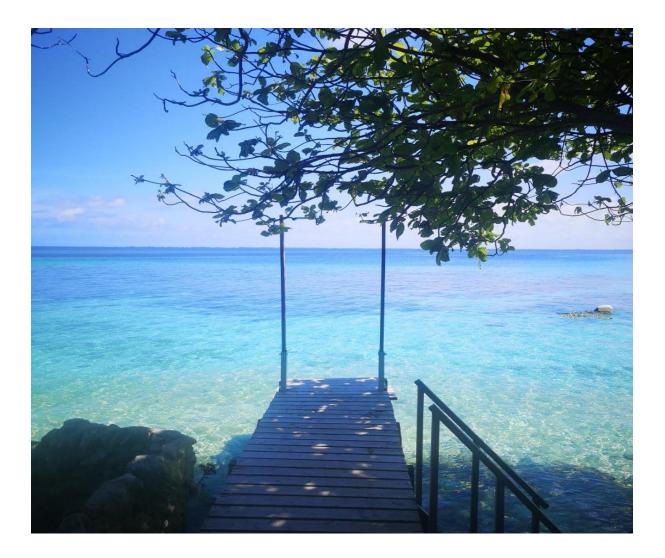




Republic of the Marshall Islands Gender Based Violence Service Directory and Referral Tool



Forward

Established in 1951, the International Organization for Migration (IOM) is the leading intergovernmental organization in the field of migration and is committed to the principle that humane and orderly migration benefits migrants and society. The IOM is part of the United Nations system, as a related organization.

As an intergovernmental organization, the IOM acts with its partners in the RMI and international community in the promotion of human rights and ceasing of all forms of Gender-Based Violence.

Building on this, IOM through the UN Spotlight Initiative has committed to activities to assist end violence against women and girls.

The Spotlight Initiative is a global, multi-year partnership between the United Nations (UN) and the European Union (EU), focusing on eliminating all forms of violence against women and girls (VAWG).

The Initiative provides an opportunity for a multi-sector, coordinated and holistic approach to addressing violence against women and girls working through multiple stakeholders including the UN, Government, service providers, churches and civil society.

This working document/directory is intended to be a tool for those providing services to survivors of genderbased violence (GBV) for referral purposes.



Purpose of this tool:

The purpose of this document is to provide the most up to date information on key RMI GBV actors and organisations to enhance collaboration and best practice among stakeholders.

This objective is achieved through:

- Detailing the roles and responsibilities of RMI's Multistakeholder model to assist helpers provide information that enables GBV survivors/victims to make informed decisions about their safety and well-being.
- Providing a brief introduction to Survivor Centred Care, basic GBV principles and unifying definitions based on International Best Practice guidelines and alignment with the Ministry of Health and Human Services GBV Standard Operating Procedure.

The tool was produced in collaboration with RMI stakeholders¹ and in addition to everyday use would be useful to utilise in the development of a comprehensive National GBV Interagency Protocol.

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¹ See Appendix 1, p37

Overview: Republic of the Marshall Islands and Gender Based Violence

The Republic of the Marshall Islands (RMI) encompasses 29 atolls and islands in the western Pacific Ocean with a population of approximately 58,971 with most people residing in urban settlements either in the capital of Majuro (52%) or the island of Ebeye, Kwajalein atoll (22%).²

In 2006, the RMI government ratified the Convention on the Elimination of Discrimination Against Women (CEDAW) and further to this endorsed a National Gender Policy in 2015 in recognition of over 51% of women reporting experiences of intimate partner violence and 61-62% of children experiencing physical violence.³

Gender Based Violence (GBV) exists in many forms and has detrimental physical, psychological, social and economic consequences for individuals, families and communities across the RMI.

In 2015 the RMI government introduced the National Gender Mainstreaming Policy to assist in mitigating these consequences. The policy provides guidance to the government in mainstreaming gender perspectives across its policies, strategies and programs.

Partnership with organisations such as Women United Together Marshall Islands (WUTMI), between traditional leaders and the civil sector and listening to the lived experience of survivor/victims provides an opportunity to ensure interventions are contextual and promote existing traditional resources.

MARSHALL	ISLANDS	
FEDERATED	Pokak	
STATES OF MICRONESIA	ORTH PACIFIC OCEAN BI	ikar
Bikini	Rongrik Taka	
Ailingin	ae Rongelap Ail Likiep	uk Mejit Island
Wotho		Votje
Ujae	Lae Erikub	Maloelap Aur
-0	Namu Ma	juro Arno
	Ailinglapalap Maju Namorik ^{Jaluit}	Mili
Equator	Kili	Knox
LADSTRALIA	Ebon	50km Raila(Mab

Map Sources: UNCS, Gov't. of U.S.A.,

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Map created Jun 2010 - www.relief.wab.int

² Asian Development Bank, 2020, Marshall Islands Gender Equality Overview: Key Statistics for Informed Decision-Making in Celebration of Beijing+25, Asian Development Bank, <u>http://hdl.handle.net/11540/12859</u>, (accessed 10th March 2021).

³ Government of the Marshall Islands and Secretariat of the Pacific Community, 2018, *Gender Equality. Where Do We Stand? Majuro; and Government of the Marshall Islands, Republic of the Marshall Islands, Majuro.*

What is Gender Based Violence (GBV)?⁴

An umbrella term for any harmful act that is perpetrated against a person's will; it is based on socially ascribed (gender) differences between males and females. It includes acts that inflict physical, sexual or mental harm or suffering, threats of such acts, coercion, and other deprivations of liberty. These acts can occur in public or in privateⁱ.

Whilst women and girls in the RMI are significantly more likely to be targets of GBV, men and boys can also be targeted. The term is also inclusive of targeted violence against LGBTQI+ individuals and communities.

GBV exists in many forms including child abuse, femicide, sexual violence, human trafficking, female genital mutilation and online and digital violence. The most common type of GBV existing in the RMI is domestic or intimidate partner violence.

• Domestic/Intimate Partner Violence⁵ Domestic Violence, also called Domestic Abuse or Intimate Partner Violence (IPV), is any pattern of behaviour that is used to gain or maintain power and control over an intimate partner. This includes:

Physical violence

Physical violence involves hurting or trying to hurt a partner by hitting, kicking, burning, grabbing, pinching, shoving, slapping, hairpulling, biting, denying medical care or forcing alcohol and/or drug use, or using other physical force. It may include property damage.

Economic violence

Economic violence involves making or attempting to make a person financially dependent by maintaining total control over financial resources, withholding access to money, and/or forbidding attendance at school or employment.

• Psychological violence

Psychological violence involves causing fear by intimidation; threatening physical harm to self, partner or children; destruction of pets and property; "mind games"; or forcing isolation from friends, family, school and/or work.

Emotional violence

Emotional violence includes undermining a person's sense of self-worth through constant criticism; belittling one's abilities; namecalling or other verbal abuse; damaging a partner's relationship with the children; or not letting a partner see friends and family.

Sexual violence

Sexual violence includes forcing a partner to take part in a sex act when the partner does not consent.

Other key terms:

Child: Under the UN Convention on the Rights of the Child (1989), a child means every human being below the age of 18 years⁶

Survivor /Victim: 'Survivor/Victim refers to people who have experienced/are affected by violence. The term survivor is usually preferred by those working on violence against women to emphasize that women affected by violence have agency and are not merely passive "victims" in the face of violence. The term victim is, however, used in criminal justice'⁷

⁴ OCHA, 2015, *Guidelines for Integrating Gender-based Violence Interventions in Humanitarian Action: Reducing Risk, Promoting Resilience, and Aiding Recovery*, IASC Inter-Agency Standing Committee, <u>https://interagencystandingcommittee.org/working-group/documents-public/guidelines-integrating-gender-based-violence-interventions</u>, (accessed May 4th 2021)

⁵ UN Women, 2021, *Key Terms: Gender Based Violence*, UN Women, <u>https://www.unwomen.org/en/what-we-do/ending-violence-against-women/fags/types-of-violence</u>, (accessed 29th April, 2021)

⁶ OHCHR, *Article 1 of the Convention on the Rights of the Child 1989*, Office of the United Nations High Commissioner for Human Rights (OHCHR), <u>https://www.ohchr.org/en/professionalinterest/pages/crc.aspx</u> (accessed 29 April 2021)

⁷ Ministry of Health and Human Services, 2021 (draft) Standard Operating Procedures: Clinical Management of Rape and Sexual Violence (2021 Draft) MoHHS, RMI

Informed Consent: The Survivor/Victim is given understandable and clear information about their options to enable people to be empowered to understand choices and consequences attached to referral and sharing information with other services. This may include but is not limited to the police, health or legal services.

Confidentiality: Ensuring conversations and documentation is kept private and not publicly available unless either mandated to share or consent given by the survivor/ victim to share information with another service. Lack of confidentiality in services hinders people from accessing services, disempowers survivor victims by diminishing choice and control and creates safety risks for the survivor.

Warm referral: can include 'phoning the service for the person, passing on information to the service with the person's consent and, in some cases, where people need more support, helping them to navigate the service system'⁸. An effective warm referral is supported by consistent collaboration and understandings between service providers of confidentiality and survivor centred practice.

