



***Morobe Province
Family and Sexual Violence
Strategic Plan 2015 - 2017***

MOROBE PROVINCE FAMILY & SEXUAL VIOLENCE STRATEGIC PLAN 2015-2017

INTRODUCTION

On the 10th and 11th December 2014 a workshop was conducted at the Lae International Hotel Conference Room to develop a strategic plan to address family and sexual violence (FSV) in Morobe Province. Morobe is well serviced with a number of dedicated community based organisations, churches, government agencies and stakeholders who are working towards a common goal, with many of them having membership of the Morobe Family and Sexual Violence Action Committee (FSVAC). There are however a number of problems with coordination and support and a need for an agreed strategic direction to address FSV within the Province.

A draft Morobe FSV Strategic Plan was developed at this workshop covering the years 2015-2017. As with all higher level plans, many of the activities are broad in nature and are meant to be implemented over a 3 years period. More specific activities are to be developed in a series of three annual plans (2015, 2016 and 2017) linked closely with the strategic plan which will act as a guide to the action to be taken.

On 21st January 2015 a further workshop was conducted at the Lae International Hotel in which the strategic plan was revisited and a Morobe FSV annual plan for 2015 was developed. The following is an outline of the Morobe FSV Strategic Plan 2015-2017 and its component parts as well as a copy of the 2015 Morobe FSV Annual Plan.

DEVELOPMENT OF THE STRATEGIC PLAN

The Morobe FSV Strategic Plan 2015-2017 was developed following extensive consultation with both community members and stakeholders represented at the workshop. The process involved:-

- The conduct of an environmental analysis of FSV in Morobe Province;
- The development of a vision and mission statement;
- The development of 5 higher level outcomes and accompanying strategies
- The development of key performance indicators for each of the 5 outcome areas; and
- Agreement on a statement of values

LIFESPAN

The participants at the workshop agreed that due to the fluid nature of the operating environment in Morobe Province that a realistic lifespan for the FSV Strategic Plan should be 3 years (2015-2017). It was felt any longer term than this may result in changes occurring in society which would render the plan obsolete. It was agreed that a further strategic plan be developed towards the end of 2017 where the current plan can be reviewed and refreshed.

It was also agreed that each year there should be an annual activity plan developed which will see the broad strategic statements in the Strategic Plan rolled out into actual activities to be achieved within the yearly period.

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MISSION & VISION

Following substantial discussions, the following mission and vision statements were agreed to:-

Mission

The mission for the Morobe Province FSV Strategic Plan is:-

“Strengthening service provision and interventions to prevent family and sexual violence and empower survivors in Morobe Province”

This is the fundamental purpose for the plan and it was agreed that all efforts should be made to achieving this mission.

Vision

All modern groups or organisations must be forward looking and need to have a shared vision of their intended destination. The shared vision of stakeholders for the Morobe FSV Strategic Plan 2015-2017 is:-

“A safer Morobe Province for all women children and other vulnerable people”

ENVIRONMENTAL SCAN & THE OPERATING ENVIRONMENT

The environmental scan conducted as a part of the planning process outlined a number of areas where the performance could be improved to more effectively combat FSV. This scan and analysis indicated the following as major areas of concern:

- The lack of a secretariat for FSV;
- The need for greater levels of coordination and cooperation;
- The need to establish rural pathways and services for rural based survivors;
- The lack of a centralised data collection and analysis function, capable of processing and disseminating relevant and timely management information;
- The need for skills development in such areas as crisis counselling and dealing with child survivors;
- The need for greater levels of community awareness and prevention programs
- Better provision of safe house services; and
- The need for improved law enforcement and provision of legal assistance and support to survivors

A copy of the SWOT analysis conducted at the workshop is attached as Attachment 1.

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STRATEGIC OUTCOMES

From the above scan, 5 high level strategic outcomes have been developed. These are:-

- Strengthened legal support and enforcement/response to FSV in Morobe Province;
- Greater prevention activities and community awareness for FSV;
- Prompt and effective medical services are provided to survivors of FSV;
- Services are provided that support survivors and provide a more effective response to FSV; and
- Strengthened coordination and management of information and data relating to FSV in Morobe Province

OUTPUTS/ACTIVITIES

Each of the above outcomes has a number of outputs/activities to be carried out over the life of the plan. These will provide strategic direction for the 3 annual activity plans that will need to be developed. The outputs are contained in the chart at Attachment 2. The broad activities in the strategic plan are broken down further into more specific activities in the 2015 FSV Annual Plan which is attached to this report at Attachment 3.

The following is a summary of the strategies developed to address the FSV related issues in Morobe Province

Outcome 1 - Strengthened legal support and enforcement/response to FSV in Morobe Province

The recently constructed and officially opened Family & Sexual Violence Unit (FSVU) at Lae Police Station is a cornerstone in the legal response to FSV in Morobe Province. Since opening its doors it has been flooded by people (mainly women) reporting cases of FSV and seeking police assistance. Unfortunately the FSVU is badly understaffed and ill-equipped to deal with the large number of cases being reported and requires more staff and resources to be effective in dealing with FSV cases. A strategy has been developed in the plan to work with senior police management in Lae to better resource the FSV.

Dealing with such a large number of cases has meant that FSVU officers are largely confined to taking reports with few opportunities to actually follow up on these complaints. A strategy has been included in the plan to limit opening hours/days at the FSVU to allow time officers to follow up on the cases being reported, serve Interim Protection Orders and lay charges where appropriate.

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One of the initial points of entry for FSV survivors into the law and justice system is the police however there are issues with many police officers being unaware of their responsibilities or the Royal PNG Constabulary's Protocols in relation to FSV. Many survivors have reported that they are often turned away when attempting to report cases of FSV to police and even if successfully reported official action is often not forthcoming. Another trend since the opening of the FSVU is for police officers to refer survivors to this unit rather than take the reports themselves. This only adds to the huge workload of the FSVU. A strategy to better educate and train police in dealing with FSV is contained in the plan.

Also of concern is the low prosecution rate for offenders charged with FSV offences It would appear that there is a need for gender sensitisation training for police as well as awareness of the agreed police protocols regarding FSV and to improve police response when cases of FSV are reported. The follow up by police of FSV cases is also an issue. Many survivors reporting cases find that they are often not acted on, or where they are that investigations take a great deal of time. The strategic plan contains a strategy to improve police first response and follow up of FSV cases reported to police

Other issues identified in relation to legal responses to FSV include the delay in obtaining Interim Protection Orders (IPO). These orders are meant to provide protection for FSV survivors however the issue of orders are often delayed as is the service of them on offending parties. Clearly this requires attention and should be a matter for discussion and action by the Morobe Law and Justice Core Working Group and a strategy is included in the plan to improve the issue and service of IPOs where they are required.

