



Annual Report 2016

Healthy Choices Transform Lives
msp.org.fj

Providing reproductive, maternal and child health services in Fiji



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Message from the Executive Director...

It takes a great team to build a great organization and I am so proud to lead the team at MSP. As I review the details of this report, it is clear that there are so many accomplishments for 2016.



Most are the result of an extraordinary collaboration between the staff at MSP, the Ministry of Health and Medical Services, the Fiji Police Force and the Ministry of Women, Children and Poverty Alleviation. We are thankful to have such a wonderful working relationship which allows us to respond rapidly to 'call outs' for assistance with cases of gender violence and child abuse and other emergencies. In 2016, Fiji was struck by the largest Cyclone to ever visit the South Pacific, its landfall devastated Fijian communities, rural businesses and infrastructure. MSP Mobile Clinical Outreach Team deployed immediately and worked long hours to assist those in need. Our new 16 seater van for Outreach, which was donated by DFAT, is one of our most important assets allowing us to deploy a larger team of medical officers, counsellors and community workers and to transport more medical supplies and equipment during the emergency response

period. At every layer of our organization, each individual, each volunteer and each staff member plays a valued part in ensuring quality health and social services are provided to those in need. The One Stop Shop post rape care program is our flagship program, designed to assist survivors of sexual assault and child abuse. It has become a key national health service with the extension of services in 2016. Our Vision, "Healthy Choices Transform Lives" has been the motto for the Outreach Team as they provided education to women and girls in schools, communities and rural markets across Fiji. We were able to reach some of the more remote islands communities in 2016 and look forward to extending our services into the Maritime regions in 2017 and 2018. We have been at the forefront of a public health emergency response in 2016, responding to disasters, to Dengue outbreaks and undertaking a response to the Zika virus in order to help protect

babies and pregnant women. I wish to take this opportunity to thank our donor partners the Australian Government, UN Women, WHO and the Canada Fund for supporting this important health service. I am pleased to present this years report in which you will see a snapshot of the activities that made MSP the largest non government health and social service provider in 2016. MSP staff are making a difference and as we approach 2017, I look forward to tackling the deep health and social service needs that remain.

Yours Sincerely

Jennifer Poole
Founder and Executive Director
Medical services Pacific

Summary

2016 was an incredibly busy year for Medical Services Pacific as Fiji was devastated by the massive Tropical Cyclone Winston, which destroyed homes schools and infrastructure. Thirty six people were killed and many more suffered injuries and the MSP team responded immediately. Reaching out to our partners and donors for funding support, MSP packed up the truck and hired a trailer and began delivering health care supplies, medical services, counselling services, clothes, dignity kits and legal aid to communities badly effected by the cyclone. MSP expanded its staffing to ensure the medical team could be in the field 5 days per week, while keeping the Suva clinic open. All MSP programs were adjusted to respond to the disaster and for 6 months, the pace was relentless. The MSP staff responded magnificently and on behalf of the MSP Board and Trustees, I extend our gratitude and thanks for their long hours and focus during this difficult period.

In 2016, Medical Services Pacific (MSP) implemented eleven projects. These included:

- 1. Mobile Outreach and One Stop Shop (MOOSS) Phase 2 under Fiji Community Development Program (FCDP);**
- 2. Child Helpline Fiji, for the Ministry of Women, Children and Poverty Alleviation through the Information, Technology and Computing Services of Ministry of Justice, Government of Fiji;**
- 3. Providing Awareness to Children Helping End Discrimination (PATCHED) under the UN Women Pacific Women's Ending Violence against Women (EVAW) Facility Fund;**
- 4. Pacific Women Shaping Pacific Development through the Australian Government's Department of Foreign Affairs and Trade;**
- 5. DFAT Medical Relief – Medical care, psychosocial services and live saving support for survivors of Cyclone Winston;**
- 6. UN Women CERF Providing life-saving services to ensure survivors of gender-based violence are safe and able to heal. (Increased access to urgent health, psychosocial and safety interventions for women and girls);**
- 7. WHO CERF – Medical care, psychosocial services and live saving support for survivors of Cyclone Winston;**
- 8. The VIA Project: Eradicating Cervical Cancer among young rural women in Fiji – VIA Canada Fund (CFLI);**
- 9. WHO - Health education and community outreach health services for Zika and other communicable diseases;**



Summary cont...

Small Projects/Corporate Donations/GIK

- 10. Club 26 – Youth Clinic funded by the Rotary Club of Suva Peninsula Sunset;**
- 11. Seeds and Tools Project funded by Global Basket.**
- 12. Uplift Project, Australia.**

MSP also gratefully received Gift in Kind (GIK) Donations during this period from Asaleo Care (Fiji) including funding support for the printing of the Girl Empowered booklets and Uplift Australia.

MSP delivers quality holistic health care services for women, girls, youth and children in the Pacific. Our aim is to ensure women and youth have greater access to basic healthcare services and to empower them to access these services.

In 2016, the MSP team reached a total of 25,458 clients directly or indirectly; an increase on 2015. 120 Sexual Assault Response (SAR) clinical clients were treated. A total of 529 women accessed VIA, cervical screening testing and treatment including referrals. A total of 33,439 family planning products were delivered including Emergency Contraceptive Pills (ECP), Oral Contraceptive Pills (OCP), Depo, Jadelle/Implanon implants, IUD, male/female condoms and lubricants. 952 clients accessed counselling and psychosocial support services. Legal aid advice and consultation services were accessed by 299 clients. In addition 1,502 genuine calls were received through the Child Helpline service.

The MSP Outreach Team coordinated 91 community outreach visits, compared to 47 in 2015. In addition, a total of 45 school outreaches

were carried out, including 16 primary schools, 24 secondary schools, 3 tertiary schools and 2 special schools. Other outreach venues included the Methodist Conference, Hibiscus Festival, Homes of Hope Scream Camp in Wailoku, Fiji Vocational Training Centre for Persons with Disabilities based in Nabua, SRHR training at Pacifica Campus Final Year Pharmacy Fiji National University students, Corporate outreach in Mind Pearl and market outreach in Rakiraki.

Providing Disaster relief, following TC Winston, has been a large part of MSP's work this year. On the 29th February, the first expanded Medical Outreach team was deployed to the West in response to the cyclone. MSP management staff attended coordination meetings in Suva and the Outreach Team visited the National Disaster Management Office (NDMO) to participate in coordination and the team linked with the NDMO officers in the field, to ensure aid and services were being delivered to needy areas without duplication. The MSP Outreach team continued to travel to the field every week from February to November 2016, providing relief response including clinical services, counselling, legal aid, WASH (Water and Sanitation, Hygiene) and a range of information about emergency services. Relief supplies, including WASH kits, seeds and tools, were also distributed.

It became clear that MSP needed a larger team in times of disaster; in order to respond to an emergency that impacted all islands on the Western side of the country, as well as to maintain current clinical programs and continue normal services. MSP was fortunate to receive relief funding support from DFAT (Medical relief), WHO (CERF) and UN Women (CERF), which provided badly needed additional resources. This enabled MSP to deploy a larger emergency response team to devastated

communities/villages and schools. In April 2016, MSP purchased a 44KVA generator, worth FJD \$32,000 with funding from UN Women, providing the clinic and office with power to work during the post disaster period and also ensuring a back up power supply for the national Child Helpline. The CHL is an emergency service which commenced 24 hour operations during the disaster response. MSP also received funding support from DFAT for the purchase of a 16 seater van which was able to take the expanded teams to the field and allowing for the deployment of two teams.

During the relief phase the Outreach team reached out to 8,442 clients and visited 36 villages, 28 settlements and 25 schools and a market in the Central, Western, Northern and the Eastern Divisions. During this reporting period, MSP also conducted a factory outreach for affected factory workers and provided psychosocial support. In addition, MSP held a large multi-stakeholder Health Fair at Navunisea District School in Dawasamu, Tailevu to ensure the disaster affected rural communities had access to a wide range of health and social services.

2016 featured a number of highlights for MSP, including TC Winston post-disaster relief effort, a visit by the Indonesian Minister of Social Affairs and the provision of a multi-stakeholder Health Fair in Dawasamu-Tailevu (an area that had been badly hit by the cyclone).

MSP also partook in the float procession at the Hibiscus Festival, showcasing a Hibiscus Float for the first time in line with the launch of the second edition of 'Girl Empowered.' Promoting the Youth lifestyle magazine and package of sexual and reproductive health and rights services for women and girls.

CORPORATE PROFILE

Who we are

Medical Services Pacific (MSP) is a Fijian registered non-government organisation (NGO) established in August 2010 to enable Pacific women and adolescents to have greater access to quality health care services, and to build resilience among vulnerable groups who are coping with emerging environmental, economic and human security challenges.

MSP is a rights based **family planning agency** that believes that Human Rights awareness and the empowerment of women go together and that both are critical in ensuring individuals and communities achieve optimal Sexual and Reproductive Health services. A woman with access to high quality reproductive health care services has greater choices and opportunities and is more able to cope with stress and change and disaster (e.g. climate change). In addition, access to quality SRH services will decrease maternal and infant mortality rates and improve health outcomes for women. Therefore, the provision of quality SRH services is key to obtaining gender equality, reducing Violence Against Women and Girls (VAWG) and strengthening women's capacity as providers and agents of change in the Pacific.

In Fiji, MSP provides a broad range of health care, counselling and social services, including public awareness and educational programs with a specialized focus on sexual and reproductive health. MSP has developed a comprehensive and integrated service for survivors /victims of sexual assault and domestic violence which includes emergency care, and ongoing medical, nursing, counselling and legal support.