'Trafficking in Persons: The act of recruiting, transporting, transferring, harbouring or receiving a person within the RMI or across international borders by means of abduction, threats, coercion, fraud, deception, threats to abuse the legal system or some other form of power, or by giving or receiving payments to achieve consent for purpose of exploitation'.⁹

Psychological First Aid (PFA) is a psychosocial support activity that helps people affected by an emergency, disaster or traumatic event. It is a 'humane, supportive response to a fellow human being who is suffering and who may need support'. This includes but is not limited to GBV survivor/victims¹⁰.

LIVES model: A model of care that specifically supports survivor/victims of GBV and/or sexual violence

Key legislation:

The Domestic Violence Prevention and Protection Act 2011 (DVPPA) criminalises domestic violence and introduces provisions for the safety of survivors. This includes but is not limited to attaining protection orders.

Sexual offences outside of family relationships remain a crime under the Criminal Code 2011

The Child Rights Protection Act 2015 enshrines the rights of children in the RMI. The Act details State civil intervention powers to protect children and/or remove them from homes where they are at risk of or being harmed.

Other RMI gender equality key legislative efforts include:

- Human Rights Committee Act of 2015
- Rights of Persons with Disability Act of 2015
- Birth, Death and Marriage Registration Act of 2016
- Prohibition of Trafficking in Persons Act of 2017
- Gender Equality Act 2018



⁸ Victorian Government, 2021, The Orange Door Service Model: Referrals to Services, Government of Victoria Australia,

https://www.vic.gov.au/orange-door-service-model/referrals-services, (Accessed April 20th, 2021)

⁹ Trafficking in Persons Standard Operating Procedure for Law Enforcement Victim identification, investigation, protection and referral (Draft), RMI

¹⁰ Australian Red Cross and the Australian Psychological Society, 2021, Psychological First Aid, Victoria, Australia,

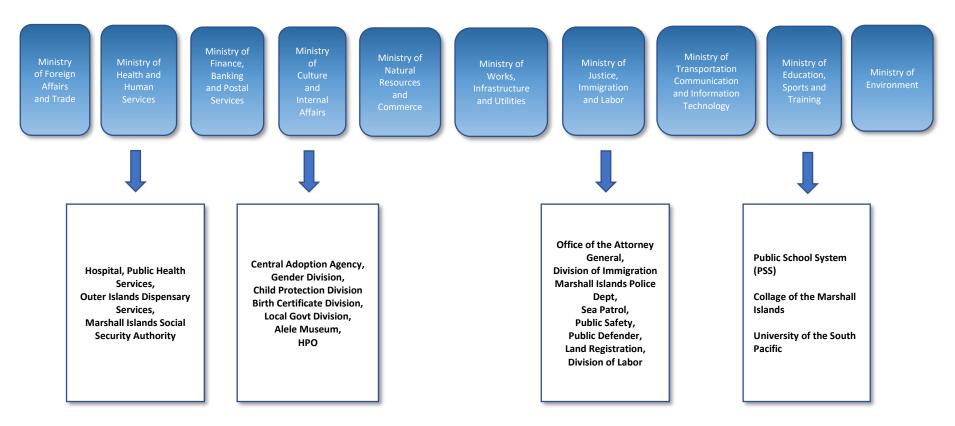
https://www.redcross.org.au/getmedia/dc21542f-16e4-44ba-8e3a-4f6b907bba6f/Psychological-First-Aid-An-Australian-Guide-04-20.pdf.aspx (accessed 20th May 2021)

RMI Government structure: Key Ministries

Government Ministries and departments hold authority in Gender Based Violence (GBV) legislative, justice, education and development and direct practice services and activities.

This includes but is not limited to GBV support and education through the Gender in Development office, child protection and health care services, anti-human trafficking mechanisms and justice and legal and legislative responsibilities that support survivor/victims and engage perpetrators.

RMI Government Ministries:



Ministry of Culture and Internal affairs

Gender in Development Office:

The RMI Ministry of Culture and Internal Affairs (MoCIA), Community Development Division (CDD) has primary responsibility for child, youth and women services.

Activities relating to Gender Equality and Human Rights including but not limited to GBV are engaged through the Gender in Development office under the Community Development Division (CDD).

In 2015, the office assisted in facilitating the adoption of the National Gender Mainstreaming Policy and has guided the RMI government in mainstreaming gender perspectives across its policies, strategies and programs. This has included building the capacity of and working with stakeholders to translate the policy into reality to benefit the people of the Marshall Islands.

The Gender in Development Office (GID) have a Memorandum of Understanding (MOU) with Women United Together in the Marshall Islands (WUTMI) and their Weto in Mour (WIM) program in which WIM provide services to Survivor/Victims of GBV.

Key awareness and development activities of the office include gender mainstreaming, gender equality and women's empowerment, advocacy and awareness initiatives, training on RMI legislation and policies and Secretariate to the Domestic Violence (DV) Taskforce and reporting for CEDAW.

Child's Rights Office:

The Child's Rights Office within the Community Development Division (CDD) has responsibility for children and youth services including coordinating services and activities to comply with the Convention of the Rights of the Child (CRC) in the RMI.

Within this Ministerial Office the Child's Rights Coordinator is responsible for liaising and working closely with stakeholders in coordinating child rights initiatives and works in close cooperation with the other offices within the CDD, including the Youth Services Bureau, the Gender and Development Office (GAD), and the Disability Coordination Office¹¹.

Specific to child protection direct engagement /practice mechanisms, the Child's Rights Office works in collaboration with Local and National police in undertaking assessments and investigations into allegations of child abuse and neglect.

The Office issues licenses verified by the Human Rights Committee to child protection service providers and keeps a registry of children and other relevant data such as incidences, nature and scope of child abuse and neglect.

Ministry of Health and Human Services:

The Ministry of Health and Human Services (MOHHS) plays an essential role in direct healthcare provision, developing national policies, guidelines, standards, protocols and training curricula for GBV service delivery and engaging in various health related prevention and awareness campaigns.

Specific to GBV patient support, health care workers have capacity across various sites in identifying survivors, managing urgent injuries and trauma, offering psychological first aid (PFA) and first-line support (LIVES), safety planning, completing patient history and physical examinations, provision of treatments including emergency contraception (EC), sexually transmitted infections (STIs) and post exposure prophylaxis (PEP) for HIV infections.

¹¹ United Nations Children's Fund, 2017, Situation Analysis of Children in the Marshall Islands, UNICEF, Suva,

https://www.unicef.org/pacificislands/media/1146/file/Situation-Analysis-of-Children-Marshall-Islands.pdf, (accessed 29th April 2021)

GBV patient services are provided through RMI's two central Hospitals in Ebeye and Majuro and outer island community health centres and heath dispensaries (see page 19-20).

MoHHS sites endeavour to utilise survivor centred models to provide best practice patient care and support.

Mental health and counselling services specific to GBV and trauma are provided in central locations (Majuro and Ebeye) with support and clinical supervision provided to health care staff to provide appropriate care in outer island clinics and health dispensaries.

If appropriate, staff may work with the survivor/patient to collect evidence and documentation and prepare reports for court matters.

In addition to inpatient and outpatient services, referrals to police and legal services to attain support, justice and protection orders can be provided as well as to psychosocial support agencies such as WUTMI.

MoHHS facilities are also mandated to refer child survivors of GBV to the Ministry of Cultural & Internal Affairs (MoCIA) Child's Rights Office (see page 35).

Ministry of Justice, Immigration and Labour

The role of the Ministry of Immigration and Labour (MoJI&L) is to promote justice and safety for RMI citizens through the Marshall Islands Police Department (MIPD), Office of the Attorney General, Division of Immigration, Division of Labour, Sea Patrol and through public safety and defender mechanisms.

The MoJI&L supports the RMI Judiciary which consists of five different levels: the Supreme Court; the High Court; the Traditional Rights Court; the District Court; and the Community Courts. These exist alongside a Judicial Service Commission and court staff. The Judiciary is also able to travel to the outer islands when required¹².

Through the MIPD and local Police, survivors and perpetrators of GBV are engaged through interviewing and assessment, investigations including gathering and recording evidence, gaining statements from witness and safety planning.

In addition to the above, police are able to detain the suspect/perpetrator for 24 hours whilst assisting a survivor to apply for protection orders and make referrals to necessary supports.

The Domestic Violence Unit in MIPD provides direct support and assistance to survivors of GBV in Majuro and also assists outer island stakeholders with GBV advice and support when engaging with survivors and perpetrators.

The Division of Immigration, MIPD, Public Defender's office and Micronesian Legal Services Corporation are shifting towards providing coordinated responses to instances of human trafficking including where GBV is present.

¹² Republic of the Marshall Islands Judiciary, 2015, *Annual Reports*, 2015, http://rmicourts.org/annual-reports/. P66 (accessed May 1st, 2021)

Survivor-Centred Care¹³: WHAT IS IT?

A survivor centred approach to GBV seeks to empower the survivor by prioritizing their rights, needs and wishes ensuring that they have access to appropriate, accessible, and good quality services.

In facilitating a survivor- centred approach, stakeholders assist the survivor/victim:

- be treated with dignity and respect instead of being exposed to victim-blaming attitudes.
- choose the course of action in dealing with the violence instead of feeling powerless.
- privacy and confidentiality instead of exposure.
- non-discrimination instead of discrimination based on gender, age, race/ ethnicity, ability, sexual orientation, HIV status or any other characteristic.
- receive comprehensive information to help them make their own decision instead of being told what to do.