It would also appear that many women in the general community are unaware of the formal justice system and how they can obtain assistance, or where cases can be reported. Strategies have been developed to provide increased awareness of this issue in Morobe Province:-

Strategies developed in support of this outcome are as follows:-

- 1.1** Improve 1st Response by Police to FSV and prioritise front counter reports
- 1.2** Improve issue and service of IPOs of FSV by police
- 1.3** Streamline issue of IPOs
- 1.4** Maintain liaison/ referral with other FSV service providers
- 1.5** Improve prosecution rate for FSV cases

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1.6 Provide community awareness on police response protocols for FSV cases

1.7 Ensure follow up of FSV cases

1.8. Increase staffing & resources for Lae FSVU

1.9. Provide FSV sensitivity and procedures training for operational police officers

Outcome 2 - Greater prevention activities and community awareness for FSV

While legal response is an important part of combating FSV in Morobe Province, it is generally agreed that activities aimed at preventing FSV is a priority. Greater awareness of FSV as a crime and anti-social behaviour should commence as early as possible and to this end a strategy has been included to engage with the Morobe Division of Education to conduct prevention education as a part of school activities.

There is also a need to publicise the issue of FSV and its serious consequences throughout Morobe Province and while verbal presentations and awareness are important components of this it is felt that standardised publicity materials should be developed and widely distributed throughout Morobe Province. The use of media awareness is also a strategy in the plan, including Radio Morobe that can provide messages throughout the province seeking to prevent FSV and providing advice as to options for survivors when confronted with this crime.

Problems also exist with the isolation of many communities in the province and a strategy has been included to conduct regular outreach patrols to rural communities to create awareness and publicise services that are available. It is also intended to equip Rural Health Centres with information and training to up-skill health staff in the area of FSV and to allow for better referrals of survivors to services that are available.

The promotion of male advocacy is another strategy contained in the plan. Training for men in advocating for women's rights and combating FSV is available and this focus can serve to shift FSV from being solely a women's issue to an issue that affects the whole community. Having men acting as 'male advocacy is also a strategy in this plan.

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Strategies developed in support of this outcome are as follows:-

- 2.1. Work with education to include FBV prevention in schools
- 2.2. Develop and distribute FSV Publicity materials (standardized) in Lae
- 2.3. Use local media to send FSV prevention/ awareness messages
- 2.4. Promote male advocacy and church/community based FSV programs in Morobe
- 2.5. Increase media awareness
- 2.6. Conduct 3 rural area outreach patrols annually
- 2.7. Provide Rural Health Centre Awareness to communities,

Outcome 3 - Prompt and effective medical services are provided to survivors of FSV

One of the main responders to cases of FSV is the ANGAU Memorial General Hospital Family Support Centre (FSC) in Lae. This centre provides medical attention, care, support and awareness for survivors of FSV. The FSC also works with the Police FSVU in the provision of referrals and medical certificates and statements.

The FSC has received significant support from the Australian Government and a facility has been developed in the grounds of the ANGAU Memorial General Hospital, which is staffed by a full time medical practitioner (Dr Joe Menda) and a trained nursing sister specialising in family support. (Sister Anastasia Wakon). The Australian Government has undertaken to rebuild the ANGAU Hospital and a strategy is included in the plan to progress the upgrade of facilities for the FSC.

Many health workers within Morobe however are untrained in specific areas such as trauma arising from FSV, child trauma and special needs of survivors and a strategy has been included in this plan to provide training and support to health workers in this area.

Crisis counselling for FSV survivors is also an area of identified deficiency, with only one trained crisis counsellor based at the ANGAU Hospital FSC. There is a need for additional counsellors to be trained, particularly in the area of crisis counselling at the ANGAU FSC as well as general counsellors in Health Centres around Morobe. A strategy to build counselling skills within Morobe Province is contained in this plan.

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A strategy is also included in the plan to continue the good work of the FSC and to expand its services. Many women go to the FSC as a place in which to report FSV cases where they receive professional medical treatment and support and are provided with guidance and advice on referrals, including referral to the police. It is planned to expand FSC services into rural areas and to create an FSC at the Wau Hospital. This will provide services to survivors in in Wau/Bulolo and adjoining Districts.

The FSV pathway is not as yet fully established in Morobe and many survivors do not take their cases to the police, mostly being satisfied with a medical report which they can take back to their communities and use as a lever in the traditional dispute resolution process. There is also an identified need for protocols to be developed in relation to the provision of statements, affidavits and other evidence to the police. A strategy is contained in the strategic plan for protocols to be developed between the Police FSVU and the FSC whereby medical reports and other evidence are not handed to complainants but are sent directly to the police. This has had some impact on issues such as this in other provinces.

Strategies are also contained in the strategic plan to standardise record keeping and data management and also to improve networking with other agencies in support of the proper establishment of the FSV pathway, which will include HIV testing and treatment.

Strategies developed in support of this outcome are as follows:-

- 3.1.** Increase FSV Training for health workers in specific areas (trauma, child trauma, special needs) in Lae & rural areas
- 3.2.** Increase numbers and train Crisis Counsellors (Lae & rural)
- 3.3.** Provide medical services & HIV testing for survivors
- 3.4.** Establish medical report protocol with police & standardised medical reporting format and supporting affidavits
- 3.5.** Standardize FSC record keeping & data gathering
- 3.6.** Liaise with other FSV service providers – (Referral networks & boundaries)
- 3.7.** Establish FSC outposts at 3 rural health centres
- 3.8** Progress new planned facilities for FSC including crisis accommodation

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Outcome 4 - Services are provided that support survivors and provide a more effective response to FSV

The Australian Government has provided assistance to Morobe Province through the Morobe Case Management Centre which is managed by Oxfam. This program supports improvements in case management and the building of proper referral systems for FSV survivors. This includes the provision of assistance with family tracing and relocation of survivors who require extraction from a family or community. This forms part of this plan.

The Case Management Centre also provides assistance to community organisations and churches who are engaged in providing direct assistance to FSV survivors and this plan includes strategies to provide training, mentoring and coaching for these agencies/organisations.

A major issue in relation to protection of FSV survivors is with 'safe houses'. There are currently two safe houses in Lae, one of which is operated by the Lae City Mission and is located at the 2 Mile Settlement in less than secure surroundings and another operated by the Salvation Army. Both houses are kept busy and there is a need for an additional safe house in Lae City, which is one of the strategies contained in the strategic plan.

The existing safe houses and any future accommodation of this nature also need to comply with the recently developed Safe House Protocols and require ongoing support (including logistic support) to fulfil their important roles. Of particular importance is the need to provide additional services to survivors who are accommodated in these houses and the plan outlines a strategy to train safe house staff as counsellors and to provide critical care as a part of their role. In addition accurate records need to be maintained and shared with the proposed FSV Secretariat that is to be established in Morobe Province.