MSP has specialised health teams that work with high risk and vulnerable groups (e.g. girls, youth, sex workers, vulnerable women, children at risk, sexual assault survivors, LGBTI's (Lesbian, Gay, Bisexual, Transgender and Inter-gender) and minorities) to promote awareness and increase access to key clinical and social services. MSP mobile outreach teams provide professional and confidential clinical services to remote and isolated groups, working in close partnership with local government Ministry of Health and Medical Services (MOHMS) Zone nurses and community police under formal Memorandum of Agreements (MOU's). Designed with particular attention to the needs of women, children and youth, MSP's services are offered to both individuals and groups in urban and rural settings across Fiji and in outer islands of the Pacific. This model can be replicated in other Pacific Island Countries (PIC's) with similar gender and development challenges.

MSP works in partnership with public, private and NGO stakeholders and with policymakers at national, divisional and local community levels, coordinating our efforts with others, with the deliberate intent both to maximize scarce resources and to strengthen local capacity. MSP has formal arrangements and service partnerships with the Ministry of Health, the Ministry of Women, Children and Poverty Alleviation and the Fiji Police Force.

Our Mission

To provide quality and accessible sexual and reproductive health care and social services for women, youth and children; and to build resilience, knowledge and skills among vulnerable groups who are coping with environmental, economic and human security challenges in the Pacific region.

Our Vision

MSP believes that women and girls everywhere, should be able to access resources to create a world free of poverty and disease, a world free of violence and threat;

Where women have equal rights, economic and political equity and access to justice; a world where women can choose the number and spacing of their children; and a world where women and girls are able to achieve their aspirations and contribute to sustainable development outcomes.



Our Values

MSP has adopted a set of values that provide a foundation for the organization. Our values guide the work of our board of governors, managers, staff, and volunteers and they are integrated into each of the programs we develop and all of the services we provide. Adherence to these values is an important measure of our success as an organization. Our values are:

1. We are a rights-based SRH organization, committed to human rights, gender equality, child rights and reproductive rights. We recognize the importance of human rights in achieving gender equality and improving reproductive health. Rights awareness and empowerment of women is critical in ensuring communities achieve optimal sexual and reproductive health.
2. MSP is a pro-choice family planning, sexual and reproductive health and social service provider which upholds the rights of women and girls to decide when and how to plan their family including the number and spacing of their children. MSP provides a full circle medical program from fertility support, family planning, maternal health (pre and post natal care), post miscarriage care and safe abortion referrals within the law.
3. Confidentiality for our clients (and their records), is guaranteed by policy and regulated through our code of conduct. We guarantee confidentiality for all clinical, legal aid and counseled clients.
4. We Empower & Engage women and youth, who are supported in programs as potential agents for change and development, at the family, community and governance levels. We believe that empowered women and youth who have choices and access to information, health care and social services are more resilient and better able to respond to personal risks, economic threats and natural disasters (including the impacts of climate change).
5. Reduce and respond to Violence Against Women and Girls (VAWG) by increasing awareness of legal rights and available services, improving access to justice and providing specialized confidential medical care and social services support for survivors.
6. Ensure Child Protection. Protection of children at risk, including programs to protect girl children from sexual assault, abuse, defilement and neglect and to reduce vulnerability of all children and youth.
7. Enabling Equality, ensuring activities and services are non discriminatory and inclusive for those with disabilities, non standard heterosexual orientations, (e.g. MSM and LGBTI), ethnic minority groups and vulnerable groups.
8. A 'People First' approach that values and embraces the collaborative nature of traditional communities and values and engages people as part of the solution. We prioritize the rights and needs of beneficiaries and clinical clients/patients and ensure confidential services and friendly referrals.
9. Committed to Environmental Protection, responding to the needs of traditional communities impacted by climate change, natural disasters or unsustainable development. Environmental Health/WASH: Promoting healthy villages, ensuring communities have knowledge and resources to prevent water borne diseases and improve sanitary conditions. Supporting sustainable livelihoods and sharing innovations to reduce both communicable and non communicable diseases (NCDs).
10. Transparency and Quality Assurance: Committed to the monitoring and evaluation of all project activities and outcomes. With planning and development of services based on evidence, research and experience. Transparent financial systems with annual audits and monthly reports reviewed by board.
11. Commitment to Capacity Building and developing centers of learning for purposes of education, teaching and sharing best practices. MSP has a commitment to sharing knowledge and strengthening the capacity of all with whom we work - staff, interns, patients, clients, other stakeholder organizations and professionals, local communities, and governments. Collaborative across sectors, working with key stakeholder groups and government partners.
12. Responsive: Structured around flexible multi skilled teams that can move quickly across the Pacific and are cost effective to deploy. Ability to deploy rapid response teams inclusive of multi sector experts, for swift assessment and service delivery in times of disaster across the Asia Pacific region.

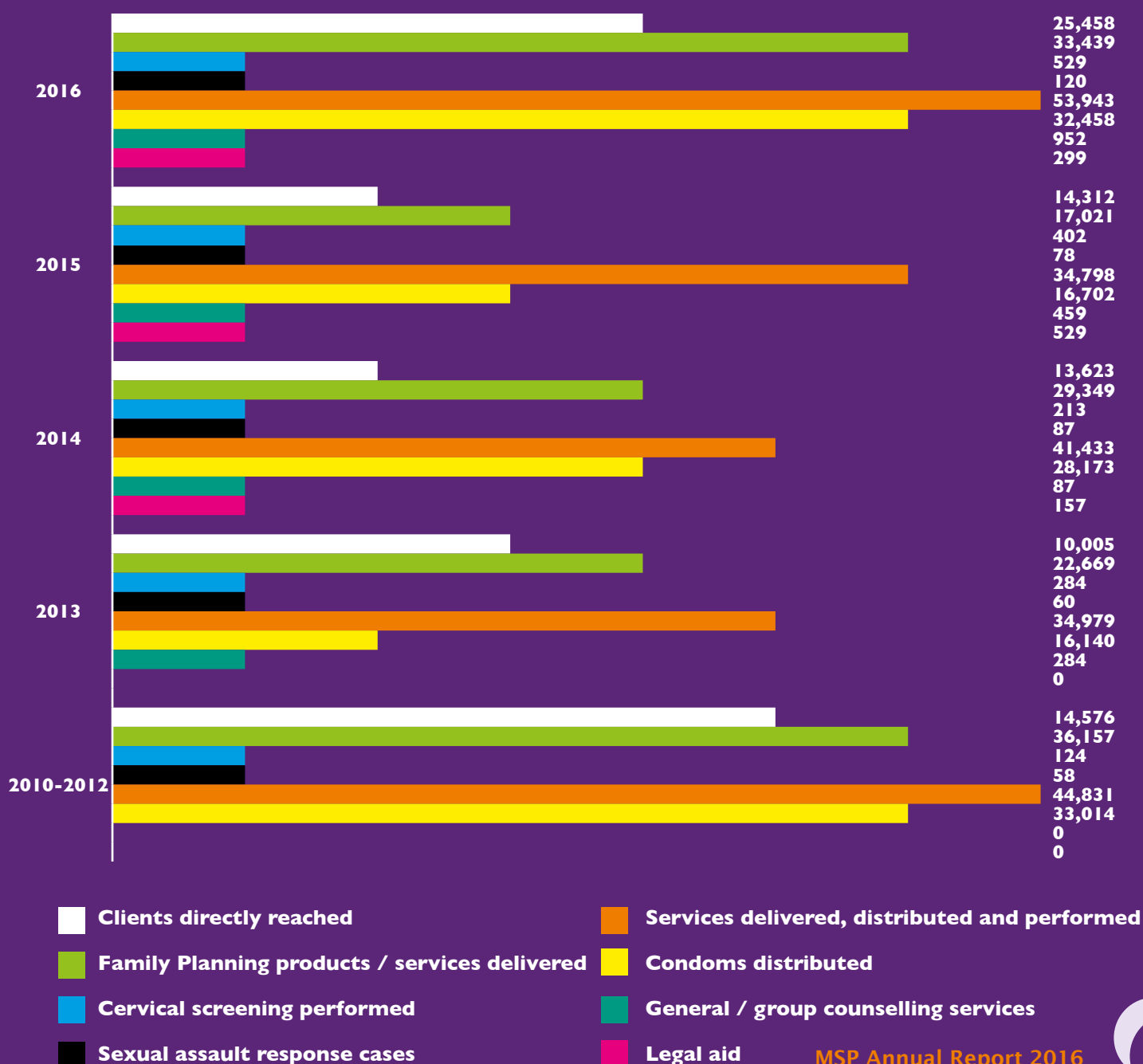
STATISTICS

Table I - Fiji Cumulative Achievements To date- August 2010-December 2016

Cumulative To-date	Achievements for the medical program from the start of the Program in August 2010 to date include:	Annual 2016	Annual 2015	Annual 2014	Annual 2013	Annual 2010-2012
77,977	Clients directly reached	25,461	14,312	13,623	10,005	14,576
209,987	Services delivered, distributed and performed	53,943	34,798	41,433	34,979	44,831
138,635	Family planning services/products delivered	33,439	17,021	29,349	22,669	36,157
126,487	Condoms distributed	32,458	16,702	28,173	16,140	33,014
2,399	Cervical screening performed	529	402	868	476	124
1,908	General Counselling Services/Group/SOU Counselling	952	459	213	284	0
403	Sexual Assault Response(SAR) clinical clients treated (Nov 2012 to date)	120	78	87	60	58
985	Legal Aid	299	529	157	0	0

With a consistent increase in the provision of sexual reproductive health and rights services since inception, MSP is a leading in the provision of SRH care, cervical cancer screening, and sexual assault response in Fiji

Graph I - Comparative Analysis of Cumulative MSP Services 2010-2016





Komave Village - Votva Village - Coral Coast

One Stop Shop

SUPPORTING PROJECT/S:

Mobile Outreach and One Stop Shop, funding partner Fiji Community Development Program (FCDP/DFAT); Department of Foreign Affairs and Trade (DFAT), Australia under it's core funding program for women in the Pacific

MSP's One-Stop-Shop provides holistic and integrated health care and social services for women, youth and children in Fiji. Our aim is to ensure women and youth have access to Sexual Reproductive Health Care and Rights information and to empower them to access these services by promoting healthy lifestyle behaviours. With this in mind, we have developed strong partnerships with government and non-government organisations to provide specialised and confidential services in sexual and reproductive health care – an identified area of need in our community.