Survivor-Centred Care and Psychological First Aid (PFA)

PFA provides a basic framework for all stakeholders to assist GBV Survivor/Victims. PFA is a flexible approach that does not require the helper to have a clinical background. 'Survivor Centred Care' principles should be at the forefront of assistance when providing PFA. PFA promotes safety, instils hope and promotes calm, connectedness and self-efficacy.¹⁴

	(1) Look	 Helpers gather information on what has happened and what is happening by observing: Who needs help Safety and security risks for yourself and the survivor Physical injuries Immediate and basic needs Emotional reactions 	
6	(2) Listen	 Helpers listen to survivors/victims with dignity, respect and non-discrimination: Approach someone Introduce yourself Pay attention and listen actively Accept other's feelings and believe them! Calm the person in distress Ask about needs and concerns Assist the person address immediate needs 	
® ® ® ®	(3) Link	 Assist the person address immediate needs Helpers provide comprehensive information to survivor/victims to make informed decisions about their support and confidentiality needs. Helpers assist survivor/victims: Access Information Connect with social supports Engage with practical problems Access services and provide warm referrals 	

Stakeholders can contact the IOM to discuss PFA training (see page 31).

¹³ UN Women, 2011, *Survivor-Centred Approach*, UN Women Virtual Knowledge Centre, <u>https://www.endvawnow.org/en/articles/652-</u> <u>survivor-centred-approach.html</u>, (accessed May 10th, 2021)

¹⁴ Australian Red Cross and the Australian Psychological Society, 2021, *Psychological First Aid*, Victoria, Australia,

https://www.redcross.org.au/getmedia/dc21542f-16e4-44ba-8e3a-4f6b907bba6f/Psychological-First-Aid-An-Australian-Guide-04-20.pdf.aspx (accessed 20th May 2021)

RMI Multisector Approach:

GBV Survivor/Victims and their supporters may interact with multiple agencies to access safety, support and justice.

A collaborative multisector approach promotes Survivor-Centred Care and a well-coordinated response between agencies improves practice, accountability, and safety.

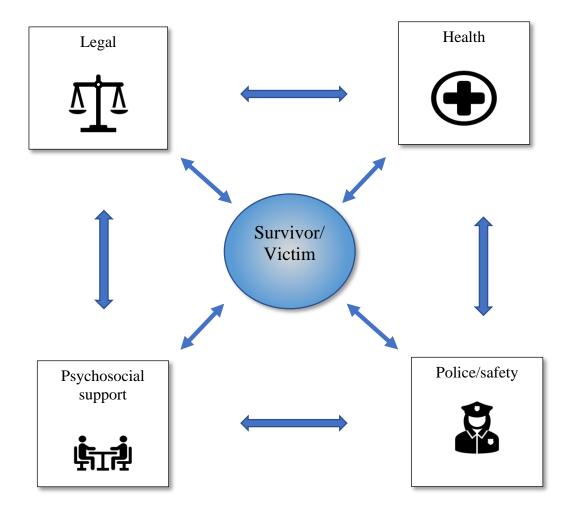
Through aligning best practice principles, methods and referrals Health, Police, Legal and Psychosocial service agencies can interact to ensure the best interests of the survivor are the primary concern.

A robust GBV multisector approach between RMI Police, Child Protection, Health, MLSC and NGOs enhances quality of engagement through minimum standards in relation to trauma-informed practice, confidentiality and consent, referral pathways and documentation and inclusive responses for diverse populations, including women and girls with disabilities, as well as lesbian, bi-sexual, and trans women.

This formal multisector model of support in the RMI coexists with traditional practices and formal and informal community coalitions of support within a diverse ethnographic and political context.

Service provider and community understanding of how these stakeholders operate and interact assists the survivor/ victim to make informed choices about where, when and which, if any sectors below they may engage for assistance.

RMI MULTISECTOR MODEL:



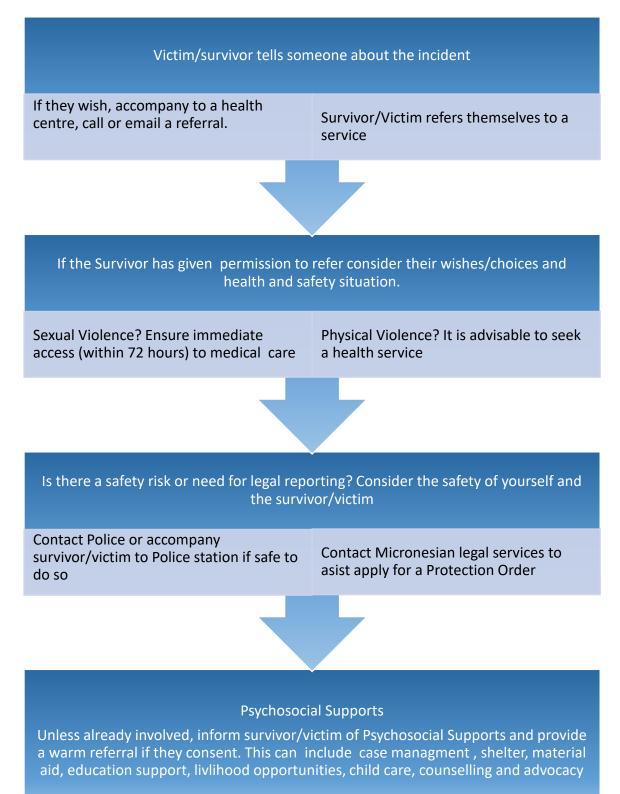
RMI Multisector model brief:

ΣŢΛ	Legal Micronesian Legal Services Corporation (MLSC) supports survivor/ victims navigate and engage with the Supreme Court; the High Court; the Traditional Rights Court; the District Court; and Community Courts. GBV survivor/victims can be supported to apply for Temporary Protection Orders, with criminal proceedings against the perpetrator and engaging in child custody-based cases. The DVPPA provides for a Temporary Protection Order if the judge is satisfied that a complainant, or a child in the care of a complainant, is in danger from an act of domestic violence. A judge is available 24/7 to consider protection order applications. Legal supports interact between all sectors to attain necessary information to represent survivor/victims. (Contact page 22-23)
	Marshall Islands Police Department (MIPD) and Local Police The MIPD Domestic Violence Unit (DVU) provides direct support in Majuro and Ebeye. DVU staff are able to provide phone support to local police staff in outer islands. Police provide immediate safety through intervening and attending locations where violence is reported, identifying and interviewing survivor/victims (adult and child), gathering and recording evidence, immediate safety planning including taking to legal services for a Temporary Protection Order if needed, liaising with health teams and referral to supports such as WUTMI if the survivor/victim chooses. Police are able to detain suspect/perpetrator for 24 hours to enhance safety and allow the survivor/victim time to engage with the multisector model of support. (Contact page 21)
	Health: Health Care Workers (HCW) across Majuro and Ebeye Hospital and outer island health care centers and dispensaries provide multiple services to survivors/victims of GBV. HCW identify survivors, manage urgent injuries and trauma, offer psychological first aid (PFA) and first-line support (LIVES), complete history and physical examinations, provide treatment including emergency contraception, sexually transmitted infections (STIs) and post exposure prophylaxis (PEP) for HIV infections where indicated, engage in safety planning with the survivor/victim and multisector stakeholders, maintain history and preparation of reports for GBV related court matters, engage in mandated reporting to the DPV and refer to MoCIA for child protection concerns. In Majuro and Ebeye HCW are able to refer internally to mental health if required. HCW refer to key support services such as WUTMI as required. (Contact page 19-20)
Ŀ Ţ	Psychosocial Support: Can include offering PFA and advice, counselling, case management, shelter provision, material and financial aid, advocacy, transportation, accompaniment and support to access other sectors. WUTMI provides a range of GBV services and are a specialized agency providing support for women and girls 14 and above affected by violence. A broad range of RMI NGOs provide psychosocial support to survivor/victims of GBV. (See 'Direct Support Services' in directory column pages 24-35)
	Informal Resources: Informal Resources are usually the first contacts for GBV survivors/victims. This can include family, friends, neighbors, sports teams, community led coalitions/organizations and support groups where resources and support are not assigned by formal agencies or organizations. Strong informal resources are essential in the RMI for outer island communities and in maintaining traditional forms of support. Informal support can also include online chat rooms for others with lived experience. This can be of particular significance for survivor/victim individuals who identify as LGBTIQ+.

Referral Flowchart:

Stakeholders should consider survivor centred principles, their safety and mandated obligations when exploring referral needs with the survivor/victim.

Stakeholders who are well informed about supports and safety mechanisms facilitate survivor/victims acquiring necessary information to make informed decisions and provide informed consent



What if a survivor/victim does not want a referral?

Confidential secondary consultation with other GBV Focal Points such as WUTMI, Mental Health or the Police DVU unit can be invaluable if the survivor/victim does not consent to a referral, and you are concerned about their health and safety. A confidential secondary consultation allows the service provider to understand and explore risks and obligations without identifying the survivor/victim.

Stakeholders should understand their mandate to report instances of suspected child related GBV.

Many GBV survivor/victims may not be ready or wish to engage with other services. In this instance dignity and choices should be upheld whilst ensuring people understand they can come back another time for a referral or service if they change their mind.