Strategies also exist to respond to Level 1 Child Abuse cases and the provision of basic skills training for the economic empowerment of survivors,

Strategies developed in support of this outcome are as follows:-

- 4.1.** Implement procedures/ MOAs for Safe Houses
- 4.2.** Strengthen existing safe house service provision & provide one additional safe house
- 4.3.** Provide ongoing counseling services & initial critical care for survivors and families
- 4.4.** Strengthen case management & referral systems for survivors

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- 4.5. Improve and provide family tracing and integration/relocation
- 4.6. Provide skills training for survivors to allow for economic empowerment
- 4.7. Provide training mentoring & coaching for direct service providers (including churches & NGOs) on handling of FSV cases, inc initial critical care
- 4.8. Respond to level 1 child abuse cases
- 4.9. Improve safe house logistics resources

Outcome 5 - Strengthened coordination and management of information and data relating to FSV in Morobe Province

There is a recognised need for better administration and support for FSV initiatives in Morobe Province and to build a better relationship between the province and the National FSVAC.

The plan provides for support to FSV initiatives through the establishment of a Secretariat to be managed by the Morobe Provincial Division of Community Development. This Secretariat will be responsible for the management of plans, the coordination and alignment of stakeholders so as to establish the FSV referral pathway, the establishment of an FSV database and data collection system, the conduct of stakeholder mapping exercises and the establishment of a research function.

Strategies developed in support of this outcome are as follows:-

- 5.1. Provide support to FSVAC – liaise with National FSVAC
- 5.2. Establish FSV secretariat within Morobe Com Development
- 5.3. Coordinate/ align stakeholders and create consistent data flows
- 5.4. Monitor/ evaluate strategic & annual plans & provide reports
- 5.5. Develop data- gathering process/ reporting requirements inc training
- 5.6. Establish & implement FSV database
- 5.7. Conduct Stakeholder Mapping exercises
- 5.8. Acquire resources & office space for FSV Secretariat
- 5.9. Establish research function within Secretariat

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KEY PERFORMANCE INDICATORS

Key performance indicators seek to measure the outcomes from the Strategic Plan as opposed to individual activities. It is important that expectations of success are carefully managed and that realistic targets are set. The KPIs for the output groups in the Morobe GBV Strategic Plan 2015-2017 are as follows:

Legal Support & Enforcement/Response

- By the end of this plan the number of responses to reported cases of GBV will have increased by 20%
- By the end of this plan 20% of police officers in Lae and in the wider Morobe Province will have received FSV training
- By the end of this plan 15% of all IPOs will have been issued within 5 days of being lodged

Prevention & Awareness

- By the end of this plan there will be an FSV best practice option operating within 3 Districts of Morobe Province;
- By the end of this plan there will be an FSV education program operating in Morobe Province;
- By the end of this plan, a male advocacy program and church/community based FSV programs will be operating effectively in Morobe Province
- By the end of this plan people in 3 rural areas will have access to FSV services

Medical Services

- By the end of this plan there will be 10 trained health workers and 10 trained crisis counsellors operating in Morobe Province;
- By the end of this plan there will be established protocols operating in relation to medical reports and the provision of evidence for FSV cases;
- By the end of this plan there will be a 15% increase in people accessing psychological and medical attention from ANGAU Hospital Family Support Centre (FSC)

Support Services

- By the end of this plan there will be 3 safe houses operating in Morobe Province according to the safe house protocols
- By the end of this plan there will be at least 2 trained counsellors available at each safe house in Morobe

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- By the end of this plan all survivors accessing safe house services in Morobe Province will be offered counselling by skilled staff

Coordination and Information Management

- By the end of this plan there will be a data collection facility established in Morobe Province providing accurate data and management information to stakeholders
- By the end of this plan there will be an FSV Secretariat operating in Morobe Province
- By the end of this plan there will be properly established FSV pathways established in 3 Districts of Morobe Province
- By the end of this plan the Morobe FSVAC will meet at least quarterly and be administratively supported by the FSV Secretariat

RESPONSIBILITY FOR THE PLAN

The issue of who would manage the strategic plan was also discussed at the workshop, as unlike many other strategic planning exercises there is no clearly defined Chief Executive Officer or other individual person or agency responsible for implementation, monitoring and evaluation. It was agreed that the Program Adviser for the Provincial Division of Community Development be the nominated officer responsible for these tasks, with the following agencies/persons being responsible for implementation of each of the outcome areas:-

Legal Support & Enforcement/Response – Royal PNG Constabulary (Lae Metropolitan Command)

Prevention & Awareness – Morobe Provincial Division of Community Development

Medical Services – ANGAU Memorial Hospital Family Support Centre

Support Services – Family PNG (Formerly CMC)

Coordination and Management Information - Morobe Provincial Division of Community Development

Progress reports will need to be made available to members of the FSVAC at each of their quarterly meetings.

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RELATIONSHIP WITH NATIONAL & PROVINCIAL PLANS

Vision 2050

Vision 2050 outlines that all sectoral and provincial plans need to be linked to the strategic directions contained in this long term vision. Of interest is that Area 1 of the 7 strategic focus areas relates to *Human Capital Development, Gender, Youth and People Empowerment*. It is clear that the Morobe FSV Strategic Plan 2015-2017 aligns with the directions and themes contained in Vision 2050

Development Strategic Plan 2010-2030

The National Development Strategic Plan contains broad strategies to address domestic violence. The following excerpt from this plan also relates to this area:-

Currently, gender disparity is evident in many aspects of society, from education, employment and political representation to mortality and cultural norms. This largely reflects traditions that are harmful and life threatening that need to be done away with.

Medium Term Development Plan 2010-2015

The Medium Term Development Plan (MTDP) 2010-2015 provides more specific activities aimed at combating GBV and also supports churches and community organisations in the provision of safe houses for survivors/ The following are excerpts from this plan:-

Tension and conflict seem to pervade gender relations and are often manifested in physical violence, most significantly between spouses. The high incidence of rape and other forms of sexual violence also stems from gender relations and how women are valued in society.

initiatives over the next five years will continue to acknowledge and support protective shelters for women and children — shelters established and managed by churches and CSOs as implementing partners of the Government

Morobe Provincial Corporate Plan 2014-2018

The Morobe Provincial Corporate Plan does not contain a segment on law and justice as at the time of writing there was no actual Division of that nature within the structure of the Provincial Administration. There is mention however in the plan briefly outlining strategies to address gender inequalities and also HIV/AIDS

Alignment

The Morobe FSV Strategic Plan 2015-2017 provides medium term directions, goals and broad strategies for the next 3 years and aligns with all of the National Plans. The FSV Strategic Plan sets the overall directions and provides guidance for provincial

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response in this area and Annual Activity Plans will provide more specific activities. It is proposed to develop the first of these annual activity plans in early 2015.

VALUES

An important part of the plan has been the development of the key values that will provide guidance to those who will be responsible for implementing the plan. These are:-

- Respect for human rights
- Transparency and accountability
- Cooperation
- Advocacy
- Protection of the vulnerable
- Confidentiality
- Ownership
- Commitment to improvement

LINKS TO BUDGETS/FUNDING

Linkages of the Morobe FSV Strategic Plan 2015-2017 to any specific budget either provincially or nationally are difficult to establish due to the long term nature of the plan. While there is some annual funding through the Division of Community Development for FSV and some funding streams through the National Government these vary from year to year.

