAW/G in the RMI, utilising existing groups such as taxi drivers, Waan Aelöñ in Majel students, sports teams (such as basketball, volleyball and baseball), clubs (such as fishing clubs) and church groups.
- WUTMI in general, and the VAW/G Support Service more specifically, to work with other organisations to mainstream gender transformative approaches and VAW/G into their programs. For example, the Youth to Youth in Health teenage pregnancy project, Juran Ae programs, and Waan Aelöñ in Majel, through institutional capacity building of staff as well as collaboration on developing and implementing programs.
- Integrated with community education and primary prevention activities, the VAW/G Support Service should implement activities for annual global campaigns that are integrated with ongoing community education and primary prevention activities, and reflect issues and themes from the both casework and community development work. These activities should include working collaboratively with local groups to develop, distribute and evaluate IEC materials and social marketing campaigns, specifically targeting young women, and men and boys.
- Orange Day campaign to be implemented within WUTMI.

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<sup>25</sup> Please note the opportunities for overlap between the radio and multi-media programming and the Public Schools System primary prevention programs, utilising participatory, community development approaches.



- A campaign specifically targeting men on Father's Day to be developed and implemented annually, in collaboration with men and boys engaged in primary prevention programs.
- The VAW/G Support Service to develop a communications strategy that includes addressing public backlash to awareness raising on VAW/G. Additionally, WUTMI to develop policies and processes to support and care for staff exposed to backlash.

#### **A Safe Place to Stay:**

- The VAW/G Support Service to pilot a safe house network concurrently with a local, community-based coalition providing the first response to women and girls experiencing violence. In the first instance, the model should be piloted in Majuro, Ebeye and two outer islands before being rolled out to other outer islands.
- A comprehensive initial evaluation of the pilot model to be completed within 12 months of implementation.
- The VAW/G Support Service to provide emergency financial assistance to pay for hotel accommodation and/or transport to alternative safe accommodation where an assessment of risk indicates that this is required and appropriate.
- Further investigation into the feasibility of a shelter in Majuro &/or Ebeye to be undertaken.
- The VAW/G Support Service to join with other organisations in the RMI who face similar dilemmas regarding alternative, safe accommodation for clients to form a working group to find solutions.
- The issue of safe accommodation to be placed on the agenda of the DVPPA TWG.
- WUTMI to raise the evaluation of safe accommodation models being used throughout the Pacific Region at the Pacific Women's Network Against Violence Against Women.

#### **Work with Police to Increase their Capacity and Effectiveness:**

- Advocate for plans under the Aeneman Project to build local government police capacity on the DVPPA 2011 to be prioritised and curriculum to be comprehensive.
- The VAW/G Support Service community development team to provide training and capacity building to MIPD and local government police on gender and VAW/G.
- Advocate for the MIPD DV Unit to be a stand-alone police unit that focuses exclusively on VAW/G.
- The VAW/G Support Service to collaborate with the MIPD to develop and implement professional training and community education curriculum, especially in relation to the DVPPA 2011.
- The VAW/G Support Service to advocate for MIPD Domestic Violence Unit staff and other MIPD officers to attend the RTP.
- The VAW/G Support Service to advocate with the MIMA to increase local government capacity to implement their duties in response to VAW/G, including resourcing and monitoring local government police.
- The VAW/G Support Service to advocate that the head of the MIMA be a member of the DVPPA TWG.
- In partnership with local governments, the VAW/G Support Service to establish local, community-based coalitions to provide the first response to survivors of VAW/G. Representatives of local government (preferably the Mayor) as well as local government police to be members of the coalition.

- VAW/G Support Service caseworkers to advocate with the police on individual cases, including having good working knowledge of the MIPD Domestic Violence Law Enforcement Protocol to enable this.
- The VAW/G Support Service to raise breaches in this protocol and any other failures to implement the law with the DV Unit and at the DVPPA TWG.