Stakeholders can help survivor/victims think about actions they can take if they feel unsafe in the future. Appendix 3 (page 39) provides a safety plan template to assist survivors consider their options and plan for their safety.

Supporting Children

Safety concerns of abuse or neglect of children should be reported to MoCIA/CDD and RMI Police.

MoCIA and the Police will refer to health clinics and other stakeholders as necessary.

The primary legal framework for governing child and family welfare services in RMI is the Child Rights Protection Act 2015. The Act designates the MoCIA as focal points for child welfare and details the following obligations:

- Receive reports and information on situations or acts which may amount to child neglect, abuse, maltreatment and exploitation (s.28);
- Undertake assessments and investigations into allegations of child abuse and neglect, in collaboration with national or local police (s.19(2)(e));
- Enter and search premises where a child in need of care and protection is kept, to investigate with assistance of police (s.29(1)); and remove the child to a place of safety for a period of not more than 14 days (s.29(2));
- Make applications with the High Court for care orders and supervision orders and take supervision or custody of a child in accordance with the Court's order; and place the child who is under its custody with a suitable home of a parent or relative or other types of alternative care (s.30);
- Keep a registry of children and incidences, nature and scope of child abuse and neglect in collaboration with relevant public officials (s.19(2)(g))
- Issue licenses to child protection service providers (s19(2)(f)); and administer and monitor alternative care of children (s.31), in cooperation with the Human Rights Committee

CDD staff are all centralised at the national level and provide advice and support to the outer islands due to an absence of district level child protection staff¹⁵.

LEGAL: When a child has experienced or is at risk of domestic violence all stakeholders can assist carers of children to contact Micronesian Legal Services to apply for a Temporary Protection Order of up to 28 days and Protection Orders under the Domestic Violence Prevention and Protection Act¹⁶

HEALTH: The Ministry of Health and associated clinics engage in child interviewing, clinical care post abuse and sexual assault and mental health support for child survivor/victims of GBV.

PSYCHOSOCIAL SUPPORT: All stakeholders and community members play a role in keeping children safe from GBV. Mental health support is available from a wide range NGOs including WUTMI, Waan Aelon in Majel (WAM), Youth-to-Youth-in-Health, and the Salvation Army.



¹⁵ United Nations Children's Fund, 2017, Situation Analysis of Children in the Marshall Islands, UNICEF, Suva,

https://www.unicef.org/pacificislands/media/1146/file/Situation-Analysis-of-Children-Marshall-Islands.pdf, (accessed 29th April 2021) ¹⁶ Ibid.

Supporting Survivor/Victims of trafficking

GBV trafficking survivor/victims are specifically assisted through a coordinated response between National and Local Police, the Attorney General's Office, the Division of Immigration, MLSC, the MoHHS, Ministry of Foreign Affairs and Trade, MoCIA and NGOs such as WUTMI.

Immigration officials may be the first to note trafficking indicators and have responsibility to appropriately identify, risk share and provide survivor-centred care and referral for the survivor/victim. Stakeholders provide integrated actions on investigations, prosecution, prevention, and protection.

Ministry	Responsibilities of each department	
Ministry of Justice,	National and local Police:	
Immigration, and Labor	 Identify and interview survivor/victims and witnesses, investigations, preparation of security and protection for Survivor/victims, support witnesses and their families including referral to NGOs and the Attorney General's office Restraining order assistance, secure transport of survivor/victim to court and prosecution of criminal cases 	
	Immigration Department	
	• Seaport screening, visa provision for survivors during case investigation, referrals to Attorney General Office and other response supports	
	Public Defender's Office	
	 Defense representation in court (representation for trafficker), offer free legal aid resource 	
	Micronesian Legal Services Corporation	
	 Assistance accessing protection orders, referring to support agencies and Civil law remedies for human trafficking 	
Ministry of Health and Human Services	5	
Ministry of Foreign Affairs and Trade	Initiation of dialogue between the survivor/victim and home country	
Ministry of Culture and Internal Affairs	 In collaboration with the National or Local Police, undertaking assessments and investigations into all allegations of child abuse and neglect Advice and guidance to all trafficking response partners on child rights and welfare including best practice interviewing and understandings of child developmental stage and effects of trauma. 	



Ebeye and Majuro Health Contacts:

Office	Contact Person	Phone Number	Email
Majuro Hospital	Sec Jack	625-3355/3399	sechhs.rmi@gmail.com
Emergency Room (ER)	Dr. Underwood	625-4144	iclapidez@gmail.com
Gynaecology	Dr. Lapidez	455-6104	
Family Planning	Caroline Johnny	456-0328	Caroline-
			johnny73@yahoo.com
Reproductive Health	Tauki Korean	456-2359	tkreimers@yahoo.com
Pediatric	Dr. Gancio	455-7244	mjanegan@yahoo.com
Majuro STI/HIV	Adela Nakamura	455-0132	asibok@rmihealth.org
Nursing Director	N.P. Viema Bale	456-8483	Vee.bale@gmail.com
Nurse Practitioners	N.P. Bremity Lakjohn	456-5135	Bremo73@gmail.com
Out Patient (OPD)	Agnes Flood	625-3355 ext. 2266	weijane2010@gmail.com
Human Services	Dr Holden Nena	625 3355 ext. 2503	hnena@rmihealth.org
Program (HP)	Biwij John	625-7710 ext. 2506	bwizch16@gmail.com
Outer Islands Health	Arata Nathan	625-4541	anathan@rmihealth.org
Center			
177 HCP	Erma Myazoe		
177 HCP Nurse	Charlotte Gold		
Laura Clinic	Alino Ring	528-2634	dcmring12@gmail.com
Ebeye Hospital STI/HIV	Roy Holoapa		
Ebeye Hospital RH/FP	Ana Valoutu	3298029/8030	Valoutu1971@gmail.com



Neighbouring/Outer Island dispensaries:

Health Dispensary	Location	Focal Point	Contact details
Ebon Atoll	Ebon	Kojen kanilij	455-8708
	Ene Ko Lon	Neal Herkinos	
	Тока		
Namdrik Atoll	Namdrik	Harris Harris	456-1383
Jaluit Atoll	Jabwood	Elemen Joshua	456-1338
	Jaluit		455-7042
	Mejrirok	Heldon Otinel	455-1183
	Narmij		
	Imroj	Aisa Peter	
	Imiej	George Thaddius	
Ailinglaplap Atoll	Aerok	Weston Ejli	
	Buoj	Minus Mejbon	

	Woja	Takio Edison	
	Jeh	Morton Baso	456-0132
Jabot Island	Jabot		
Namu Atoll	Loen		
	Mae		
	Majkin	Oktan Timothy	Radio Channel (82911)
	Namu	Rington Kilma	Radio Channel (82911)
Lib Island	Lib		
Lae Atoll	Lae	Akji langbata	Radio Channel (82911)
Ujae Atoll	Ujae	Merina Riketa	Radio Channel (82911)
Wotho Atoll	Wotho	Banner Aiester	456-6560
Mili Atoll	Mili	Atlaia Lejer	Radio Channel (82911)
	Nallu		
	Enejet		
	Lukonwor	Yoseph Daniel	Radio Channel (82911)
	Tokewa	Langberan Anmontha	Radio Channel (82911)
Arno Atoll	Tinak	Rale Lat	456-1894
	Kilange	Tommy Jonathan	455-8027
	Ine	Junior Jorju	456-4807
	Arno	Seth Bunglik	456-3758
	Ulien	Betty Latdrik	
	Bikarej	Francis Ukotkoj	
	Tutu		
Majuro Atoll	Rongrong	Jude Jr. Samson	455-7379
Aur Atoll	Tobal	Joe Gideon	
	Aur	Bradford Tartius	4553179
Maloelap Atoll	Aerok Maloelap		
	Tarawa	Mitzeo Tarkio	Radio (Channel 82911)
	Jang		
	Ollet	James saimon	Radio (Channel 82911)
	kaven	Cathy Bano	Radio (Channel 82911)
Wotje Atoll	Wotje Wotje	Jackin Robert	
	Wodmej	Jibaibe Boktok	455-7336
Likiep Atoll	Likiep Likiep	Brandy Kemlan	456-4927
	Jebal	Heromi Aine	
Mejit Island	Mejit	Kori Marshall	457-1149
Ailuk Atoll	Ailuk	Alton Anitol	Radio (Channel 82911)
	Enejelar		



RMI Domestic Violence Unit (DVU) staff are able to provide phone support and secondary consultation to police in outer islands.

Majuro Atoll	Majuro Atoll Local Government, Delap Village Marshall Islands Police Department, Uliga Village	DVU Unit Pamela Rubon	(692) 625-5911/8999 (692) 625-8666/3222
Kwajlein Atoll	Kwajlein Atoll Local Governmet, Ekojaja Village Kwajlein Atoll National	Jackson Abner Tony Tonyokwe	(692) 329-5911 (692) 329-6911
	Police, Jablur Village		
Jabot Island	Jabot Island	Esron Aine	Radio Freq: 8113.5
Mejit Island	Mejit Island	Richard Rilang	457-1188
Namdrik Atoll	Namdrik Atoll	Atones Samuel	
Ebon Atoll	Ebon Ebon	Ronny Edward	457-1399

Attorney General's Office	Attorney General Richard Hickson	625-3244
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Legal Referral Contacts:

The International Organization for Migration (IOM) consulted with key legal and psychosocial stakeholders and services to input the following information into the directory.