In addition some funding may be available through donor agencies and through non government organisations/church groups etc while some funding will be provided over a longer term, such as the redevelopment of the ANGAU Memorial Hospital in Lae (which will include the FSC). Linkages of planned activities to specific budget lines and allocations will be difficult to accurately establish over the longer term and will be restricted to costings in the annual activity plans.

IMPLEMENTATION

It is expected that the nominated agencies or groups will be responsible for the management of their respective outcome groups with overall responsibility for the plan being with the Program Adviser Provincial Community Development.

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MONITORING & EVALUATION

Plans will be monitored and evaluated as a part of the role of the proposed FSV Secretariat function. A progress report will be produced each year for the Strategic Plan with the Annual Activity Plan being monitored throughout the year, and its success or otherwise reported on. It is expected that the FSVAC will be able to provide oversight and maintain an interest in progress of planned activities.

CONCLUSION

The Morobe FSV Strategic Plan 2015-2017 is a blueprint for the provincial response to the issue of family and sexual violence and draws together actors from both the Government (both National and Provincial) and community organisations including the churches. The plan itself aligns closely with national development plans and is the vehicle for the promotion of gender equality, which can never be achieved as long as gender based violence continues within PNG society. Morobe Province is well placed to address this issue and has access to a large number of very committed people, organisations and resources who, if they work together have the capacity to bring about a fairer and less violent society.

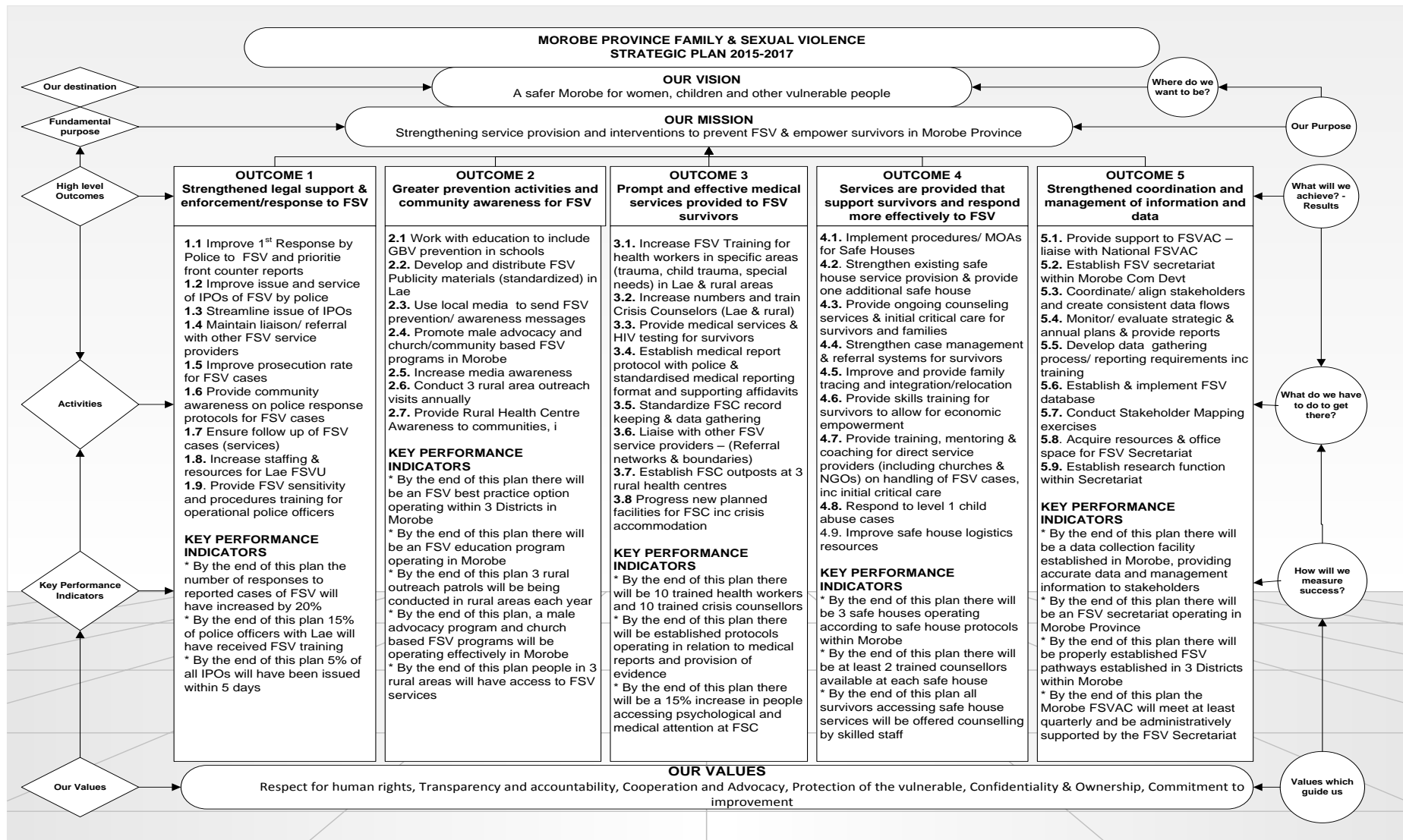
This plan is the first step in obtaining an agreed course of action. Making it work is now the challenge.

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ATTACHMENT 1

<p>Strengths</p> <ul style="list-style-type: none"> • Good representation – NGOs, Service Providers, FBOs (CBOs) • “quality” services • FSVAC/ FSVU/ FSC/ CMC/ VLOs/ Pub Sol • 3 safe houses • Clear boundaries/ agenda of services • Good skill set • Adaptability – working within means • Strong referral systems • Legal aid in Bulolo • Committed Individuals • Commitment to improvement 	<p>Weaknesses</p> <ul style="list-style-type: none"> • No secretariat • Lack of collaboration/ coordination • Lack of transparency/ accountability re: resources • Lack of awareness of the law • No linkage to rural areas within the province • Services limited to Lae city • Duplication – burnout/ lack of resources • Lack of data collection/analysis • Lack of government leadership/ commitment at national/ provincial level • Lack of public awareness – on rights, laws, services • Targeted awareness/ education/ training • Lack of advocacy • Lack of skills/ resources • Lack of counseling services/ long term • Lack of specialized skills for dealing with children
<p>Opportunities</p> <ul style="list-style-type: none"> • Family PNG (CMC) – case management • Potential for corporate support • PALJP TP • Regional support – collaboration with other organizations in the region • Overseas charities/ NGOs • National/ provincial government – government commitments/ strategies • Alignment of priorities – dove tailoring • Media • Culture • CPP - churches • FBOs 	<p>Threats</p> <ul style="list-style-type: none"> • Cultural issues • Lack of regret/ ignorance of the law • Corruption • Disempowerment/ lack of access to information • Political manipulation • Lack of resources/ sustainability • Out of court settlement • Diversion of funding/ priorities • Lack of education/ literacy • Security issues – safe houses, services • Service providers who are perpetrators • Development – extraction industry, trafficking