#### **Psychosocial Support Programs for Survivors of Violence Against Women and Girls:**

- The VAW/G Support Service to have a main office in Majuro (Ratak Chain), and a branch in Ebeye (Railik Chain).
- The VAW/G Support Service model to include the provision of psychosocial support through case management and casework.
- The VAW/G Support Service to provide 24/7 crisis service and/or after-hours on-call crisis service.
- WUTMI to consider investing in ongoing workforce development in gaining accredited counselling qualifications and experience (see also *Responding to Violence Against Women & Girls: Report on the WUTMI Training Needs Assessment 2015*).
- The VAW/G Support Service to auspice the establishment of local, community-based coalitions against VAW/G on each atoll in partnership with local governments.
- The coalition model to be piloted on Majuro, Kwajalein & two outer islands initially (alongside the safe house network).
- WUTMI to find alternative office accommodation as soon as possible, that accommodates the space and security measures required for the VAW/G Support Service.
- VAW/G Support Service staffing to include a receptionist/administration officer in both Majuro and Ebeye.
- Program staff undertake a study tour to learn observe and experience established models for delivering a support service for survivors of VAW/G, to include Pacific island destinations and potentially Australia and/or New Zealand (see also *Responding to Violence Against Women & Girls: Report on the WUTMI Training Needs Assessment 2015*).

#### **Facilitate Access to Female Health and Legal Services Staff for Survivors of Violence Against Women And Girls:**

- The VAW/G Support Service to develop MoUs with:
  - MoH (with Human Services initially, moving onto whole MoH during 2016 & 2017)
  - MIPD (the Domestic Violence Unit initially in 2016, moving onto the whole of the MIPD in 2017)
  - Local government police on Majuro and Kwajalein in 2017
  - MLSC (2016)
- The VAW/G Support Service advocates for a multi-agency integrated protocol by 2018.
- The VAW/G Support Service model to include provision of legal assistance and advice from a female lawyer through partnership with MLSC.
- The VAW/G Support Service will advocate for a closed court for all matters related to gender-based violence and child protection, including victims not being identified in media.
- The VAW/G Support Service will advocate for women and girls to have a choice in the gender of doctors treating them in relation to experiences of GBV. This will include lobbying for more

female doctors to be recruited by MoH, as well as having an on-call roster of female doctors (or senior forensic nurses) to respond to women and girls needing examination or treatment as a result of GBV.

- The VAW/G Support Service will work with the MoH to increase the capacity of all health staff to understand and appropriately respond to survivors of VAW/G, including implementing screening processes in at least the Emergency, Human Services and Sexual and Reproductive Health Departments.

#### **Programs to Assist Men Who Are Using Violence to Choose to Have Respectful Relationships with Women and Girls:**

- Research programs for working with church leaders/communities to establish formal intervention programs for changing the choices and behaviours of men using violence, with a view to partnering with churches/multi-faith church coalition to implement an intervention program for men using VAW/G in the future.
- Target church leaders for institutional capacity building, including the establishment of a multi-faith steering group on gender equality and to unite on a campaign of zero-tolerance of VAW/G and women's rights-based interpretations of the bible. Examples of programs in the Pacific include the House of Sarah, SVSG and Uniting World.
- Target traditional leaders – Leiroij, Iroij & Alabs - for capacity building on gender and VAW/G.
- In the interim, refer men using violence to church leaders for information and advice.
- Develop a mechanism through which to address inappropriate responses related to VAW/G provided by church and/or traditional leaders, with consideration given to how the TWG can be utilised for this.

#### **Help Women to Access the Police:**

- The VAW/G Support Service to advocate for an increase in female police officers at both MIPD and local government police level.
- Advocate for at least one Domestic Violence Unit officer to be present on-island at all times.

#### **Violence Against Women and Girls Hotline:**

- The VAW/G Support Service model to include a national, freecall VAW/G hotline, in conjunction with a 24/7 crisis support/call-out service.