The IOM takes no responsibility for the services or information provided by stakeholders.

It is encouraged that stakeholder details are reviewed annually and where appropriate, warm referrals provided to promote continuity of care.

Organisation	Objectives	Services/Activities
Micronesian	Micronesian Legal Services	Direct Support Services:
Legal Services	Corporation (MLSC) is a non-	
Corporation	profit corporation es-	Key areas of legal case work services in the RMI fall under
corporation	tablished in 1970 to provide	these areas of focus: child support, divorce, land
	low income persons in	disputes, domestic violence, employment, customary and
	Micronesia with free legal	legal adoptions, group representation in various legal
	assistance in civil matters,	problems, legal services to NGO's, brief services and
	seeking "equal access to	notary public
	justice"	
		Legal casework service specific to Domestic Violence
	The primary focus of MLSC-	includes: Free legal aid, referral action to key GBV
	RMI is a) case services to	supports and protection orders
	clients b) community	
	outreach and legal education	Development and awareness activities:
	and c) collaboration efforts	
	to increase access to justice.	Community Outreach and Legal Education including
		collaborative efforts to increase access to justice for
		survivors of GBV
Service	Hours of operation	Contact
Eligibility		
Fee free service	General Office 9am-5pm	Majuro
to low income		Focal Point: Directing Attorney Rosania A. Bennett Esq.
individuals/ families	24/7 hotline number is 455-	P.O. Box 198
lammes	8508 (Includes access to service for all outer islands)	Majuro, MH, 96960, RMI
	service for all outer Islands)	Phone: (692) 625-8227/8128
		Fax: (692) 625-5119
		Ebeye
		Focal Point: Mathilda Capelle
		P.O. Box 5189
		Ebeye, Kwajalien Atoll, MH, 96970, RMI
		Phone: (692) 329-5119
		rosania.bennett@mlscnet.org
		www.mlscnet.org
		www.micronesianlegal.org
		24/7 hotline number is 455-8508 (Includes access to
		service for all outer islands)

Organisation	Objectives	Services/Activities
Marshall Islands Law Society	The Law Society's primary objectives are to assist in the development of the laws of the Republic of the Marshall Islands (RMI); to recommend and promote reforms in the law and in judicial processes; to facilitate and assist in the administration of justice; to encourage continuing legal education and the provision of public services by its members; to encourage the efficiency in the provision of legal services to the public; and to provide a forum for the discussion of issues af- fecting the science of jurisprudence in the RMI.	 <u>Direct Support Services:</u> Members/Lawyers can be accessed through the Legal Aid system for Legal Cases and legal work including Protection Orders Referral to relevant GBV related supports as necessary <u>Development and awareness activities:</u> Legal Education and Capacity Building Legislative review Development of legislation and legal frameworks eg: Domestic Violence Act Stakeholder Consultations
Service Eligibility	Hours of operation	Contact
n/a	9am-5pm	Focal Person: Divine F. Waiti Attorney At Law Marsol Lawyers & Consultants P O Box 3897 MH 96960 Ace One Stop - 2nd Floor Ph: +692 455 3575 www.marsollawyers.com
Other:		



Psychosocial Support and other key RMI Stakeholders:

Organisation	Objectives	Services/Activities
WUTMI	WUTMI provides	Direct Support Services:
	opportunities for	
	organizational and individual	Casework and referral
	growth through networking	Shelter (accommodation) and Material/Financial
	and coordination, as well as	Aid
	through delivery of direct	 Referrals to services (Health, Police, legal etc.)
	and indirect services as it	 Advocacy and provision of information
	aims for (gender and	
	cultural) solidarity, stability and development, and as it	Early childhood program
	attempts to align itself with	Development and awareness activities:
	the universal quest for	
	justice, peace, and equality.	Community Awareness campaigns
		• External agency GBV policy and program
		capacity support as required
		 Participant in Gender and Protection Cluster
		meetings
		Substance abuse prevention
Service	Hours of operation	Contact
Eligibility		
Casework/	Direct Support Services:	Focal point: Executive Director Daisy Momotaro
Emergency	24/7	<u>Majuro</u>
Services:		P.O. Box 195
Women/Girls	Development and	2nd Floor K&K Building, Delap
14+	Awareness activities:	Majuro, MH, 96960, RMI
	Monday to Friday	Phone: (692) 625-4296/5290 Weto in Mour: (692) 625-6687
		Email: wutmi26@gmail.com
		Ebeye
		Focal point: Rosiana Abner and Neipanjan Lavin
		www.facebook.com/groups/169889676541419/?fref=nf
		MOBILE 24/7:
		Caseworker 1: Handy Niro 235-6409
		Caseworker 2 Lorna Rang: 235-6011
		Prevention Worker: Bwojenta Kabua 235-6010
		Landline: 329-6687
Other:	1	

Organisation	Objectives	Services/Activities		
Youth to Youth	Youth to Youth in Health	Direct Support Services:		
in Health	(YTYIH) is a non-government	<u>Direct Support Scivices.</u>		
(YTYIH)	organization (NGO)	Counselling (HIV related)		
(11111)	dedicated to young people	 Substance use/abuse information provision 		
	throughout the Republic of	 Family Planning services including Safer Sex, 		
	the Marshall Islands (RMI).	reproductive health and HIV/STD education,		
	YTYIH provides training and	awareness and counselling.		
	community activities for	 Youth LGBTIQ+ Support group 		
	young people that build	 Primary Health onsite clinic after school hours in 		
	knowledge, skills, and self-	Majuro (Facilitated by MOHHS) including Sexual		
	esteem, and provides young	and reproductive health clinical services		
	people with a safe and	and reproductive health clinical services		
	supportive learning and	Development and awareness activities:		
	professional environment	<u>bevelopment and awareness detivities.</u>		
	where they can learn about	Substance abuse and prevention program		
	and discuss issues that affect	(outreach, campaigns and education)		
	their lives. The ultimate aim	Teen Pregnancy Prevention Program		
	of the program is to	Family Planning services including Safer Sex,		
	empower young people to	reproductive health and HIV/STD education,		
	proactively participate in the	awareness		
	continued development of	Health care capacity research		
	their communities and	Operation of a Youth Community Centre		
	nation.	(Majuro)		
Service	Hours of operation	Contact		
Eligibility				
Fee free for	Office Hours (Uliga Office):	Focal point: Kainok Joseph, YTYIH Administrator/Yolanie		
Youth 26 and	Monday – Friday	Johnson, Management Team Member		
Under	8:30am – 5:30pm	Youth to Youth in Health Building Uliga		
		PO Box 3149		
Contraceptives:	Clinic Hours (Uliga Office):	Majuro, MH, 96960 RMI		
Free	Monday	Phone: (692) 625-3099/3098		
	5pm – 7pm	Email: kainokj@gmail.com/ yolaniejohnson@yahoo.com		
	Friday	https://www.facebook.com/rmiy2y		
	5pm – 9pm			
Other: Staff can make relevant referrals to GBV supports if required				

Organisation	Objectives	Services/Activities
Marshall Islands	·To promote the Right and	Direct Support Services:
Disabled	interests of Person with	
Persons	Disabilities	 Provide transportation to all person with
Organisation		disabilities
(MIDPO)	·To facilitate opportunities	 Provision of wheelchairs and walking aids (for
	for equal and full	low to no income families)

 <u>Development, aid and awareness activities:</u> Disability Radio program every Friday 4:00pm- 4:30pm
 Conducting of Domestic Violence awareness with MIDPO female members Participation in Domestic Violence awareness month Coordination and collaboration with Ministry of Health and Human Services Rehabilitation Center Conducting awareness on Convention of the Rights of Persons with Disabilities Training on Convention of the Right of Persons with Disabilities and Human Rights
Contact
Focal point: Mr Kanjen Kumtak MOCIA, Majuro, Uliga Village village RMI 6258240 Phone <u>kkmidpo@gmail.com</u> uired

Organisation	Objectives	Services/Activities
Humanity First	Humanity First works to	Direct Support Services:
Marshall Islands	assist people afflicted by natural disasters, war, and poverty by providing disaster relief services and then rebuilding capacity in affected communities. In February of 2011, Humanity First USA established and supported a community-based organization, Humanity First Marshall Islands, in the	 Material Aid Referral to support as required Community Kitchen (3 x meals per day in Majuro) Food aid sent to mayors of local outer island community Individual/family support: Any one can drop in and receive support. The focal point will sit and discuss support needs with members of the community if they drop in and refer as appropriate
	Republic of the Marshall Islands (RMI) to provide human services to the Marshallese community. This organization was granted a charter of incorporation by the RMI	 <u>Development, aid and awareness activities:</u> PV Solar Systems project Computer Training Classes Medical Missions (EG: provision of voluntary Dr from abroad)

	government as a non-profit	School supplies
	organization in March of	Uniforms for students
	2013.	Tutoring classes
		Home renovations
		Community clean ups
		 Neighbourhood sanitation
		 Youth Sports Supplies and training
		Community Sewing classes
		Disease prevention Initiatives
		Back to school initiatives
		Summer Education Camps
		Member of the National Taskforce on Human
		Trafficking in the RMI
Service	Hours of operation	Contact
Eligibility		
Fee free	Office hours 9am-5pm	Focal Point: Mr Sajid Iqbal
	+692 625 1774	Uliga Back Road (Behind the court House)
Open to all	+692 455 5794	Majuro, MH, 96960, RMI
		Office hours 9am-5pm
	Emergency After Hours	+692 625 1774
	Support:	+692 455 5794
		Emergency After Hours Support:
	+692 625 1774	+692 625 1774
	+692 455 5794	+692 455 5794
		humanityfirstrmi@gmail.com
		Website:
		https://humanityfirst-rmi.org