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MOROBE PROVINCE FAMILY & SEXUAL VIOLENCE – ANNUAL ACTIVITY PLAN 2015

OUTCOME AREA 1 – STRENGTHENED LEGAL SUPPORT AND RESPONSE/ENFORCEMENT TO FSV

No.	Strategic Plan Activity	Activities for 2015	Performance Indicators and Timelines	Who Is responsible?	Cost and Funding Source
1.1.	Improve first response by police to FSV and prioritise front counter reports	1.1.1. Ensure that all FSV cases are registered	All FSV cases reported to FSVU are properly registered by Dec 2015	OIC FSVU	Nil Cost
		1.1.2. Designate open days and/or hours for taking of complaints and for follow up and administration of cases	Designated hours are implemented at FSVU by June 2015	Supt Admin Lae	Nil Cost
		1.1.3. Develop and implement an efficient system for follow up on complaints of FSV	System is developed and implemented by June 2015	OIC FSVU	Nil Cost
		1.1.4. Respond to cases of FSV are reported	50% of FSV cases reported to FSVU are followed up by Dec 2015	OIC FSVU	Nil Cost (within recurrent RPNGC budget)

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1.2.	Improve issue and service of IPOs for FSV by Police	1.2.1. Appoint one FSVU member to deal directly with issue of IPOs	IPO officer appointment is maintained throughout the year	OIC FSVU	Nil Cost
		1.2.2. Obtain instruction from Met Supt that officers at stations are to serve IPOs as soon as possible after receipt	Instruction is issued by July 2015	Supt Admin Lae	Nil Cost
		1.2.3. Designate days of week at FSVU for service of IPOs	Designated IPO service days are operational by July 2015	Supt Admin lae	Nil Cost
1.3.	Streamline issue of IPO's	1.3.1. Liaise with MS and SPM to develop a streamlined system to issue IPOs more quickly	Agreement is reached between MS and Police re prompt issue of IPOs	Supt Admin Lae SPM	Nil Cost
		1.3.2. Provide IT support to MS to assist with IPO recording and issue	Computer equipment is provided to Morobe MS by May 2015	PALJP-TP	K5,000 (PALJP or NGO)
		1.3.3. Maintain data on issue IPOs.	Data is maintained throughout the year	OIC FSVU SPM	Nil Cost
		1.3.4. Maintain records of all IPOs issued in Morobe Province	Updated list of IPOs is maintained throughout the year	Clerk Courts MS	Nil Cost

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			List of IPOs is made available to all FSVAC meetings	Clerk Courts MS	Nil Cost
1.4.	Maintain liaison/referral with other FSV service providers	1.4.1. Attend Core Law and Justice Working Group meetings	All Core Law and Justice Meetings are attended throughout the year	Supt Admin Lae	Nil Cost
		1.4.2. Attend all FSVAC meetings	All FSVAC Meetings are attended throughout the year	Supt Admin Lae	Nil Cost
		1.4.3. Maintain regular contact with ANGAU Hospital and other stakeholders in relation to referrals	Monthly meetings with ANGAU Hospital FSVAC are conducted throughout the year	OIC FSVU	Nil Cost
		1.4.4. Provide monthly data updates to Morobe FSV Secretariat when established	Data is provided to Morobe FSV Secretariat on a monthly basis throughout the year	OIC FSVU	Nil Cost

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		1.4.5. Maintain regular contact with Safe House providers within Morobe Province in relation to referrals	Regular contact is made throughout the year	OIC FSVU	Nil Cost
1.5.	Improve prosecution rate for FSV cases	1.5.1. Maintain information on FSV cases going before the courts	Information is maintained throughout the year	MS Morobe	Nil Cost
		1.5.2. Liaise with SPM on any problems associated with successful prosecution of FSV cases	Quarterly meetings are conducted with SPM throughout the year	Supt Admin Lae OIC Prosecutions	Nil Cost
1.6.	Provide community awareness on police response protocols for FSV cases	1.6.1. Contact Radio Morobe to conduct regular awareness sessions on FSV and services that are available	Monthly radio sessions are conducted throughout the year	OIC FSVU	Nil Cost
		1.6.2. Take part in 3 Rural Outreach patrols to provide awareness in rural areas	3 Rural Patrols are participated on throughout the year	OIC FSVU	K10,000 (PALJP-TP)
		1.6.3. Maintain contact with media representatives in Morobe and take advantage of opportunities to provide awareness	Contact is maintained with Media Representatives throughout the year	OIC FSVU	Nil Cost

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		1.6.4. Liaise with PALJP-TP,CIMC and National FSVU Coordinator in relation to posters and advertising material relating to FSV	Liaison is conducted throughout the year	OIC FSVU	Nil Cost
		1.6.5. Distribute publicity materials on FSV to schools and other areas to promote FSV awareness	Materials are provided by June 2015	OIC FSVU	K10,000 (PALJP)
			Awareness materials are distributed throughout the year	OIC FSVU	K20,000 PALJP)
1.7.	Ensure follow up of FSV cases (services)	1.7.1. Liaise with PNG-APP to ensure rollout of 'Front Desk System' to FSVU	Front desk system is implemented at the FSVU by Dec 2015	OIC FSVU & PNG-APP	Nil cost to RPNGC (PNG-APP to Assist)
		1.7.2. Assign FSVU officers to 'follow up' reported cases	Cases are followed up throughout the year	OIC FSVU	Nil Cost
		1.7.3. Through Met Supt obtain and disseminate instruction that all cases of FSV reported to stations are promptly followed up by officers from that station	Instruction is published and disseminated by July 2015	Supt Admin Lae	Nil Cost

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1.8.	Increase staffing and resources for Lae FSVU	<p>1.8.1. Through Met Supt, follow up on 2 additional permanent officers to be appointed to the FSVU</p> <p>1.8.2. Through Met Supt ensure that FSVU office is provided with resources and stationery</p> <p>1.8.3. Ensure that FSVU vehicle is maintained for use for FSVU duties</p>	<p>2 additional permanent FSVU officers are appointed by April 2015</p> <p>FSVU is properly resourced throughout the year</p> <p>FSVU vehicle is available for FSV duties on a daily basis throughout the year</p>	<p>Supt Admin Lae</p> <p>Supt Admin Lae</p> <p>Met Supt</p>	<p>Nil Cost</p> <p>K30,000 (RPNGC recurrent budget)</p> <p>Nil Cost (maintenance costs and fuel through RPNGC)</p>
1.9.	Provide FSV sensitivity and procedures training for operational police officers	<p>1.9.1. With PALJP-TP provide training and awareness on FSV to 30 police officers from Lae Metropolitan Command in FSV</p> <p>1.9.2. Obtain basic counselling training for FSVU police officers</p> <p>19.3. Provide FSV training & awareness to police in Bulolo District</p>	<p>FSV training is provided to 30 police officers by June 2015</p> <p>Basic counselling training is provided by September 2015</p> <p>FSV training is provided to 20 police officers by June 2015</p>	<p>OIC FSVU with PALJP</p> <p>OIC FSVU with PALJP</p> <p>OIC FSVU with PALJP</p>	<p>K20,000 (PALJP)</p> <p>K20,000 (PALJP)</p> <p>K20,000 (PALJP)</p>