Komave Village - Votva Village - Coral Coast



Komave Village - Votva Village - Coral Coast



Kasavu Village



Tacilevu Village School

In addition to regular clients and walk-in clients, the One-Stop-Shop in Suva provides a venue of care for survivors of sexual assault or gender-based violence. Under a Memorandum of Agreement (MOA) with the Fiji Police Force's Sexual Offences Unit (SOU), MSP receives sexual assault client referrals for post-rape care, counselling and legal aid services. Our MOA with the Fiji Police Force has strengthened collaboration and improved service provision for survivors and those at risk.

In 2016, 120 sexual assault response clinical clients were treated at MSP's One Stop Shop. MSP's forensic doctor was summoned as an expert witness for the prosecution 21 times, with all 21 cases resulting in successful prosecutions. The remaining 96 cases are in the system waiting court time.

MSP continues to provide integrated services for

both survivors and their families, in recognition of the fact that instances of sexual assault not only harm and traumatize the survivor, but also those close to them. The Phoenix Support Group, founded last year, provides counseling and livelihood support to survivors and their families. It also offers the opportunity for those affected to share their experiences in a safe space, talk to a friendly professional or seek help and advice from others who may be going through the same thing. Throughout 2016, the Phoenix Support Group held monthly meetings coordinated by the MSP Senior Counsellor. The Phoenix group also work together to learn new skills and build confidence by participating in the Candle Making program. The Phoenix candles are sold and the donations return to the group to support those in need.

The Mobile Outreach and One Stop Shop project (MOOSS), under the Fiji Community

Development Program (FCDP), came to an end in August 2016. The MOOSS project provided a holistic healthcare service for women and youth in Fiji, with the aim to empower women and youth to access these healthcare services. It filled a gap in health care service provision and education in rural areas, peri-urban and urban areas in Fiji with the design linked to support the SRH goals of the Ministry of Health and Medical Services (MoHMS). MSP have developed strong partnerships with government and non-government agencies to provide specialised and confidential services in sexual and reproductive health care – an identified area of need in our communities. The OSS allows clients to access a range of services under one roof. The extension of the MOOSS project enabled MSP to continue provide critical post rape care services as well as SRH services – supporting women, families, communities and partner agencies to reduce maternal and infant mortality rates nationally.

Achievements

The most notable achievements under the MOOSS project include:



- A total of **10,972 clients (6,324 females, 4,613 males and 35 transgender)** were directly reached through this project. This data is inclusive of **218** people living with disabilities (PLWD);



- As part of this project, **70 outreaches** were carried out of which **54 rural communities** and settlements were visited (and some revisited);



- This project also saw emergency relief efforts during TC Winston. A total of **1,169 clients (800 females and 369 males)** were assisted and the relief team distributed dignity kits, sanitary pads, WASH kits, bras and undergarments, family planning and provided psychosocial support, and medical checks;



- A total of **111 sexual assault clients (107 females and 4 males)** were clinically treated at MSP's One Stop Shop. MSP OSS Forensic Doctor carrying out forensic examination/rape kit on survivors of sexual assault was summoned by the court as a witness 25 times. Under this project all summoned cases were prosecuted and the perpetrators' are now serving jail time. This is a **100% achievement** in the prosecution of perpetrators and certainly some closure for the survivors;



- **285 clients (170 females and 115 males)** were provided legal presentation/advice and information to prevent VAWG during community outreaches and at the One Stop Shop. Some were assisted with application for interim protection orders, accompaniment to health services at MSP, accompaniment/support in court, referrals for specialist services, and accompaniment to the police or were brought to the OSS by Sexual Offences Unit and also assisted in finding a safe space/ house and also trauma counselling/psycho social support;



- A total of **999 clients were provided counselling services (735 females and 264 males)**. This is excluding the Child Helpline Phone counselling;



- **121,969** family planning services and products were delivered in total during this period including **54,968 condoms** (note, this is overall for MSP);



- **23 police officers** including Sexual Offences Unit officers from all over Fiji were trained by MSP at the Cadet Colleague. Participants were trained to manage cases of sexual assault, child abuse and domestic violence with sensitivity and skills and new protocols to better support those suffering from stress, trauma and violence.





Dromunivuku Village

TC Winston Relief Work

SUPPORTING PROJECT/S:

DFAT Medical Relief and WHO CERF Funding for Medical care, psychosocial services and life saving support for survivors of Cyclone Winston; UN Women CERF Providing life-saving services to ensure survivors of gender-based violence are safe and able to heal. (Increased access to urgent health, psychosocial and safety interventions for women and girls)

On 20 February 2016, a Category 5 Tropical Cyclone devastated the Fiji Islands, causing massive destruction to people, infrastructure and livelihoods. At its peak, the Cyclone was estimated to have sustained winds of around 230 kmph making it one of the most severe cyclones ever to hit the South Pacific. Forty-four lives were lost. This was the most costly and devastating disaster that had ever affected Fiji.

MSP emergency response staff were deployed as a mobile clinical team immediately following TC Winston. The Relief Team were in the field every week providing relief response and are currently targeting, Tailevu/Naitasiri (Korovou), Rakiraki, Ba, Ovalau, Cakaudrove Province in the North in coordination with NDMO and the MoHMS.

MSP coordinated with partners, donor agencies and the Government to identify locations for relief, with the team specifically requested to target remote and rural areas. Swift mobile teams were crucial in such areas and as a local agency, MSP had the advantage of its good connections and reputation with the traditional leaders.

During the relief phase the Outreach Team assisted 8,442 clients directly and visited 36 villages, 28 settlements and 25 schools and a market in the Central, Western, Northern and the Eastern Divisions. During this reporting period, MSP also conducted a factory outreach for affected factory workers and provided psychosocial support. In

addition, MSP held a large multi-stakeholder Health Fair at Navunisea District School in Dawasamu, to ensure the disaster affected rural communities had access to a wide range of health and social services.

The Relief Team continued with the relief work during Tropical Depression (TD04F), delivering 90 WASH Kits in Tailevu and Ra. The WASH Kits reached 262 beneficiaries, who were adversely affected during the December 2016 floods, just before the holiday season. MSP continued to closely coordinate its relief efforts with NDMO, MoHMS respective Cluster Groups and the Tailevu, Serua, Rakiraki Provinces, and the Cakaudrove Province in the North.

One of the challenges faced by MSP in 2015 was the insufficient capacity of the agency's sole vehicle in supporting 5 or more field programs. With the expansion of the MSP field team, the vehicle was no longer large enough to transport the full Outreach Team, which can range from 6 to 12 staff members. MSP gratefully received funding from DFAT Relief Funding and with support from the Pacific Women funding. MSP was able to purchase a new 16 seater van. The new van is able to carry team luggage, communications gear, field tents, medical supplies, clinic equipment, VIA equipment and emergency oxygen. In addition, a trailer was purchased to carry the relief and outreach equipment and luggage. Both purchases were crucial in transporting the expanded MSP Outreach Team during the disaster response and in recovery work, which included Medical officers, (Doctor and Nurses), Counsellors,

a Protection Officer, M&E Officer, Community Education Officer, WASH officer, Peer Educators, Logistics, a driver and a Team Leader/Relief Manager. In addition, the Outreach Team often included our MOU partners such as MoHMS Zone Nurses, members of the NDMO or Community Police and participating CSO partners.

Emergency Coordination in Disaster Response:

MSP continue to actively participate in coordination meetings, coordinated with partners and donors and submitted weekly activity reports the different Relief Cluster Groups. These Cluster groups comprising of the: Health and Nutrition Cluster, Safety and Protection Cluster, Gender Based Violence Cluster, WASH Cluster and the Food Security Cluster. Each staff member was assigned a cluster meeting to attend and to engage to submit information and fill in the weekly reports. Each staff member attended and led a sector for MSP and attended these relief meetings. MSP was invited to the regional Pacific Humanitarian Partnership (PHP) meeting held in Holiday Inn in October 2016. It is estimated that 150 participants from all around the Pacific took part in the meeting. The goal of the meeting was to work with the Humanitarian organisations in the Pacific region to effectively coordinate mechanism to facilitate wide collaboration in emergency preparedness and response in the Pacific.