Organisation	Objectives	Services/Activities
The Salvation	The Salvation Army, an	Direct Support, Development, Aid and Awareness
Army	international movement, is an evangelical part of the universal Christian Church. It's message is based on the Bible. It's ministry is motivated by the love of God. It's mission is to preach the gospel of Jesus Christ and to meet human needs in his name without discrimination.	activities:• Spiritual support• Education and vocational training• Social Services• Community OutreachThese activities include but are not limited to:After school programs for middle school aged children, vocation and skills training programs , material aid, foodbank and meals, sewing groups, bible men's/ women's groups (1 x per week), shelters for families affected by natural disaster, tutoring service in Rita and membership in the national Taskforce on Human Trafficking# Each officer can be approached for pastoral support and referral to GBV related services
Service Eligibility	Hours of operation	Contact
All	9-5 (core officer hours) and	Key focal point:
	after hours as needed by	<u>TSA RMI Coordination Office</u> Nel Nathan, Office Manager & Capt. Herine Hampton

	community ar	nd particular	nel.nathan@usw.salvationarmy.org
	programs		herine.hampton@usw.salvationarmy.org
	le 9		C#s: 456 - 7704, 457 - 7704
			Majuro Atoll
			1. Rita Corps: Capt. Harrick & Daisy Reiher
			Emails:
			harrick.reiher@usw.salvationarmy.org
			C#s: 456-1316
			2. Laura Corps : Envoy, Ella & Rudy Jabuwe
			Emails:rudy.jabuwe@usw.salvationarmy.org
			C#s: 456.6247 & 455-7831
			Arno Atoll
			1. Arno Corps - Necklace & Merryrose Juonran
			C#s: 456-0399
			2. Ine Corps - Capt. Benji & Rosebee Rakin
			C#s: 456-6970
			Kwajalein Atoll
			1. Ebeye Corps - Capt. Cooper & Alwina Silk
			Emails: cooper.silk@usw.salvationarmy.org
			C#s: 456 - 1983
			Jaluit Atoll
			1. Jabor Corps - Capt. Mioshi & Virginia Anwot
			C#s: 455 - 4134
			2. Jaluit Corps - Ringo & Litmoj Enos
			C#s: 456 - 7653
			3. Imiej Corps - Raston & Jewel Lanwe
			C#s: 455-0213
			4. Narmij Corps - Jim & Berlinda Rainer
			C#s: 455 - 3161
Other:	•		

Organisation	Objectives	Services/Activities
Waan Aelõñ in Majel (WAM)	The WAM mission is to work <u>Direct Support Services:</u> with youth, their families	
	and the local and international community to perpetuate and safeguard Marshallese culture and tradition through canoe building and sailing, and through this cultural linkage, develop life skills and modern work skills that create meaning in the lives of all participants.	 6-month Youth program: training to youth-atrisk using the medium of traditional outrigger canoes, boat building, carpentry, and woodworking. Includes life skills development, employment assistance, assistance with substance use, general psychosocial support and counselling and referral to external services School Counselling (contracts with specific schools)
	Waan Aelõñ in Majel (Canoes of the Marshall Islands) is a grassroots, non- profit, non-government organization working with young Marshallese people. WAM provides vocational	 Substance use prevention Mental health first aid facilitation

	and life skills training to youth-at-risk using the medium of traditional outrigger canoes, boat building, carpentry, and wood-working.	
Service Eligibility	Hours of operation	Contact
WAM youth program 16-24	8am-5pm Monday to Friday	Key Focal Points: Rosan Bartolome and Reagon Gallen WAM Building, Delap P.O. Box 1453, Majuro, MH, 96960, RMI Phone: +692 625-6123 Email: <u>contact@canoesmarshallislands.com</u> <u>http://www.canoesmarshallislands.com</u> <u>www.facebook.com/wam.rmi</u>
Other:		

Oversitestics	Ohiostivos	
Organisation	Objectives	Services/Activities
Single State Agency (SSA)	The SSA is under the Ministry of Finance, Banking & Postal Services and funds culturally appropriate substance use prevention programs and safety-net services to individuals with substance use disorders and recovery needs.	 Direct Support Services: Directly funds Community, School and Faith-Based Non-Government Organizations to provide substance abuse prevention, treatment and recovery services for high-risk population groups, including children, youth, women, men, employees and families. Provides brief interventions and counseling services Conducts behavioral health wellness (psychosocial) screening to assist navigate clients needing substance use disorder treatment and support for related social and health crises. Conduct home visits Provides International and Regional Board Certification for Prevention Specialist, Substance Abuse Treatment Counselor, and Peer Recovery Specialist.
		 Development, Aid and Awareness activities: Assist communities with needs and readiness assessments, data profile, strategic planning and evaluation of SSA funded services. Facilitates and coordinates trainings/webinars on substance use and mental health Develop, translate, and provide educational materials
Service Eligibility	Hours of operation	Contact

SAPT funding proposals	8am-5pm Monday to Friday	Focal point: Julia M. Alfred, SSA Director Designee; Phone: 692-625-6976/4357 or mobile 692-455-6220;
		Email: rmissasapt@gmail.com
Other: Collaborates and coordinates with Division of Human Services for needed substance use		
disorder treatment and GBV referrals.		

Organisation	Objectives	Services/Activities
Marshall Islands Epidemiology & Prevention Initiatives (MIEPI)	MIEPI's primary focus is on providing services to promote the general health and wellness of young people and families. MIEPI has engaged itself as a locally-based organization to provide epidemiological surveillance, community research, and substance abuse planning and prevention to monitor, assess and improve the general health & social welfare of the communities and coalitions they serve.	Direct Support Services: n/a Development and awareness activities: • Health specific research including data attainment and analysis • Facilitation of Mental Health First Aid • Facilitation and contribution to the RMI Mental Health Advisory Council • Collaboration with substance abuse prevention local coalitions • Public health training pending need and funding. • Previous training includes but is not limited to Anti-Tobacco Initiatives
Eligibility	Hours of operation	Contact
Funding/ project dependent	9am-5pm	Focal Point: Maybelline Ipil Room 209, 2 nd Floor / POB 3666 RRE Commercial Complex Uliga, Majuro Marshall Islands 96960 Phone: 625-6477 Email: <u>mipil@miepi.org</u>

Organisation	Objectives	Services/Activities
Marshall Islands Red Cross Society (MIRCS)	MIRCS mandate is to a) prevent and help alleviate the suffering of people without adverse discrimination as to nationality, race, ethnicity, religious belief, color, status, wealth, sex, language, or political opinion; b) to be a leading organization taking part in national preparedness and response plans in situations of natural disaster or emergencies which may strike within territory of the state; and c) to provide community	 <u>Direct Support Services</u>: International Tracing service Emergency Relief Aid during emergency/natural disaster <u>Development and awareness activities</u>: Community development Activities Health and Disease Prevention Natural Disaster and Emergency preparedness and response

	services to the general population through the society's own programs in health, prevention of diseases, social welfare and education.	
Service	Hours of operation	Contact
Eligibility		
Fee free	8am-5pm	Focal Point: Secretary General: Ainrik George
	Monday to Friday :general	Marshall Islands Resort Hotel Room 118
	business.	Majuro, MH, 96960, RMI
	Emergency Crisis Support:	Phone: (692) 625-0340
	24 hours as required	aingeo@outlook.com
Other: Staff can n	nake referrals to GBV supports if	frequired

Organisation	Objectives	Services/Activities
International Organisation for Migration (IOM)	 Assist in meeting the growing operational challenges of migration management Advance understanding of migration issues Encourage social and economic development through migration Uphold the human dignity and well-being of migrants 	Direct Support Services: • Direct migration assistance, repatriation, and reintegration support Development, Aid and Awareness activities: • Gender and Protection Cluster Participation • Mental health Coalition member • Migration and development related initiatives
Service Eligibility	Hours of operation	Contact
Contract/ Service specific	Hours of Operation: 8:30pm – 5:30pm Monday to Friday	Focal point: Angela Saunders, Head of Sub Office <u>(Majuro)</u>
		2 nd Floor Kabkondikdik / AC Apartments Delap, Majuro MH, 96960 Republic of the Marshall Islands
		Phone: 6926254705/06
		Pohnpei Head Office
		Suite 2G PohnUmpomp Building, PohnUmpomp Place, Nett Municipality Pohnpei, 96941 Federated States of Micronesia