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OUTCOME 2 – GREATER PREVENTION ACTIVITIES AND COMMUNITY AWARENESS FOR FSV

No.	Strategic Plan Activity	Activities for 2015	Performance Indicators and Timelines	Who is responsible?	Costs and Funding Source
2.1.	Work with Education to include FSV prevention in schools	<p>2.1.1. Present FSVAC Strategic Plan to Education Managers at Provincial level and Lae and Bulolo Districts.</p> <p>2.1.2. Deliver presentation re strategic/annual plans to high school heads in Lae and Bulolo Districts)</p> <p>2.1.3. Work with Head Teachers to present FSV strategic plan to their teachers</p>	<p>Presentation is completed by June 2015</p> <p>Presentation is completed by June 2015</p> <p>Presentation is completed by July 2015</p>	<p>Welfare officer</p> <p>Welfare Officer</p> <p>Welfare Officer</p>	<p>DCD Budget K2000</p> <p>K20,000 (DCD Budget)</p> <p>K2000 refreshments (DCD Budget)</p>
2.2.	Develop & distribute FSV publicity materials (standardized) in Lae	2.2.1. Develop and publish pamphlet describing services available for FSV	2,500 pamphlets produced and disseminated to Schools and Service Providers by April 2015	Adviser Com Dec	K10,000 (PALJP & MPA)

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2.3.	Use local media to send FSV prevention/awareness messages	2.3.1. Deliver FSV awareness via Radio PNG FM on a monthly basis	Monthly broadcasts are conducted	Adviser Com Dev	Nil Cost
		2.3.2. Create monthly news stories regarding FSV and have them published in print and electronically	Monthly news stories provided to media throughout the year	Adviser Com Dev	Nil Cost
2.4.	Promote male advocacy and church and community based FSV programs in Morobe Province	2.4.1. Launch “Zero-Tolerance to FSV” Campaign	Campaign is launched by February 2015	Adviser Com Dev	Nil cost
		2.4.2. Conduct quarterly news update events on FSV	Quarterly News updates are provided to media outlets	Adviser Com Dev	Nil cost
		2.4.3. Seek pledges from prominent people on zero tolerance for FSV and publicise this through media outlets	1000 people to have pledged by December 2015	Adviser Com Dev	Nil cost (possible sponsorship from private sector)
		2.4.4. Organise mural at Morobe Provincial Government Offices to support white ribbon campaign and monthly updates of pledges	Mural is painted by June 2015	Adviser Com Dev	K10,000 (Private sponsorship)
		2.4.5. Conduct Transformational Leadership program for 15 MPA Officers	TLP is completed by September 2015	PALJP	K10,000 (PALJP funds)

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2.5.	Increase media awareness of FSV issues	2.5.1. Conduct 6 personal meetings with key media persons to raise personal awareness of FSV issues and to encourage them to become advocates within their organisations	6 meetings are completed by December 2015	Adviser Com Dev	Nil cost
2.6.	Conduct 3 rural outreach visits annually	2.6.1. Conduct 3 rural visits to raise awareness of FSV and to recruit local FSV advocates	3 rural visits are conducted by December 2015 15 Local FSV Advocates are recruited	Adviser Com Dev Adviser Com Dev	K6,000 (PALJP)
2.7.	Provide Rural health Centre Awareness to communities	2.7.1. Visit Rural Health Centres in 2 Districts 2.7.2. Provide awareness to communities on rural health services as they relate to FSV and distribute pamphlets and other information	Visits are completed by December 2015 Awareness is conducted in 2 rural Districts by December 2015	Adviser Com Dev Adviser Com dev	K6,000 (PALJP)

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OUTCOME 3 – PROMPT & EFFECTIVE MEDICAL SERVICES ARE PROVIDED TO FSV SURVIVORS

No.	Strategic Plan Activity	Activities for 2015	Performance Indicators and Timelines	Who is responsible?	Costs and Funding Source
3.1.	Increase FSV training for health workers in specific areas (trauma, child trauma, special needs) in Lae and rural areas	3.1.1. Source suitable trauma counselling training for counsellors	Suitable trauma counselling training course is identified by May 2015	Sister Wakon & Dr Menda	Nil cost
		3.1.2. Provide training for 10 health workers in trauma counselling	10 health workers are trained in trauma counselling	Sister Wakon & Dr Menda	K40,000 (PALJP)
3.2.	Increase numbers and trained crisis counsellors (Lae and Rural Areas)	3.2.1. Conduct basic counselling course for 20 staff from Lae and Bulolo Districts, including FSVU officers and Safe House staff	Basic counselling course is conducted for 20 identified staff	Sister Wakon & Dr Menda	K20,000 (PALJP)
		3.2.2. Work with CIMC regarding establishment of free phone counselling and referral service	Liaison is ongoing throughout the year	Sister Wakon & Dr Menda	
3.3.	Provide medical services and HIV testing for FSV survivors	3.3.1. Provide services for victims of FSV at the ANGAU Hospital Family Support Centre	Services are provided at ANGAU Hospital FSC throughout the year	Sister Wakon & Dr Menda	ANGAU Recurrent funds
		3.3.2. Provide training for FSC staff in HIV and STIs	HIV/STI training is provided for all ANGAU FSV staff	Sister Wakon & Dr Menda	Nil cost

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3.4.	Strengthen medical reporting protocol with police & standardise medical reporting format and supporting affidavits	3.4.1. Attend quarterly consultation meetings with RPNGC and Lae FSVU to discuss standardised reporting and provision of evidence	Quarterly consultation meetings are conducted throughout the year	Sister Wakon & Dr Menda	Nil cost
		3.4.2. Obtain agreement on a standardised system of reporting, provision of medical reports and provision of affidavits	Agreement is reached on a standardised system by June 2015	Sister Wakon & Dr Menda	Nil cost
		3.4.3. Implement revised reporting and evidence system	Revised reporting and evidence system is implemented by July 2015	Sister Wakon & Dr Menda	Nil cost
		3.4.4. Provide training to RPNGC officers on medical evidence, its collection and use	Training for RPNGC officers is provided by August 2015	Sister Wakon & Dr Menda	K5,000 (PALJP)
3.5.	Standardise FSC record keeping and data gathering	3.5.1. Develop and establish central database at FSC for reports of FSV	Central database is established at ANGAU FSC by June 2015	Sister Wakon & Dr Menda	
		3.5.2. Provide computer and printer to operate central data system	Computer and printer are procured by June 2015	Sister Wakon & Dr Menda	