#### **Strengthening the Capacity of Institutions and Leaders to Respond to Violence Against Women and Girls:**

- As recommended in the *Responding to Violence Against Women & Girls: Report on the WUTMI Training Needs Assessment 2015*, the VAW/G Support Service should develop essential and complementary VAW/G training curriculum that can be marketed to external service providers.
- The VAW/G Support Service to investigate partnering with the National Training Council (NTC) to implement accredited gender training for people working in government and NGO sectors.
- WUTMI to advocate for NTC to include criteria related to gender in training funding proposals.
- The Public School System curriculum specialists to be especially targeted regarding training on gender, gender mainstreaming and gender transformative approaches.

- The VAW/G Support Service to partner with MoIA to implement the Aeneman project, targeting capacity building on the DVPPA 2011 and general VAW/G knowledge for a range of professionals.
- As appropriate, the VAW/G Support Service to develop MoUs/referral protocols with additional services, such as Youth to Youth in Health and Public School System social workers/counsellors.
- Work with the Marshall Islands Journal to increase staff capacity to report on VAW/G in the media.

## 6. Appendix 1: List of Participants in the Community Engagement Study

### *Participatory Community Consultation Groups*

Arno	Baha'i Church
	Salvation Army Church
Aur	Women's Group
Jaluit	Women's Group
	Juran Ae
Kwajalein	Catholic Church
	Seventh Day Adventist Church
	Rukjenleen Sewing Program
Majuro	Ahmadiyya Muslim Community
	EZ Price (2 workshops)
	Laura Elementary School Mother's Group
	Marshall Islands People with Disabilities Organisation
	Parents As Teachers Program
	USP Weaving Group
	Young Women Working in the Sex Industry
Wotje	Assembly of God Church Women's Group
	Youth to Youth in Health
	Likjeron Women's Group

### *Institutional Stakeholder Interviews*

Julia Alfred	Director, Single State Agency
Stacey Anmontha	Community Nurse Counsellor, Human Services, Ministry of Health, Majuro.
Mercyba Balos	Coordinator, Domestic Violence Unit, Marshall Islands Police Department, Majuro.
Judy Bennet	Salvation Army, Majuro
Rose Bobo	Counsellor, Human Services, Ministry of Health, Kwajalein
Jibaibe Boktok	Health Assistant, Wotje
Seth Bunglik	Health Assistant, Arno.
Lina Chang	Executive Director, Samoa Victim Support Group
William Fife	Manager, Micronesia Legal Services Corporation, Majuro.
Hilda Heine	Minister for the Public School System & WUTMI Advisor
Molly Helkena	Acting Deputy Secretary, Ministry of Internal Affairs, Majuro.
Carl Ingram	Chief Justice, Marshall Islands High Court, Majuro.
Jide Jacob	Acting Mayor, Wotje
Carline Jarom	Children's Rights Officer, Ministry of Internal Affairs, Majuro.
Glorine Jeadrik	Assistant Secretary, Ministry of Health, Kwajalein
Anthony Jetton	Principal, Jaluit High School
Tina John	Salvation Army, Majuro
Malynne Joseph	Adolescent Health Program Manager, Youth to Youth in Health, Majuro
Mutiullah Joya	Imam, Baet-ul-Ahad Mosque, Majuro

Marlina Laibwij	Counsellor, Laura High School, Majuro
Freddy Langrine	Acting Director, Human Services, Ministry of Health, Majuro.
Marlynn Lomae	Health Assistant, Jaluit
Mark B. Luk	Pastor, Rita Uniting Church of Christ, Majuro
Marie Maddison	Chairperson, Public Service Commission & WUTMI Advisor
James Matayoshi	Mayor of Rongelap & President of the Marshall Islands Mayors Association, Majuro
Angela Saunders	Head of Sub-Office, International Organisation for Migration, Majuro
Mary-Rose Silk	Salvation Army, Majuro
Fong Subillie	Criminal Investigation Division, Marshall Islands Police Department, Kwajalein.
Aluka Rakin	Executive Director, Youth to Youth in Health, Majuro
Calora Rakin	Clerk, Jaluit Local Government
Matthew Rufus	Chief of Police, Wotje
Unknown	Police Officer, Arno.



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