Organisation	Objectives	Services/Activities
The Kumit	The Kumit Bobrae Coalition	Direct Support Services:
Bobrae	(Kumit) was established and	
Coalition	incorporated in 2010 to	 Substance abuse support and prevention and
(Kumit)	mobilize community	mental health counselling
	coalitions throughout the	5
	RMI to actively participate	
	and engage in the	Development and awareness activities:
	implementation of	Development and awareness activities.
	substance abuse prevention	• Kumit provides training and technical assistance
	strategies to prevent and	for all Kumit coalitions at the grass root level to
	reduce consumption and a	implement the six substance abuse prevention
	•	strategies including 1) Information
	0	Dissemination, 2) Education, 3) Sober alternative
	consequences including	activities, 4) Problem Identification and Referral,
	crimes, domestic violence,	5) Community Based Process, 6) Environmental
	unemployment, school	strategies including development and
	truancy, NCD, CD, STI/HIV,	enforcement of policies and laws, product pricing
	RH, human trafficking,	and taxation and advertisement.
	suicide, and poverty.	and taxation and advertisement.
	Substance abuse prevention	
	programs and interventions	
	occur in 13 Kumit coalitions	
	on 11 atolls including	
	Majuro, Kwajalein, Jaluit,	
	Ailinglaplap, Wotje, Arno,	
	Mili, Ebon, Maloelap, and	
	Ailuk and Enewet	
Service	Hours of Operation	Contact
Eligibility	rious of operation	contact
n/a		Focal Point: Anthony Peren, President
ii/d		Phone: 692-456-7166
		Email: <u>tikitab21@gmail.com</u>
		Focal Point: Gina David, Secretary of Board
		Email: jinanana76@gmail.com
		Phone: 692-455-6331

Organisation	Objectives	Services/Activities
Kora in Okrane (KIO)	The KIO mission is to provide opportunities to improve the personal and social development and well-being of women and children in the RMI.	 <u>Direct Support Services:</u> Humanitarian Services <u>Development and awareness activities:</u> Through advocacy, education, and public awareness and events
Service Eligibility	Hours of operation	Contact

Based on On- going projects	Varies	www.facebook.com/korainokrane kiomarshallislands@gmail.com Majuro, Marshall Islands	
Other: KIO club is active through its volunteer members and services.			

Organisation	Objectives	Services/Activities
		Services/Activities
Marshall Islands Council of Non- Government Organisations (MICNGO)	Mission The mission of MICNGOs is to serve as a voice for community-based, non- profit, CSOs operating or interested in operating in the Republic in order to: A. Ensure there is	 Development and awareness activities: To strength the institutional, administrative and technical capacities of CSOs by enabling them to become accountable, effective and transparent mechanisms for social justice, equity and change in accordance with its by-laws and policies as determined by its members.
	interaction and effective communication between among community-based CSOs in the Republic.	
	B. Ensure there is continual and effective communication between local CSOs and stakeholders at the national, regional and international levels.	
	C. Assist in identifying community priorities and serve as a focal point for resource distribution within and across community and non-government sectors.	
	D . Encourage and commit to principles of sustainable and appropriate development, accountability, transparency, capacity building, cultural competency and responsible stewardship.	
Service Eligibility	Hours of operation	Contact
n/a		Focal Point Phone number

	Address
	https://www.micngo.com/contact/



Psychosocial Support: Education Specific

Organisation	Objectives	Services/Activities
Public school System (PSS)	PSS strives to provide a student environment for learning that is safe physically and emotionally. Students' feeling of secureity physically and emotionally is provided so that learning can take place optimally.	Direct Support Services: • Counselling and student support • Teachers are trained in identifying suspected abuse, supporting, and referring as necessary. • PSS staff are guided by the PSS Child Protection Policy which encompasses students who may be survivor/victim of gender-based violence (GBV) Development and awareness activities: Teachers are trained in identifying suspected abuse and supporting students
Service Eligibility	Hours of operation	Contact
PSS students	8am – 5 pm	 Focal Point: Glorina Harris Accreditation Office PO BOX 3 Majuro Marshall Islands 692-625-5262

Organisation Objectives Services/Activities

Collage of the	Counselling Department offer	Direct Support Services:	
Marshall (CMI)	a variety of appropriate		
Islands:	services that help overcome	 Personal Counseling: We advise on personal or 	
Counselling	obstacles that hinder a	relationship issues affecting student's success,	
Department	student's progress and	studies or graduation. This can include but is not	
	success.	limited to support for Substance Use and GBV	
	Success.		
	Managements for an all sound	Survivor/victims.	
	We promote friendly and	Academic Counseling: We also provide academic	
	healthy spaces that enhance	counselling based on students' academic	
	students' academic and	performance. For educational advising, we help	
	personal growth as we strive	identify and advice students on bachelor's degree	
	for excellence in the areas of	opportunities and work with faculty to identify	
	academic and personal field	mentoring and tutorial opportunities.	
		• Student Advocacy: including representation and	
	Ultimately, our goal is to	liaison	
	ensure that the counselling	liaison	
	program accommodates		
	students' needs to ensure	Development and awareness activities:	
	successful completion of their	 Workshops and Seminars: We run workshops and 	
	studies to fulfill their future	seminars on areas of emotional health, substance	
	aspirations	abuse, relationships, healthy mindset & learning	
		strategies	
		Peer to Peer Substance Abuse Programs	
		GBV outreach program	
		Cyberbullying and Mental Health Programs	
		Also: Support to Distance Education Centres	
Service	Hours of operation	Contact	
Eligibility	nours of operation	contact	
Students of CMI	8:00am-5:00pm	Focal Point:	
Students of Civil			
	(Regular Hours)	Director	
		Demiana Kumoru	
	10:00am-7:00pm	Email: <u>dkumoru@cmi.edu</u>	
	(Extended Hours)		
		Karben, Risi	
	Students wishing to talk to	Student Advocate/Counselor and GBV Advisor:	
	counsellors after hours can	Email: <u>rkarben@cmi.edu</u>	
	call the security on	Curritha Jumao-as	
	692 625 5427	Student Advocate/Counselor & GBV Assistant Coordinator	
		,	
		Peer to Peer Educators: p2p@cmistudent.com	
		Peer to Peer Supporters: gbv@cmistudent.com	
		Phone: 692 625 3394 ext. 234, 243 / 692 625 0644	
		Fax: 692 625 7203	
		Email: counseling@cmi.edu	
		https://cmi.edu/counseling-and-tracc-services/	
Other: CMI Coun	sellors and Student advocates ar		
Other: CMI Counsellors and Student advocates are able to make necessary referrals to GBV supports			

Other Ministry contacts:

Ministry of Culture and Internal	Focal Point: Dora Heine Jekkar
Affairs: Community Development	PO Box 18 Majuro, Marshall Islands MH 96960
Division,	Tel: +692 625 8240
Gender in Development office	Email: rmliagenderoffice@gmail.com
Ministry of Culture and Internal	Focal Point: Joy Kawakami
Affairs: Community Development	PO Box 18 Majuro, Marshall Islands MH 96960
Division,	Tel: +692 625-8240/8718
Childs Rights Office	Email: mociacrc@gmail.com or rmi.mocia.cdd@outlook.com
Ministry of Justice, Immigration, and	Tel: 625-8633/4572
labor: Immigration	Email: <u>rmiimmig@mtamar.net</u>



International support for Survivor/Victims of GBV:

US States and Territories support:

The **National Domestic Violence Hotline** provides pre departure and upon arrival support for survivor/victims of GBV.

This includes linking to specific state GBV coalitions and support services

National Domestic Violence Hotline Available 24 hours a day, 7 days a week, 365 days a year. 1-800-799-SAFE (7233) TTY: 1-800-787-3224 (toll free) Video calls for hearing impaired callers: 1-855-812-1001 (Monday-Friday 9 a.m.-5 p.m) USA State and territory specific services directory: <u>https://www.thehotline.org/get-help/domestic-violence-local-resources/</u>

Hawaii specific:

The **Hawaii Domestic Violence Action Centre provides** immediate support for survivor/victims of GBV including:

- Crisis and shelter support
- Legal support and advocacy
- Accompaniment to court
- Risk assessment and safety planning
- Referral to Hawaii and US State and territory GBV supports
- Resources for survivor/victims, organisations and supporters of survivor/victims

Domestic Violence Action Centre Honolulu Head Office with multiple site locations (800) 690-6200 helpline Oahu helpline: (808) 531-3771 Head office: 96801-3198 https://domesticviolenceactioncenter.org/crisis-support/

The Hawaii State Coalition Against Domestic Violence

All regions support and resources: https://www.hscadv.org/get-help/



General Migration:

The **IOM** provides general migration support and can refer migrants with specific challenges to appropriate services: 6926254705/06 (Monday to Friday 8:30am-5:30pm)

Appendix: 1

Through mapping of existing RMI systems, key stakeholders were identified and approached to collaborate in the design and content of this tool.