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		3.5.3. Provide training for 2 x FSC personnel in data management	Training is provided by May 2015	Sister Wakon & Dr Menda	
		3.5.4. Provide monthly data to Morobe FSV Secretariat	Data is provided to Morobe FSV Secretariat on a monthly basis	Sister Wakon & Dr Menda	
3.6.	Liase with other FSV service providers (Referral networks and boundaries)	3.6.1. Attend quarterly FSVAC meetings	Quarterly Morobe FSVAC meetings are attended	Sister Wakon & Dr Menda	Nil cost
		3.6.2. Contribute to establishment of designated pathway for survivors of FSV	Survivor pathway is established by June 2015	Sister Wakon & Dr Menda	Nil cost
		3.6.3. Develop rural survivor pathway for Bulolo District	Rural pathway is established by August 2015	Sister Wakon & Dr Menda	K5,000 (PALJP)

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3.7.	Establish FSC facility at 3 Rural Health Centres	3.7.1. Identify 3 rural health centres suitable for establishment of FSC function	3 suitable rural health centres are identified by June 2015	Sister Wakon & Dr Menda	Nil cost
		3.7.2. Identify staff suitable for training in FSC issues and provision of required services	Training is identified by June 2015	Sister Wakon & Dr Menda	Nil cost
		3.7.3. Conduct FSC training for rural FSC staff	Training is provided by September 2015	Sister Wakon & Dr Menda	K15,000 (PALJP)
		3.7.4. Develop FSC in Bulolo District (Wau)	FSC is constructed at Wau Hospital by Dec 2015	Morobe Division of Health	K400,000 (PALJP)
		3.7.5. Identify and acquire land for construction of an FSC at Wau	Land is acquired by June 2015	Morobe Division of Health	
		3.7.6. With Wau LLG and Bulolo District develop design and approvals for construction of an FSC at Wau	Design and approvals in place by June 2015	Morobe Division of Health	
		3.7.7. Appoint supervisor for building project	Supervisor is appointed by Apr 2015	Morobe Division of Health	

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		3.7.8. Go through tender process and appoint builder	Tender is let by July 2015	Morobe Division of Health	
		3.7.9. Build and equip new FSC at Wau	Building is completed by Dec 2015	Morobe Division of Health	
		3.7.10. Conduct official opening of Wau FSC	Official opening is conducted by Dec 2015	Morobe Division of Health	
3.8.	Progress new planned facilities for FSC including crisis accommodation	3.8.1. Liaise with ANGAU General Hospital in relation to upgraded FSC facilities at the new Hospital Building	Ongoing liaison is carried out throughout the year	Sister Wakon & Dr Menda	Nil cost
		3.8.2. Through ANGAU Hospital, lobby donors for provision of short term Crisis Accommodation at the new hospital facility	Donor lobbying is conducted throughout the year.	Sister Wakon & Dr Menda	Nil cost

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OUTCOME 4 – SERVICES ARE PROVIDED WHICH SUPPORT SURVIVORS& RESPOND MORE EFFECTIVELY TO FSV

No.	Strategic Plan Activity	Activities for 2015	Performance Indicators and Timelines	Who is responsible?	Costs and Funding Source
4.1.	Implement procedures/MOAs for Safe Houses	4.1.1. Distribute copies of Safe House Protocols to existing safe houses in Morobe 4.1.2. Provide monitoring advice and assistance to implement safe house protocols	All safe houses are provided with copies of the safe house protocols by August 2015 Monitoring, advice and assistance is undertaken regularly throughout the year	Femili PNG Femili PNG	Nil
4.2.	Strengthen existing safe house service provision and provide one additional safe house	4.2.1. Provide basic needs (food clothing etc) to safe houses 4.2.2. Provide basic equipment for safe houses (TV, beds, mattresses, bedding, towels etc) 4.2.3. Obtain land for construction of an additional safe house	Basic needs are provided throughout the year Basic equipment if sourced and provided by June 2015 Land is identified and acquired by March 2015	Specific safe houses Specific safe house with the support of the identified funding source Morobe DCD	Safe house budget + 100.000 from potential funding sources PGK 200.000 Kina/potential donors to top PGK 500.000 (Donor)

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		4.2.4. Obtain funding for construction of safe house	Funding is acquired by June 2015	Morobe DCD	See above
		4.2.5. Obtain design and building approvals for safe house	Design and approvals are obtained by August 2015	Morobe DCD	See above
		4.2.6. Advertise for tenders for construction of safe house	Tender is let by September 2015	Morobe DCD	See above
		4.2.7. Appoint project supervisor for construction of safe house	Project supervisor is appointed by September 2015	Morobe DCD	
		4.2.8. Construct safe house	Safe house is constructed by Dec 2015	Morobe DCD	
		4.2.9. Furnish and equip safe house	Safe house is equipped and furnished by Dec 2015	Morobe DCD	
4.3.	Provide ongoing counselling services and initial critical care for survivors and families	4.3.1. Provide basic counselling training to safe house staff	Basic counselling training is provided by June 2015	Femili PNG	PGK 5000
		4.3.2. Provide trauma counselling training to 2 staff from each safe house	Trauma counselling training is provided by Dec 2015		PGK 5000

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4.4.	Strengthen case management and referral systems for survivors	4.4.1. Establish case management system within Morobe Province for FSV	Case management system is developed by Feb 2015	Femili PNG	Nil cost
		4.4.2. Conduct regular case conferences to monitor progress and agree on future action	Case conferences are conducted regularly throughout the year	Femili PNG	Nil cost
		4.4.3. Conduct regular stakeholder meetings in relation to FSV cases	3 Stakeholder meetings are conducted throughout 2015	Femili PNG	Nil cost
4.5.	Improve and provide family tracing and integration/relocation	4.5.1. Establish contacts with other Provinces in relation to tracing of family members	Contacts are completed by March 2015	Femili PNG	PGK 10,000
		4.5.2. Conduct mapping exercise of services available to survivors to assist in relocations (NGOs/Government Services)	Mapping Exercise is completed by June 2015	Femili PNG	PGK 10,000
		4.5.3. Assist with relocation of at risk survivors as required	Relocations are conducted as required throughout the year	Femili PNG	PGK 200.000

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4.6.	Provide skills training for survivors to allow for economic empowerment	<p>4.6.1. Work with stakeholders to re-establish the YWCA in Morobe Province</p> <p>4.6.2. Obtain equipment to assist in conduct of basic economic skills programs (eg. Sewing machines, basic handcrafts, cooking, women and agriculture)</p> <p>4.6.3. Commence basic skills training for survivors of FSV</p>	<p>YWCA is re-established by July 2015</p> <p>Equipment is provided by July 2015</p> <p>Basic skills training commenced by August 2015</p>	<p>Morobe DCD</p> <p>Morobe DCD</p> <p>Morobe DCD</p>	<p>K300,000 (Donor required)</p> <p>K100,000 (Donor required)</p> <p>K50,000 (Donor required)</p>
4.7.	Provide training, mentoring, and coaching for direct service providers (including churches and NGOs) on handling of FSV cases including initial critical care	<p>4.7.1. Identify groups and persons requiring training support to better respond to FSV cases</p> <p>4.7.2. Arrange for exchanges/placements to improve skills in handling FSV cases</p>	<p>Potential trainees are identified by May 2015</p> <p>Exchanges/placements are completed by Dec 2015</p>	<p>Organization that likes to place its staff for the training</p> <p>Femili PNG</p>	<p>Organization that placing their staff for the exchange must cover all the expenses.</p> <p>Nil cost</p>

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4.8.	Respond to level 1 child abuse cases	4.8.1. Advocate for an additional Child Protection Officer within Morobe Division of Community Development	Formal request is made to Provincial Administration by April 2015	Com Advisor	Nil cost
		4.8.2. Work with safe houses to provide care for child abuse cases	Child abuse cases are responded to throughout the year	Welfare- Child Protection Officer	Nil cost
4.9.	Improve safe house logistics resources	4.9.1. Assess needs of safe houses in Morobe Province	Assessment is completed by August 2015	Femili PNG	Nil cost
		4.9.2. Work with donors and other agencies to obtain logistical support for safe houses	Logistical support is provided by Sept 2015	Femili PNG	K50,000

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OUTCOME 5 – STRENGTHENED COORDINATION & MANAGEMENT OF INFORMATION AND DATA

No.	Strategic Plan Activity	Activities for 2015	Performance Indicators and Timelines	Who is responsible?	Costs and Funding Source
5.1.	Provide support to FSVAC – liaise with National FSVAC	<p>5.1.1. Present finalised Morobe FSV Strategic and Annual Plans to National FSVAC (CIMC)</p> <p>5.1.2. Seek funding support for FSV operations within Morobe Province</p> <p>5.1.3. Conduct ongoing liaison with National FSVAC and UNDP</p>	<p>Plans are presented to National FSVAC by March 2015</p> <p>Funding sourcing continues throughout the year</p> <p>Liaison occurs throughout the year</p>	<p>Adviser Com Dev</p> <p>OIC FSV Secretariat</p> <p>Adviser Com Dev</p>	<p>Travel and accommodation POM – K5000</p> <p>Nil cost</p> <p>Nil Cost</p>
5.2.	Establish FSV Secretariat within Morobe Provincial Division of Community Development	<p>5.2.1. Develop job descriptions and terms of reference for Morobe FSV Secretariat</p> <p>5.2.2. Seek approval and funding through Morobe Provincial Administration for additional personnel</p>	<p>Job Descriptions and TORs are developed by March 2015</p> <p>Submission is forwarded by April 2015</p>	<p>Adviser Com Dev</p> <p>Adviser Com Dev</p>	<p>Nil Cost</p> <p>Nil Cost</p>

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		5.2.3. Recruit 2 staff (Secretary and research officer) for Morobe FSV Secretariat	2 staff are recruited by July 2015	Adviser Com Dev	(MPA Cost)
		5.2.4. Reallocate 2 existing staff to FSV Secretariat duties	2 staff are reallocated by March 2015	Adviser Com Dev	Nil Cost
5.3.	Coordinate and align stakeholders in FSV and create consistent data flows	5.3.1. Support re-establishment of FSVAC	FSVAC is re-established by April 2015	Adviser Com Dev	Nil cost
		5.3.2. Support quarterly senior committee members meetings of FSVAC	Senior Committee meetings are conducted on a quarterly basis	Adviser Com Dev	Nil cost
		5.3.3. Conduct quarterly full stakeholder FSVAC meetings	Full FSVAC meetings are conducted on a quarterly basis	Adviser Com Dev	K20,000 (PALJP) for conference costs
		5.3.4. Conduct analysis of current data flow through referral pathways	Data flow specifications are produced by June 2015	Adviser Com Dev	Travel costs K10,000 (MPA)
		5.3.5. Provide report to FSVAC on outcomes of analysis of data flows	Report is provided	Adviser Com Dev	Nil Cost

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5.4.	Monitor and evaluate FSV strategic and annual plans and provide reports	5.4.1. Develop monitoring and evaluation and reporting system	M & E/Reporting System is developed by June 2015	Adviser Com Dev	Nil cost
		5.4.2. Conduct monitoring and evaluation of progress with strategic and annual plans	Progress reports provided quarterly commencing June 2015	Adviser Com Dev	Travel costs K10,000 (MPA)
		5.4.3. Provide quarterly progress reports to Morobe FSVAC	Progress reports provided quarterly commencing June 2015	Adviser Com Dev	Nil Cost
		5.4.4. Provide annual M & E report to National FSVAC	M & E Report provided by December 2015	Adviser Com Dev	Nil cost
5.5.	Develop data gathering process/reporting requirements	5.5.1. Conduct analysis of existing data gathering and sharing systems in Morobe	Specifications for data flow are produced by June 2015	Adviser Com Dev	Nil cost
		5.5.2. Provide report recommending upgraded data gathering and sharing systems to Morobe FSVAC	Report is provided by June 2015	Adviser Com Dev	Nil cost
		5.5.3. Establish data reporting and sharing system within Morobe Province	System is established and operational by September 2015	Adviser Com Dev	Nil cost

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5.6.	Establish and implement FSV database	5.6.1. Liaise with National FSVAC and Morobe Femili PNG re database requirements	Report on design of database is completed by April 2015	Adviser Com Dev	Nil cost
		5.6.2. Design develop and deliver FSV database for Morobe Province	Database is seeded by July 2015	Adviser Com Dev	Nil cost
		5.6.3. Commence data entry and sharing of information (inc. security protocols)	Database commenced operation by September 2015	Adviser Com Dev	Nil cost
5.7.	Conduct stakeholder mapping exercises	5.7.1. Assist and support UNDP/CIMC Stakeholder Mapping Consultants in conduct of mapping exercises in Morobe Province	Assistance is provided by February 2015	Adviser Com Dev	Nil Cost
		5.7.2. Encourage and support stakeholders to provide mapping information to Consultants	Encouragement and support completed by February 2015	Adviser Com Dev	Nil Cost
		5.7.3. Support dissemination of information re outcomes of FSV Mapping Exercise	Dissemination of information completed by June 2015	Adviser Com Dev	Nil Cost

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5.8.	Acquire resources and office space for FSV Secretariat	5.8.1. Liaise with PALJP-TP in relation to office accommodation for FSV Secretariat database staff	Office space is provided for 2 staff at PALJP office by March 2015	Adviser Com Dev	Nil Cost
		5.8.2. Acquire 2 computers and office equipment for use by database staff	Computers and equipment are procured by March 2015	Adviser Com Dev	K12000 (PALJP)
		5.8.3. Locate office space for OIC Secretariat and Research Officer at Morobe Provincial Administration offices	Office space is provided by September 2015	Adviser Com Dev	Nil cost