Dromunivuku Village



Naweni Village



Dromunivuku Village



Naweni District Primary School

Community Outreach

SUPPORTING PROJECT/S:

Mobile Outreach and One Stop Shop (MOOSS) Phase 2, funded by Fiji Community Development Program; Providing Awareness to Children Helping End Discrimination (PATCHED) funded by the UNW ERAW Facility Fund; and Department of Foreign Affairs and Trade (DFAT), Australia under its core funding program for Women's programs



Komave Village - Votva Village - Coral Coast



Delaitokataka Settlement One Stop Shop



Komave Village - Votva Village - Coral Coast



Delaitokataka Settlement One Stop Shop

The Mobile Outreach and One Stop Shop (MOOSS) project was aimed at reducing morbidity and mortality related to sexual reproductive practices, in particular the reduction of sexual abuse, unplanned pregnancies and STI/HIV. The PATCHED project provided awareness to youth and children on gender equality and child's rights, to end gender discrimination and reduce Violence Against Women and Girls (VAWG).

In recognition that Violence Against Women and Girls is prevalent across Fiji, both in urban and rural communities and across ethnic groups, MSP provides information and services on rights and child protection as part of its mobile clinical outreach program. MSP Outreach includes information sessions, followed by clinical services, followed by small focus group and one on one sessions with clients. MSP also undertakes follow up visits, and where this is not possible, works in partnership with the MoHMS zone nurses (using a client consent form).

In 2016, the Outreach Team coordinated 91 community outreach visits, compared to 47 in 2015. In addition a total of 45 school outreach including 16 primary schools and 24 secondary schools were carried out.

MSP's specialised health teams work with high risk and vulnerable groups (example, girls, youth, sex workers, vulnerable women, children at risk, sexual assault survivors, LGBTI's (Lesbian, Gay, Bisexual, Transgender and Inter-gender) and minorities) to promote awareness and increase access to key clinical and social services. MSP mobile outreach teams provide professional and confidential clinical

services to remote and isolated groups, working in close partnership with local government, Ministry of Health (MOH) Zone nurses and community police under formal Memorandum of Agreements (MOU's). MSP ensures that prior visits, as well as follow ups, are conducted with the Provincial Council, to avoid clashes with community programs and to engage support and awareness from the leadership.

Designed with particular attention to the needs of women, children and youth, MSP's services are offered to both individuals and groups in urban and rural settings across Fiji and in outer islands of the Pacific. This model can be replicated in other Pacific Island Countries (PICs) with similar gender and development challenges.

There was some disruption in program delivery in outreach deployment due to the Category 5 Tropical Cyclone. MSP emergency staff were deployed as a clinical team immediately following the disaster. MSP was able to channel funding and obtain other resources to quickly, effectively, efficiently provide needed relief in the worst effected areas. MSP provided an immediate medical response in partnership Ministry of Health and Medical Services (MoHMS). The MSP relief team was in the field every day throughout the week, providing services. Types of services including the mobile medical outreach services, WASH, psychosocial trauma counselling, vegetable seed distribution, women's dignity packs/toiletries/sanitary items, clothing for babies and women's under garments. While the managers attended interagency Cluster meetings/briefings, and mobilized support for relief efforts. An extension on projects was requested and granted by all donors, to enable MSP to focus on disaster response in 2016.

This year saw the expansion of the One Stop Shop's free counselling services, allowing counsellors to assist individuals in working through the emotional pain of being a survivor or witness to a crime. The professional counsellors listen and support individuals and families suffering as a result of traumatic events such as: sexual violence, physical abuse, bullying, or witness to parental violence, those living with drug/alcohol addition, or addicted parents, parental neglect, general trauma and gender violence or abuse.

A lawyer was hired as the first MSP Protection Officer with skills in human rights gender Child Protection and law. The Officer provides legal aid and support to survivors as well as training and awareness on human rights, ending gender based violence, and child protection. The legal services provided as part of the One Stop Shop model enable MSP to assist clients across a number of professional areas. MSP provides the following legal advice including advice on child adoption, domestic violence restraining orders (DVRO), Sexual offenses legal support/advise, post rape care and support, child and spouse maintenance, child custody, child protection (advise on child rights) and witnessing legal documents.

MSP's community outreach was extended this year with support from DFAT, MSP was equipped with a 16-seater van that was used in community outreach and also catered for MSP's expanded team of professionals. Upon reaching some locations, the team still had to walk through hilly and rough terrain, carrying medical supplies to reach the interior villages.

School Outreach

SUPPORTING PROJECT/S:

Child Helpline, for the MWCPA through the Information, Technology and Computing Services of Ministry of Justice, Government of Fiji Providing Awareness to Children Helping End Discrimination (PATCHED) under the UN Women Pacific Women's Ending Violence against Women (EVAW) Facility Fund



Saint Bedes College, Savusavu school outreach

MSPs mobile outreach team has been providing awareness to youth and children on gender equality and child rights in order to reduce gender discrimination and end Violence against Women and Girls (VAWG), using a combined strategy that utilizes Behaviour Change Communications tools and service provision.

The core outreach team is certified with limited authority to teach under the 'Fiji Teachers Registration Authority' (FTRB). They team encompasses the MSP Senior Counsellor, Doctor, Nurse, Child Specialist Officer, WASH officer, and Community Educator and Driver. The team are trained to coordinate services engaged to support child victims, including developing and coordinating case plans in liaison with other partner agencies, such as the Ministry of Education, Sexual Office Unit, Social Welfare, safe homes and partner NGO's.

MSP has been working closely with the Ministry of Education to increase knowledge and understanding on Child Protection and raise awareness about the Child Helpline in Fiji. MSP received an official approval from the Ministry of Education to collaborate with the

Ministry's Policy Unit to campaign and conduct awareness in Fiji Schools. MSPs outreach team is now registered under the FTRA. This approval has enabled MSP to deliver health services and rights information to women, girls, youth and children in their schools (and school communities as noted under community outreach section). Other topics of awareness include the One Stop Shop free service/s for women and young people, STI/HIV awareness, safe birthing, Rheumatic Heart Disease (RHD), WASH and reproductive sexual health through the Girl Empowered booklet.

In 2016, the School Outreach Team coordinated 45 school outreach. These including 16 primary schools, 24 secondary schools, 3 tertiary schools and 2 special schools were carried out. Other outreach venues include: Fiji Vocational Training Centre for Persons with Disabilities based in Brown Street, Hilton Special School Methodist Conference, Hibiscus Festival, Homes of Hope Scream Camp in Wailoku, Fiji Vocational Training Centre for Persons with Disabilities based in Nabua, SRHR training at Pacifika Campus Final Year Pharmacy Fiji National University students, Corporate outreach in Mind Pearl and market outreach in Rakiraki.

The Girl Empowered (GE) booklet has everything young people need to know about gender, puberty, sexuality, contraceptives, pregnancy and more. It is designed to help young people make informed choices and grow into empowered young adults, ready to face the challenges of today. It is important for young people to understand how their body changes and how to protect their reproductive health, why so they can grow up into healthy, happy, self-assured community members. If women and girls are education, society and its economies benefit. We provide information and services to promote healthy lifestyles and health choices, so girls are educated and equipped to achieve their dreams! MSP recognizes that it is just as important to ensure boys are included in the SRH discussion and educated on why gender equality and access to sexual and reproductive health services and information is important, not only for themselves but for the empowerment of all women in their lives. Young men also obtain copies of the Girl Empowered booklet and are enthusiastic to learn how to support their girlfriends and wives to be.





Child Helpline

SUPPORTING PROJECT/S:
 Child Helpline, for the MWCPCPA through the Information, Technology and Computing Services of Ministry of Justice, Government of Fiji



Child Helpline Fiji is a free, confidential counselling and support service for children and young people across Fiji and Rotuma. It specifically aims to respond to the needs of Fijian children and young people, enabling them to develop strategies and skills to better their own lives.

Child Helpline Fiji, designed and launched by MSP, is the first national helpline in Fiji. Supported by the Government of Fiji, and by the corporate sector as well, it will be an ongoing legacy. It is indeed going to be part of the country's Child Protection system for the long term.

The Ministry of Women, Children and Poverty Alleviation have extended a working agreement with Medical Services Pacific for the implementation of the second year of the CHL project in April 2016 and have verbally agreed to extend the service in 2017.

The Child Helpline is managed by the MSP Senior Counsellor, who supervises, trains and debriefs four full time counsellors. The team has three

I-Taukei speakers (2 female and 1 male) and 1 native Hindi speaker and 1 native Rotuman counsellor. There are currently four females and one male counsellor working on the CHL team during this reporting period.

The national telephone counselling service since inception has a total of 21,482 calls. In 2016, genuine (counselled and referred) calls totalled 1,502 compared to 679 in 2015.

The MSP Outreach Team continues to visit schools to create more awareness on Child Protection and the free Child Helpline Services. This has been an ongoing awareness campaign to allow the children of Fiji to take advantage of the free service that has been provided by the government. MSP Outreach Team visited 45 schools in 2016. Students are invited to call the Child Helpline or to arrange to speak to a counselor if they suspect experiencing abuse or bullying, or if they would like more support.

Indonesian Delegates visit MSP Child Helpline

MSP in Fiji was honoured by a visit by the Indonesian Minister of Women Empowerment and Children Protection, Honourable Yohana Susana Yembise, who visited our office and clinic on the 19 July 2016. She was accompanied by a delegation from the Fiji Ministry of Women, Children and Poverty Alleviation (MoWCPA) and a delegation from the Indonesian Embassy based in Fiji. The Minister was very impressed to learn about the Child Helpline and quality of services that we provide at MSP and in comparison she stated that:



“In Indonesia we have 250 million people to look after, half of the population are women and 87 million are children. The country is so vast so it is a challenge working under my portfolio. It's not the same here. You have equality already, we don't have equality yet. However, we have learnt a lot from Fiji. The quality of service here is well organised.”



After her tour around MSP, a presentation, and a cake cutting ceremony, the Delegations had a luncheon at MSP before heading to visit the Queen Victoria School.



Indonesian Minister



Delaitokatoka Settlement CHL



2016 NEW PROJECTS

The VIA Project: “Eradicating Cervical Cancer among young rural women in Fiji”, funded by Canada Fund - (ongoing)

In 2016, MSP received two small 3 month grants. These were: The VIA Project: “Eradicating Cervical Cancer among young rural women in Fiji”, funded by Canada Fund and “Health education and community outreach health services for Zika and other communicable diseases”, funded by World Health Organisation (WHO).

Currently the Visual Inspection with Acetic Acid (VIA) project has supported the MSP Nurse Practitioner to undertake specialized VIA and Cryotherapy training, prior to the provision of this service in rural communities. Secondly, the project has installed a security camera to monitor the external building during business hours, to ensure that the clients and staff assisting sensitive domestic violence cases are supervised. Next, panic alarms have been installed in the clinic and counselling rooms, to enable security to be called in case of a situation with a client or their relatives or the public. Finally, the whole medical team was trained in the VIA and Cryotherapy procedure by the MHMS Nurse Practitioner. The medical team has commenced providing the VIA inspections and has referred cases where needed to the Cancer specialist in the CWM Oncology department. The new trainees will practice with the supervision of the MHMS until they have done ten cases and completed their supervisory conditions.

The project's three core components include:

- 1) Preventing Reproductive Tract Cancers (cervical and breast cancers) through VIA testing;
- 2) Mobile Clinical Outreach, that will provide Sexual Reproductive Health (SRH) clinical services and
- 3) Empowering women to access services and testing through awareness and education

Performing VIA and cryotherapy can prevent women from dying from cervical cancer. For the screening program to be effective, women are empowered to access testing for early detection of precursor lesions that may develop into cervical cancer. MSP in partnership with the Ministry of Health and Medical Services (MoHMS) in Fiji are implementing VIA consultations and services.

The project was aimed at achieving results, such as:

- Reduction in numbers in new cases of cervical cancer
- Early detection and treatment for cervical cancer and breast cancer
- Improved health seeking behaviors of reproductive age rural women
- Number of VIA tests increased nationally.

The VIA project is saving women's lives in Fiji

Health education and community outreach health services for Zika and other communicable diseases, funded by World Health Organisation (WHO) - (ongoing)

Zika virus infection during pregnancy is a cause of microcephaly (babies born with abnormally small heads) and other congenital cerebral malformations and developmental disabilities. With no vaccine for Zika, the most effective protective measures are the control of mosquito populations and the prevention of mosquito bites. Therefore, with WHO's grant, MSP deployed a team to Taveuni in the Northern Division to conduct medical outreach, implement health-based education and distribute Pregnancy Packs (“Zika Packs”) across the TCWinston affected areas. This was particularly important in hard-to-reach communities and those with ongoing vulnerability to environmental and biological hazards, including outbreaks of vector-borne diseases such as Zika, chikungunya and dengue viruses.

The projects' aim was to:

Administer pre- and post-intervention questionnaires in each village to monitor change in knowledge about Zika virus and other important outbreak diseases;

Provide health education to community members in collaboration with village health workers regarding the prevention and control of Zika virus/ all arboviruses, specifically what personal protective measures can be taken against mosquito bites, the environmental clean-up activities inside and around the home and community to reduce mosquito breeding sites, and the clinical symptoms and signs of Zika virus, dengue and chikungunya infections;

Distribute Pregnancy Packs in the Northern Division;

Support Divisional and Sub-divisional surveillance activities for arboviruses and other diseases by reporting suspected cases of Zika-like illness, dengue-like illness and acute fever and rash, and taking clinical specimens for testing as needed; and

The Medical Clinical Team will also provide communities with integrated outreach services including immunization, Integrated Management of Childhood Illnesses, reproductive health care, maternal, antenatal and postnatal clinics and paediatric care, and services to address communicable diseases.

Girl Empowered Awareness & Marketing

During the 2016 Vodafone Hibiscus Festival, MSP launched its second edition of the 'Girl Empowered' booklet and also promoted the new ISO mobile application.

The 'Girl Empowered' booklet is a discussion tool and practical guide for youth. It covers topics such as sexual, social and reproductive health, social support and human rights, and is designed especially for girls and young women in Fiji. New sections in the second edition include Counselling, Dealing with Bullying, Preventing Suicide & Being Different is OK.

MSP revised the Girl Empowered booklet and a mobile application in a bid to raise awareness about SRHR and mental health in Fiji. The mobile app, 'Girl Empowered', is the second edition of the application and is now available in booklet and by mobile application for android phones and iPhones.

Girl Empowered is designed primarily for teenage girls. However, both boys and girls benefit from the information, which is provided through schools to all genders. MSP is developing materials specifically

targeted for boys in 2017. MSP promoted the second edition of the Girl Empowered booklet during the Hibiscus Festival, putting it in a float. The truck was decorated with bright yellow and lime fabrics, balloons and carvings of the hibiscus flowers, and everyone braved the rainy weather armed with their bright yellow umbrellas. This was the first that MSP took part in the float procession and this activity required coordination with Vodafone Hibiscus Committee and MHMS. All staff and volunteers were on board to make this a successful event for the organisation. Some worked long hours a day before the parade to ensure the truck was ready for the float procession. All staff and volunteers were proud to showcase MSP's first ever float and the new Girl Empowered booklet and mobile application.

MSP also partnered with MHMS Wellness Centre to put up a Family Planning Awareness Booth in the MHMS Tent at the Festival. The staff and volunteers provided a broad range of services including family planning and clinical services, awareness on child protection, counselling and other services.



Candles and cupcakes

16 Days of Activism Program

"Candles and cupcakes" week was created to raise funds to support the Phoenix program. Candles and Cupcakes are mainly sold over the International Human Rights period known as the "16 days of activism" from 25th November to 10th December 2016. This is an international advocacy week instigated by the United Nations, which is focused on raising awareness to end violence against women and girls. However, this sales event now needs to be expanded to be an ongoing sales project to allow MSP to raise much needed funds to be able to continue to support the Phoenix program (e.g. underprivileged families and clients in need). MSP will continue to sell candles on a regular basis, utilizing our community outreach, market outreaches, corporate outreaches, through the one stop shop and during youth open days.

During the "16 days of activism" a total of 520 candles were made. These were 100 votive glass candles, 20 boxes of 6 candles (120 pieces) and 100 packs of 3 candles (300 pieces). Approximately, 401 candles were sold. A total of 300 cupcakes were made/ordered and all got sold out to corporate organization and walk-in clients/customers. Total revenues generated from candle sales were \$1,134.

In order to make this project an ongoing success, MSP must find funds for a dedicated project manager, who has allocated time to spend on this project and make sure we are meeting projected targets. This would include maintaining stock quality and stock levels, to network with retailers and to make this project a priority for MSP and for the continued success of the Phoenix group.

Communications and Media

Press Coverage

MSP was mentioned in the media 10 times this year, with a link here <http://fijisun.com.fj/2016/08/25/mobile-app-on-womens-issues-here/> on the 25 August, an article on "Mobile App on Women's Issues" also printed in Fiji Sun.

Web analytics

The MSP website had **6,373 visits** to the website in 2016, with an average total of 209 visits overall.

MSP Facebook

MSP's Facebook Page had a total of **3,498 likes** on the Facebook for this year. The Child Helpline Page had a total of **465 Likes** in 2016.

Publications

There were many new initiatives and actions undertaken during this reporting period. MSP produced and developed new Information, Education and Communications (IECs) including a Gender Based Violence Flyer and an Unplanned Pregnancy and Safe Abortion awareness flyer.

Expansion and Replication

The One Stop Shop integrated post rape care program has functioned effectively to ensure women and girls in Fiji receive access to health care, counseling, legal aid and are able to achieve justice. The MSP One Stop Shop has contributed towards the increased number of successful prosecutions for sexual assault and child abuse in Fiji. The program has directly assisted over 117 sexual assault survivors. In view of this, the Fiji Police Force Sexual Offenses Unit and MWCPA have requested if MSP can provide wider services including opening these services in Nadi and Labasa which are also hotspots for Sexual and Gender Based Violence and where there are increasing rates of child abuse and offenses against minors. The One Stop Shop service would make such a significant difference in these locations.

In 2017, MSP will implement the project "Protecting Our Women, Engaging Rights" (POWER) in Labasa, Northern Division, funded under the Global Acceleration Instrument (GAI) for Women, Peace and Security and Humanitarian Action in partnership with UN Women. With an aim to increase protections for women and girls, action human rights provision, enable women's participation and agency, improve health and social services and security context and better enable the prosecution of sexual offenders. MSP will provide an integrated 'wrap around' service model for survivors, providing medical care, counselling, legal aid, safe referrals for emergency shelter and other services. The office set up will enable MSP to provide a rapid response in times of disaster.

Capacity-Building

One of the key activities of MSP is to build capacity in healthcare awareness and services in the community, government and other key stakeholders. In recognising the importance of capacity building to effect positive change and to provide stronger services, MSP itself actively pursues capacity building for its health staff.

As part of MSP's mandate to transform lives by promoting healthy choices, MSP implements a communications plan and undertakes a range of Behaviour Change Communications activities at the community level. In addition, MSP provides awareness and training in reproductive health and human rights to a range of stakeholders including the Ministry of Health Zone Nurses, Police, Teachers, students, lawyers and Companies. MSP is often requested to deliver awareness to NGOs, companies and government teams as well as students at FNU. MSP's skills in forensic medicine and counselling for post rape care has created a learning centre for medical students and social workers from Fiji and abroad.

Partners, Medical Interns and Volunteers

MSP receives medical interns from Universities across the United Kingdom including Cambridge, Leeds, Manchester and also from Auckland, New Zealand.

MSP delivers workshops, media interviews, and presentations to corporate and professional audiences and MOU partners in areas of expertise. MSP is an active member of the NCCC and is working well with CSO and NGO members who are focused on child protection issues in Fiji. MSP has also maintained great professional relationship with partners in the last three months.

MSP has collaborated with a range of partners and attending meetings with the Safety & Protection Cluster, the Health & Nutrition, Food Security, WASH, and GBV clusters and partnered United Nation Agencies such as UNICEF, UN Women, UNOCHA and UNFPA during the relief, recovery and rehabilitation period.

During this reporting period, MSP has been actively involved in capacity building program for its staff of 21 persons. MSP conducted a Child Protection and Girl Empowered training workshop for staff, with the aim of orienting and refreshing staff on the policies and procedures in place at MSP with regards to Child Protection. In addition, MSP provides quarterly capacity building and policy awareness workshops. MSP also provided workshops on MSP policies and procedures including IT, Communications, Procurement, Finance, confidentiality, human resources etc.

MSP was part of the Pacific Women Shaping Pacific Development overview of the counselling services in Fiji and the Pacific. MSP counsellors with counsellors from partner NGO's discussed a range of topics around

counseling, including the counselling services currently operating or planned in the region; what models of counselling have been evaluated as effective; which approaches are based on rights and gender equality frameworks and what education and training providers and qualifications are, or could be, made available.

MSP's Program Manager and M&E Officer took part in a week long 'Fiji National HIV and AIDS Prevention & Care CSO Capacity Building Workshop', held in Suva, Fiji from the 19-23 September 2016. The workshop was on project design and was facilitated by the MHMS and the UNAIDS. The Doctor and ED attended the Fiji Obstetrics and Gynaecology Conference in Lautoka in September.

MSP's Senior Counsellor attended a two day work at the Pearl Resort, Pacific Harbour organised by the MWCPA. The workshop - 'Divisional Consultations for Fiji Service Delivery Protocol for Working with Gender-Based Violence Survivors' was a consultation with major stakeholders. As part of the consultation MSP presented on its services and current practices with GBV cases. MSP presented on the One Stop Shop, Child Protection, VAWG/GBV, 24/7 Child Helpline and Counselling. MSP was also identified as a focal point in the bigger group and took lead in the discussion on the GBV Referral Pathway. The main aim of the consultation was to establish a referral pathway for GBV survivors and to strengthen networking with other stakeholders.

MSP said farewell to our AVID volunteer, Sr. Lulu Wakelin who as an expert Sexual Assault and GBV nurse and who worked tirelessly to complete the new MSP Clinical Operations & Procedures manual and to conduct key training with the staff to ensure quality service provision. MSP also welcomed another AVID, Ms. Ayesha Lutschini, working as the MSP Gender and Education Officer, to assist with the development and finalization of these training manuals. Ms Lutschini put together the Child Protection Training Manual and the Girl Empowered Training manual.

MSP was pleased to have Ms. Rachel Scotland volunteering with MSP in the role of Project Officer, providing valuable support in terms of reporting and administration. During this period, MSP farewelled volunteer Ms. Alison Page who is joined MSP for 3 months in the position of Training & Administration Advisor, working with the Executive Team and providing support for our capacity building activities. MSP welcomed new staff member, Ms. Akilah Mancey Harper as the Communications, Marketing & Social Media advisor. Akilah has several years of experience in Media and Communication and is from Guyana. She is attached with MSP on a voluntary basis initially before successfully applying for the full time role.

In 2016, MSP recruited a range of qualified and enthusiastic new staff. MSP recruited staff for the Fiji Relief program including a Relief/Operations Manager, a Counsellor, a Nurse with expertise in Integrated Management of Childhood Illness, a Doctor (GP) and two new Child Helpline Counsellors (1 male and 1 female), to complement the CHL Team to ensure the CHL call centre was running for 24 hours a day 7 days a week.



Stakeholder Activities / Management

Formal partnerships with key stakeholders are an important strategy to providing effective health services to those in need. The ongoing working relationship, consultation and constant communication with the MHMS Zone/sub-divisional medical officers and nurses, Provincial Councils, Local Government Administrators, Advisory Councillors, Ministry of Women, Children & Poverty Alleviation, Ministry of Education – Divisional Education Officers and school administrators, village Turaga ni Koros (TNK), and other MOU's with government and other new CSOs has helped MSP to coordinate outreach services to markets, schools and villages, settlements and communities.

MSP has a Memorandum of Understanding (MOU) with the Ministry of Health and Medical Services, the Fiji Police Force, the Ministry of Social Welfare, Women and Poverty Alleviation, and the Ministry of Education, Heritage and Arts. These formal protocols assist MSP to maximize health resources and enhance multi stakeholder coordination mechanisms and strengthen local capacity. It has been an important strategy for providing coordinated effective and sustainable health services to that in need.

MSP has enjoyed a strong working relationship with the MOU partners and networks such as:

- Survivor Advocacy Network Fiji (January 2017)
- Haus of Khameleon (pending March 2017)
- Guadalcanal National Council of Women, Solomon Islands (2016)
- Plan International (2016)
- MOU MWCPA, Digicel, Telcom, Vodafone
- Sea Mercy USA (January 2015)
- Partners in Community Development (February 2015)
- FNU Dental Students Association
- The Salvation Army (December 2012)
- Aspire Youth Network (February 2013)
- Empower Pacific (March 2013)
- Homes of Hope (May 2013)
- Fiji National Council For Disabled Persons (affiliated)

The MSP Executive Director (ED) was actively involved in leadership and coordination meetings and co-development and editing of the MSP Domestic Violence Training Manual. The ED also developed new policies and reviewed the new draft policies in preparation for full application.

MSP was heavily involved in the coordination meetings for Health, Protection, WASH and Education Cluster Meetings following Tropical Cyclone Winston. MSP was requested to be part of the consultation, planning and mapping of health, psycho-social and WASH related response to those affected by the TC Winston. MSP staff have been attending the regular weekly meetings/ consultations during the entire relief period and providing weekly reports. MSP worked with UNICEF to distribute WASH Kits to affected communities and worked with the Ministry of Health through the Health Cluster in providing health care, distributing Dignity Kits and providing general SRH services to affected communities.

The MSP Forensic Doctor has received numerous summonses in 2016 to present in court as witness for these cases. The Program Manager attended to regular monthly grantees meetings with UN Women presenting on MSP's work in schools and communities and consultations/ discussions with other EVAW grantees. The executive director, also attended a wide range of meetings, and delivered speeches at key events including the launching of the CHL 24 hour call center.

MSP produced a range of relief proposals for funding consideration and lobbied strongly for funding. MSP liaised with Plan Australia to bid for the Australian Humanitarian Application Funding (unsuccessful but it raised our profile internationally). MSP also signed grants and arrange relief funding from DFAT, UN Women and WHO to respond to the national disaster and increase the size of the responding team. This includes funding for a new vehicle and trailer and a backup generator for the compound.

MSP also has a pending bid in with the British High Commission for the ongoing provision of training to Police Officers as per our MOU with the Fiji Police Force. There were many new initiatives and actions undertaken during this reporting period. MSP produced and developed new IECs including a Gender Based Violence Flyer and a Safe Abortion information flyer.

MSP is also negotiating a MOU with UNICEF for ongoing support and cooperation in the area of child protection. MSP finalised the MSP Clinical Operations Manual of Procedures and the Procurement Policy this period. In addition, MSP is working on finalizing the CHL call centre manual and the counselling manual of procedures. MSP has updated a range of Human Resource Policies and Procedures, which will be presented to the board in the next quarter.

Management MONITORING AND EVALUATION

Medical Services Pacific (MSP) continued to provide access to health care and social services for women, youth and children and disadvantaged groups across Fiji. The statistics outlined in this report reflect figures generated from various projects and activities undertaken during the reporting period of January 2016 to December 2016. The MSP program was supported by

the Department of Foreign Affairs and Trade (DFAT), the United Nations (UNPFA, UNICEF, UN Women and WHO), the Canada Fund, the Ministry of Women, Children and Poverty Alleviation (MWCPA), the Ministry of Health (MHMS) and Medical Services, the Ministry of Education, Heritage and Arts, the Uplift Project, Rotary and Rotaract Fiji and AseloCare Fiji.



Table 2 - Specific Services Delivered, distributed and Performed 2016

The table below depicts services delivered during 2016.

Specific Services delivered, distributed and performed	
Contraception	
Emergency Contraceptive Pills	758
Oral Contraceptive Pills	140
Depo (3 month)	55
Implants	10
IUD	18
Female Condom	3,738
Male Condom/lubricants	28,720
Female reproductive health	
Cervical Screening Test (first time)	218
Cervical Screening Test (routine)	290
Cervical Screening (abnormal) treatment and referral	21
Pregnancy Test	30
Family Planning Consultation	480
Maternal Child Health	113
ANC consultation	20
Post Natal Consultation	3
STI/HIV services	6
STI/HIV Consultation & Blood Test	46
STI/HIV treatment	18
General services	
General Consultation (BP, Height/Weight, Sugar)	1,407
General Counselling	469
Medical Check-up/Full Medical Report	23
Medical Service Referral	159
Clinical Services to Sexual Assault Response Clients (SAR)	
Sexual Violence against Women and Girls (medical)	113
Sexual Violence against Men and Boys (medical)	7
Information and awareness	
Information sessions on Reproductive and Sexual Health, Family Planning, Gender Based Violence Support and referrals	15,828
Other services	5
Legal Aid	299
Group Counselling	308
Sexual Assault Response Survivor and Family Counselling	131
Breast examinations	461
Domestic violence	8
HCT Counselling	44
Total	53,946

Services performed, distributed, and delivered included: family planning services including condom distribution, access to depo injections, hormonal pills, IUD/Loop, family planning consultation, medical examination, cervical screening, STI and HIV counselling and testing.



Counselling

Table 3 - Counselling Clients-Annual 2016		In Person	By Phone	Group	Male	Female	Total Clients
1	Child Counselling	21	0	0	12	9	21
2	Gender Based Violence	89	15	6	27	83	110
3	General Counselling	214	51	204	157	312	469
4	Phoenix Support Group	10	0	11	6	15	21
5	Sexual Assault Response Client Counselling	77	0	2	16	63	79
6	Sexual Assault Response Family Member Counselling	46	0	6	12	40	52
7	Ministry of Women Referral	20	0	0	6	14	20
8	Suicidal & Self Harm	6	7	0	9	4	13
9	Mental Health	39	0	78	60	57	123
10	HCT Counselling	43	0	1	25	19	44
11	Child Helpline – Counselling (genuine) callers	0	1502	0	493	1009	1502
12	Total	565	1575	398	823	1625	2454

The above table summarises the total number of clients seen by the Medical Services Pacific (MSP) counsellor in 2016. In summary, 565 were counselled in person, 1575 clients were counselled on the phone followed by 398 clients were had a group counselling session with MSP's counsellor. It illustrates that 469 clients received general counselling at MSP office, 131 clients received Sexual Assault Response (SAR) counselling, and 44 clients received HCT counselling. A total of 823 male and 1625 female clients were assisted during the reporting period (January – December 2016). There were 1502 genuine telephone calls recorded through Child helpline (toll-free number-1325) of which 493 were male and 1009 females.



Child Helpline Call Statistics: January 2015 – December 2016

Table 4 - Summary of Calls logged

Cumulative (to date)	Achievements for the Child helpline to date:	Annual 2016	Annual 2015
2,181	Genuine calls	1502	679
4,514	Prank calls	2441	2073
5,304	Silent calls	2720	2584
6,871	Test calls	5532	1339
2,612	Voice mail	592	2020
21,482	Total Calls	12,787	8,695

Total Child Helpline calls received to date is 21,482

To date, from January 2015-December 2016, Medical Services Pacific (MSP) has received a total of 21,482 calls. Of the above, a total of 2,181 were genuine, 4,514 were prank, 5,304 silent calls, 6,871 test and 2,612 voice mail calls were received. Of the 2,181 genuine calls, 741 were male whilst 1,440

were female callers respectively. Furthermore, from January 2015 to date, a total of 943 callers (43%) were Fijians of Indian descent, 1117 (51%) were I-Taukei and 121 (6%) were other ethnically identifying callers.

KEY -Definition of call types:

Genuine calls: are calls where the counsellors has helped the caller, counselled, referred or provided information to the caller.

Silent calls: are those made by children, who call to hear a voice but don't speak. They want to know if someone is there, and they will often call a few times before speaking to the counsellor.

Test calls: are made by adults and children, testing the service to see if someone is answering. Test groups are also set up to check the service. MSP has two accountability groups in two schools whose role it is to test and verify the services of the CHL.

Prank calls: are nuisance calls where the caller may be joking, rude or in-genuine.

Child Helpline calls by Division - Annual 2016

Of the 1502 genuine calls in 2016, 38% of the calls have been received from the Central division, 26% from the South East, 17% from the South-West and 9% from North West followed by 8% from the Northern division of Fiji. A total of 1% of the calls in the fourth quarter was identified as anonymous as the caller did not wish to disclose their location.

Reasons for Calling Child Helpline (1325) – Annual 2016

The genuine reasons for contacting the call centre in 2016 has increased as compared to 2015. Neglect case in 2016 (365) has increased from 2015 (253) followed by physical abuse 268 versus 136 in 2015, emotional abuse-332 in 2016 as compared to 177 in 2015, sexual abuse cases in 2016 has increased (65) as compared to 2015. The gender-based violence was not captured in 2015 however; 812 cases were noted in 2016.

Legal Aid Services/Human Rights-Annual 2016

A total of 299 legal aid services provided by the MSP legal officer: 119 clients sought child protection advice; followed by 52 general legal aid advices. 32 clients came in the clinic or met with the MSP lawyer to discuss family adoption issues. 22 clients were assisted with child and spouse maintenance. 15 cases of domestic violence was recorded for the year and a further 10 Sexual Assault response (SAR) clients were legally assisted. 7 clients received social welfare child assistance. In regards to legal representation the MSP lawyer attend to hearings/mentions for Domestic Violence Restraining Order's (DVRO) for 5 clients, further 2 cases were referred to the small claims tribunal and 1 case of marriage dissolution.

Cumulative Sexual Assault Response Cases treated by MSP clinic from Nov 2012 - December 2016

During the reporting period from Nov 2012 - December 2016, a total of 155 (38%) clients were medically treated for rape/attempted rape. 62 (17%) had blood examinations conducted, 72 (18%) were defilement under the age of 16, 55 (14%) indecent assault, 22 (6%) were sexually exploited, 13 (3%) received medical treatment for incest, 8 (2%) were sexual assault response clients who underwent medical examinations for physical assault, 6 (2%) needed medical attention for parental neglect, 6 (1%) cases were recorded for abduction and received medical care from the Medical Services Pacific and 2 (1%) accessed medical treatment for sexual harassment. A total of 2 missing persons underwent medical examination.



MSP FIRSTS!

Most Significant Change Stories 2016

New funding acquired in 2016

Family Planning Choices

I am 31 years old and am now a mother of 3 beautiful girls. I am also very active in sports and I love playing basketball. I am the only one working in my family and my husband stays at home to look after my three girls. We both participate in sports. My husband also plays in a men's basketball team. The MSP representative came to our church and talked to us about reproductive health and also touched on the different types of family planning services. My youngest daughter was 3 years old then. I was only using condoms with my husband to prevent pregnancy but at times we run out of supply. I am not ready for another child at the moment and I want to go back to sports. I have just been gaining a lot of weight because I haven't been training again. After the family planning session from the MSP representative I got so interested about the IUD. So I went back to ask more questions regarding IUD or copper T. I ended up booking myself to their clinic for an IUD insertion. I went to MSP clinic at Waimanu Rd, had my IUD insertion done which did not even hurt. Now I would say from a size 20 to a size 12 again, I am jumping around in the basketball court enjoying my games with no worries. I am also enjoying my bedroom life and not worrying about getting pregnant any time soon. My youngest daughter is now 6 years old and is in school. A big Vinaka Vakalevu to MSP.

Broad Awareness about Health/Diseases

I am a member of this Muslim League and the women's group such as this has meetings and gatherings often. Our leaders invite speakers to come and talk to us every now and then. The MSP team was invited to come down and we only know that they will talk to us about health. When the team MSP came they were all women which we liked so much. They talked to us about our rights and also about family planning and Pap smear test. Before I only know to go test and check but now MSP team talked to us about the importance of checking up, I learnt a lot from the team and then we got the free medical and the doctor helped me understand more and I had my Pap smear checkup which did not hurt. I would highly recommend MSP to my relatives, because it has certainly put my mind at ease that I am OK and I know nothing is wrong with me after my checkup. I'd like women to know and feel free to have a checkup. The MSP Doctor makes us feel comfortable and answers all my questions. High Five to your service.

Phoenix Counselling Support

I am now 19 years old and I live with my father and 4 other siblings, being the eldest child I have been silently carrying a heavy burden since 2005. My mother has mental illness and she left us when I was young... For 9 years before I came to MSP, I was had issues and problems. I have experienced sexual assault and Domestic Violence. My parents were separated and my father was unemployed. Being the eldest in the family I had a big responsibility of providing for my 4 siblings. I wanted so much to stay at school and study because I know that to study hard I will be able to provide for my siblings. I was referred to MSP for counselling and medical examination. In 2014, I came down to MSP for my first counselling session. I have never talked about my problems with anyone. My one to one confidential session with the counsellor helped me open up and spill every load I was carrying. I talked about a lot of things and the counselor listened to me. I felt relieved after the first session but it never stopped I kept coming back for more sessions. Counselling helped me a lot, I became member of their Phoenix support program and I came to make candles with the other survivors. I now get full support for my transport also I was given my Hygiene packs once because I was going to boarding school. With the candle support I now have completed my Year 13 level and am going to do further studies at University. I will not forget what MSP have done for me and my future. Thank you MSP

MSP also received funding for the implementation of the VIA Project: "Eradicating Cervical Cancer among young rural women in Fiji", under Canada Fund and support for the "Health education and community outreach health services for Zika and other communicable diseases" from the World Health Organisation (WHO). In addition to this MSP was awarded funding support from DFAT and the Pacific Women Shaping Pacific Development Support Unit at DFAT for core programs specifically those focused on sexual reproductive health services and survivor support. It covers for some key positions and operational costs of MSP and supports the professional salaries of the medical staff of the One Stop Shop.

MSP was awarded funding to provide Sexual Reproductive Health and Rights and Social Services in the Northern Division in 2017. The project, Protecting Our Women, Engaging Rights (POWER) is funded by UN Women and the Global Acceleration Instrument and supports Women, Peace and Security.

Vinaka Donors!

MSP FIRSTS

In conclusion - Our Impact – our Firsts !

A rights based sexual reproductive health agency providing innovative solutions. Established the first integrated and dedicated services for survivors of sexual violence (One Stop Shop/Post Rape Care Clinic) providing medical services, counselling and legal aid and specialist in child survivors. Assisted over 470 sexual offenses cases working under formal MOU with the Fiji Police Force, supporting increased access to justice for women and girls (first NGO to have MOU with Police). MSP runs the national Child Helpline, the first 24/7 service in the Pacific, strengthening national child protection system received 30,000 calls to date. MSP has seen over 87,476 patients and is the only NGO to be authorised to provide Post Exposure Prophylactic (PEP) for survivors of rape to prevent HIV infection. We are the only operational pro-choice service provider, assisting with unplanned pregnancies, post miscarriage care and counselling. Providing an innovative national cervical cancer eradication program (e.g VIA-Cryotherapy) under MOU with the MHMS. Developed the Girl Empowered Package approved by MEHA. MSP has passed annual audit every year since opening. The mobile outreach team is a pre-positioned pre disaster response team in readiness.



Get the **Girl Empowered Mobile Application** for Android and iPhone at www.msp.org.fj/girlempowered

The image shows the cover of the 'Girl Empowered' mobile application. It features three smiling young women of Pacific descent against a bright yellow background with a pattern of small white dots. The title 'Girl Empowered' is prominently displayed at the top in large, stylized letters. The MSP logo is in the top right corner. A circular callout on the left highlights 'The Perfect Fit' feature. A list of topics is shown in pink and blue banners at the bottom. A 'Second Edition' badge is in the bottom right corner.

Girl Empowered

MSP
Medical Services Pacific

How STIs can affect your love life

The Perfect Fit
Get your bra size in 2 easy steps

- Contraception - How NOT to get pregnant
- Everything you need to know about your period
- The simple test that could save your life
- Preventing Suicide

Second Edition

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Live Fearless



Financials

Independent auditor's report for the year ended 31 December 2016

We have audited the accompanying financial statements of Medical Services in the Pacific, which comprise the statement of financial position as at 31 December 2014, the statement of income and expenditure, the statement of Accumulated Funds and the statement of cash flow for the year then ended, a summary of significant accounting policies and other explanatory notes, as set out on next page.

Trustees' Responsibility for the Financial Statements

The Trustees are responsible for the preparation and fair presentation of these Financial Statements in accordance with the Fiji Accounting Standards. This responsibility includes: designing, implementing and maintaining internal control relevant to the preparation and fair presentation of Financial Statements that are free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditors' Responsibility

Our audit has been conducted in accordance with Fiji Standards on Auditing to provide reasonable assurance as to whether the financial statements are free of material misstatement. Our procedures included examination of evidence supporting the amounts and other disclosures in the financial statements, and the evaluation of accounting policies and significant accounting estimates. These procedures have been undertaken to form an opinion as to whether in all material respects, the financial statements are presented fairly in accordance with Fiji Accounting Standards and statutory requirements so as to present a view which is consistent with our understanding of the Organization's financial position and the results of their operations, changes in accumulated funds and its cash flows.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Qualification

It is not practicable for Medical Services in the Pacific to establish accounting control over all sources of Income prior to its receipt and accordingly it is not possible for our examination to include audit procedures to extend beyond the amounts recorded in the books of Medical Services in the Pacific.

Qualified Opinion

In our opinion, subject to the possible effect of the matters described in the basis for qualification paragraphs, the financial statements have been properly drawn up so as to present fairly the state of affairs of the Medical Services in the Pacific and the results of its activities for the year then ended.

We have obtained all the information and explanations which, to the best of our knowledge and belief, were necessary for the purpose of our audit.

DATED: 7th June 2017

Suva, Fiji

aliz pacific

aliz pacific
Chartered Accountants
Suva, Fiji
14 August 2014

Financials

In the opinion of the Board of Trustees:

(a) the accompanying Statement of Income and Expenditure and Statement of Changes in Accumulated Fund are drawn up to give a true and fair view of the operations of the organization for the year ended 31 December 2016.

(b) The accompanying Statement of Financial Position is drawn up so as to give a true and fair view of the state of the organization's affairs as at 31 December 2016

(c) The statement of cash flow is drawn up so as to give a true and fair view of the cash flow of the entity as at 31 December 2015

(d) At the date of this statement there are reasonable grounds to believe that the entity will be able to pay its debts as and when they fall due;

Dated at Suva this 7th day of June 2017

Signed for and on behalf of the Board of Trustees and in accordance with a resolution of the Board of Trustees.


 TRUSTEE


 EXECUTIVE DIRECTOR

Financial Statements

Statement of Income and Expenditure for the year ended 31 December 2016

	31 Dec 2016 \$FJ	31 Dec 2015 \$FJ			
INCOME					
Grant Income	829,160	787,563			
Other Income	11,788	21,389			
Total Income	840,948	808,952			
EXPENDITURES					
Administrative & Professional Cost	1,213	9,786	Office Expenses	22,440	13,353
Audit Fees	6,260	4,541	Repair & Maintenance	15,693	1,174
Advertisement, Marketing & Fundraising	27,159	23,062	Rent Expense	45,515	27,700
Depreciation	37,095	35,305	Staff Cost	595,482	455,434
Insurance	13,134	9,681	Superannuation	44,147	13,780
Medical Services	13,666	2,755	Travelling, Telecommunication & Utilities	50,278	55,382
Motor Vehicle Expense	16,492	9,967	Training & Workshops	19,748	12,771
			Total Expenditure	908,321	674,690,731
			Interest	365	442
			NET Operating deficit for the year	67,738	133,821

Statement of Changes in Accumulated Funds for the year ended 31 December 2016

	Accumulated Fund Total (\$FJ)		Accumulated Fund Total (\$FJ)
Balance as at 31 December 2014	158,552	Total comprehensive income for the year	0
Total comprehensive income for the year; net of tax	0	Net surplus as at 31 December 2016	67,738
Net (deficit) as at 31 December 2015	133,821	Other comprehensive income for the year; net of tax	0
Other comprehensive income for the year; net of tax	0	Total comprehensive income for the year	0
Total comprehensive income for the year	0	Balance as at 31 December 2016	224,634
Balance as at 31 December 2015	292,372		

Statement of Financial Position as at 31 December 2015

	31 Dec 2016 \$FJ	31 Dec 2015 \$FJ		31 Dec 2016 \$FJ	31 Dec 2015 \$FJ
CURRENT ASSETS			CURRENT LIABILITIES		
Cash and Cash Equivalent	186,684	229,277	Trade & Other Payables	2,000	3,407
Inventory	8,336	6,481	Deferred Revenue	142,215	0
Other Receivables	18,947	13,037	Total Liabilities	144,215	3,407
	213,968	248,796,439	Net Assets	224,634	292,372,552
NON CURRENT ASSETS			ACCUMULATED FUND		
Property, Plant & Equipment	154,882	46,982	Opening Balance	292,372	158,552
Total Assets	368,849	295,777	Accumulated Surplus	67,738	133,821
			Total Accumulated Funds	224,634	292,372

These Financial Statements have been audited.

Signed for and on behalf of the Board of Trustees and in accordance with a resolution of the Board of Trustees.


TRUSTEE


EXECUTIVE DIRECTOR

Statement of Cash Flow for the year ended 31 December 2016

	31 Dec 2016 \$FJ	31 Dec 2015 \$FJ		31 Dec 2016 \$FJ	31 Dec 2015 \$FJ
Cash Flow from Operating Activities			Cash Flow from Investing Activities		
Cash receipts from grants and donation	840,948	808,952	Acquisition of property, plant and equipment	144,995	23,768
Payments to suppliers and employees	(739,306)	(641,624)	Net Cash (used) in Investing Activities	144,995	23,768
Interest paid	(365)	(442)	Net (decrease)/increase in cash	42,592	144,245
Interest received	1,126	1,126	Cash balance at the beginning of the year	229,277	85,031
Net Cash provided by Operating Activities	102,403	168,012	Cash Balance at the end of the year	186,684	229,277

With thanks and support of the MSP Patron, His Excellency,
the Former Head of State of Fiji, Ratu Epeli Nailatikau



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Medical Services Pacific

Women & Youth with Health & Social Services



With thanks from the MSP GOVERNING BOARD

Mr. Don Angikiamo - Current Chairman 2017

Ms. Joshila La - Past Board Chairperson 2016 (resigned 2017)

Mr. Suluo Daunivalu - Founding Board Chairman 2010/Secretary

Ms. Jennifer Poole - Founder & Executive Director

Ms. Veronica Thoms - Treasurer

Ms. Loren Eastgate - Management Collective Member

Ms. Kelly Robertson - Management Collective Member

Dr. Bernadette Pushpaangaeli - Past Secretary

And the Trustees, Ms Alicia Sahib, Mr. Tevita Ravumaidama
and Dr. Tamara Kwarteng