Stakeholders were asked a range of questions about what would and would not be useful in a directory tool and then asked to actively contribute to layout and content

This approach was intended to involve RMI stakeholders as partners and experts in the research process:

Gratitude and acknowledgments to the participating stakeholders:

- The Ministry of Health and Human Services (MoHHS)
- The Ministry of Culture and Internal Affairs (MoCIA)
- The Ministry of Justice, Immigration and Labour (MoJIL)
- Women United Together Marshall Islands (WUTMI)
- The Marshall Islands Police Department (MIPD)
- International Organisation for Migration (IOM)
- Youth to Youth in Health (YTYIH)
- Humanity First
- The Salvation Army
- Marshall Islands Red Cross Society (MIRCS)
- Marshall Islands Epidemiology & Prevention Initiatives (MIEPI)
- Marshall Islands Law Society
- Single State Agency (SSA)
- Waan Aelõñ in Majel (WAM)
- Marshall Islands Disabled Persons Organisation (MIDPO)
- The Kumit Bobrae Coalition (KUMIT)
- Marshall Islands Law Society
- Micronesian Legal Services Corporation (MLSC)
- Marshall Islands Council of Non-Governmental Organizations (MICNGOS)
- Collage of the Marshall Islands (CMI)
- Kora in Okrane (KIO)
- Public School System (PSS)

Appendix: 2

<u>LIVES</u>model

Appendix 2 presents the current Survivor- Centred Support model utilised by RMI Health and Human Services through hospitals, health clinics and services.

Raise the	Use direct	L ISTEN	INQUIRE	<u>∨</u> ALIDATE	E NHANCE	<u>S</u> UPPORT
Subject	Questions				SAFETY	
	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow
Many women experience problems with their husband, partner, or someone else they live with	Are you afraid of your husband or partner? Have they or someone else at home threatened to hurt you? Have they ever forced you into sex or have sexual contact you did not want?	Make eye contact (if culturally appropriate) Respect how she is feeling Respect her rights and dignity Be gentle and don't rush her	Ask open ended questions Ask for clarification or detail Reflect back her feelings Help her identify needs, feelings or concerns Summarize what she has said to clarify	It's not your fault, you are not to blame You are not alone Everybody deserves to be safe at home I am concerned this may be affecting your health	Has violence increased over the past six months? Is he violently and constantly jealous of you? Has he ever beaten you when you were pregnant? Ha he ever used or threatened you with a weapon?	Ask "what would help the most if we could do it right away?" Help her to identify and consider her options Discuss her social support

		Do you	
		Do you believe he	
		could kill	
		you?	

Appendix 3:

Safety Planning:

A suspected survivor/victim may not be ready to be referred to supports in the multisector response.

In this instance, any helper can create verbal safety plans to assist survivors/victims begin thinking about warning signs and planning for the actions that will keep themselves and others safe.

A physical copy of a safety plan should never be given to the survivor/victim as if found, this could put them in danger.

Safety Planning				
Identifying danger	What are the warning signs? When do you take action?			
Safe place to go	If you need to leave your home in a hurry, where could you go?			
Planning for children	Would you go alone or take your children with you?			
Transport	How will you get there?			
	Do you need to take any documents, phone numbers, keys, money, clothes, or other things with you when you leave?			
Items to take with you	Can you put together items in a safe place or leave them with someone, just in case?			

Financial	Do you have access to money if you need to leave? Where is it kept? Can you get access to money in an emergency?
Support of someone close by	Is there a neighbor you can tell about the violence who can call the police or come with assistance for you if they hear sounds of violence coming from your home?

Appendix 4:

Resources for supporting a Survivor/Victim:

Psychological First Aid:

Psychological First Aid: Guide for Field Workers. 2011. WHO, War Trauma Foundation and World Vision International <u>http://www.who.int/mental_health/publications/guide_field_workers/en/</u>

Look, Listen, Link:

How to support survivors of gender based violence when a GBV actor is not available in your area <u>https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/gbv_po_cket_guide.pdf</u>

Referral considerations for GBV Survivors:

https://	<mark>/www.huma</mark>	initarianres	<u>oonse.info/</u>	'sites/w	ww.hum	anitarian	response.	info/files/	documents	<u>/files/gb</u>	v gu
ide for	referrals -	final.pdf									

Safety Planning

https://www.1800respect.org.au/help-and-support/safety-planning/checklist

GBV and People with Disabilities:

https://reliefweb.int/sites/reliefweb.int/files/resources/GBV-disability-Toolkit-all-in-one-book.pdf

Children and sexual abuse:

http://gbvresponders.org/wp-content/uploads/2014/07/CCS-Guidelines-lowres.pdf

Supporting survivor/victim Men, Boys and LGBTIQ+ people:

https://reliefweb.int/sites/reliefweb.int/files/resources/Addressing-Sexual-Violence-against-Men-Boys-LGBTIQ-Persons-Guidance-Note-022021.pdf

LGBTIQ+:

https://www.ncedsv.org/resources/healthcare-toolkit/lgbtgia-resources/#1607129119464-a8e549c2-5d3e

Talking about GBV: 'A guide for families, friends and Neighbours': Speaking points for non-service providers

https://www.dvrcv.org.au/sites/default/files/Is%20someone%20you%20know%20being%20abused%20%28En glish%29.pdf

Key GBV terms:

https://www.partnersinprevention.org.au/wp-content/uploads/Key-terms-in-the-prevention-of-violenceagainst-women-Partners-in-Prevention.pdf

GBV referral form template:

https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/2019/07/Interagency-GBV-Referral-Form.pdf

The Domestic Violence Prevention and Protection Act 2011 (DVPPA)

https://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/--ilo_aids/documents/legaldocument/wcms_532838.pdf

The Child Rights Protection Act 2015

http://rmiparliament.org/cms/images/LEGISLATION/PRINCIPAL/2015/2015-0050/ChildRightsProtectionAct2015 1.pdf

Criminal Code 2011

http://rmiparliament.org/cms/images/LEGISLATION/PRINCIPAL/2011/2011-0059/CriminalCode2011_1.pdf

Rights of Persons with Disability Act of 2015

http://www.ilo.org/dyn/natlex/natlex4.detail?p lang=en&p isn=102773&p country=MHL&p count=74&p cl assification=08&p_classcount=2

Birth, Death and Marriage Registration Act of 2016

https://rmiparliament.org/cms/images/LEGISLATION/BILLS/2016/20160026/BirthsDeathsandMarriageRegistrationAmendmentAct2016.pdf

Prohibition of Trafficking in Persons Act of 2017

https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&ved=2ahUKEwieoP_sjenxAhX563MB HTF1AxUQFjADegQIAxAD&url=https%3A%2F%2Frmiparliament.org%2Fcms%2Flibrary%2Fpubliclaws%2Fcategory%2F36-public-laws-by-year-2017.html%3Fdownload%3D422%3Ap-I-2017-38-prohibition-oftrafficking-in-persons-act%2C-2017&usg=AOvVaw3cZtxBbdMbhn-31RSuz3ur

Gender Equality Act 2018

https://rmiparliament.org/cms/images/LEGISLATION/BILLS/2019/2019-0168/GenderEqualityAct2019.pdf

Appendix 5:

GBV Interagency Referral Form



RMI INTERAGENCY GBV REFERRAL FORM

CONFIDENTIAL: For authorised interagency referral only

Priority	Referred via:	Referral date:
High (Follow up within 24 hours)	Phone	
Medium (Follow up within 3 days)	🗌 Email	
Low (Follow up within 3 weeks)	Other	

Referred to:	Referred by:
Agency/organisation	Agency/organisation
Name of the staff:	Name of the staff:
Address:	Address:
Phone:	Phone:
Email:	Email:

Survivor information: (all personal information is <u>OPTIONAL</u> depending on the details survivor wants to disclose)		
Name:	Language/Communication needs:	
Address:	DOB:	
Phone:	Gender (if relevant):	

If curring a shild (balan 19 mans)		
If survivor is a child (below 18 years)		
Name of primary caregiver:	Contact for caregiver:	
1 5 6	0	
Deletionship to shild		
Relationship to child:		
Caregiver is informed of referral? Yes	No	
(If no explain)		

Reason for referral/background information: (Issue description, duration, frequency)

Services already provided: (include any other referrals made-limited to information relevant to the referral)			
Agency:	Support:	Date (including if ongoing)	

Services requested:	
Health: clincial management of sexual	Material Aid
assault	Safe shelter
Health: Treatment of injuries	Child Care assistance
Health: Other	Child Mandatory reporting
Legal Support: General	Financial help
Legal Support: Protection Order	Police/safety/justice
Psychoscial Support	Education
Counselling or case managment	
	Other

Additional specific needs of the survivor:		
CHILD:	Adult:	
Child not attending school	Pregnant	
Teenage pregnancy	Adult with a disability (physical,	
Child Spouse	intellectual, learning)	
Child Mother	Any LGBTIQ+ needs	
Child engaged in illegal labour	Mental Health	
Child with disability (physical,	Substance use	
intellectual, learning)	Spiritual	
Any LGBTIQ+ needs	_	
Mental Health		
Substance use		
🗌 Spiritual		
Where appropriate, please provide more information if a box was checked to assist meet the		
needs of the survivor:		

If relevant, details of the user of violence/perpetrator and/or any other risk and safety factors:

Consent to refer (read with survivor and answer any questions before they sign)

I, (insert name), under	stand that the purpose of this referral and	
providing my information to	(insert place being referred to) is	
to ensure safety and service to me.		
-	(insert referring agency) has clearly explained the d the exact information that is to be disclosed. By	
signing this form, I authorize this exchange of information.		
Signature	Date:	

Details of referral:

Survivor has been informed of the referral? 🗌 Yes 🗌 No (if no explain)

If consent has not been signed, the survivor has been explained the process and has verbally consented to release information?
Yes No Any contact or other restrictions? Yes No (If yes, explain)

Receiving organisation	
Referral received by:	Response provided to referring agency by:
Date:	Date: