



AnnualReport

Providing reproductive, maternal and child health services in Fiji

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Maritime Outreach Project

The Fiji Women's Fund

The Fiji Women's Fund (the Fund) is an initiative of the Australian Government's Pacific Women Shaping Pacific Development (Pacific Women) Program. The Fund supports women's groups, networks and organisations in Fiji to expand and enhance their work on women's empowerment and gender equality.

The Fund provides women's groups, organisations and networks with the sustainable support that they need to improve women's lives, particularly those in rural and remote areas or who are marginalized or disadvantaged.

The Fund works in the following thematic areas:

- Empowering women through increased economic opportunities
- Eliminating violence against women
- Improving women's participation in leadership and decision making
- Strengthening women's groups and coalitions for change

The Fund's grant supported MSP's elimination of violence against women and girls (EVAW) and sexual and reproductive health and rights (SRHR) activities. The Maritime Outreach Project has reached a total of 7,652 clients (4,036 female and 3,616 male). One significant achievement of the project was MSP's reaching marginalized and vulnerable women and girls in the furthest communities. The project reached maritime islands of Lau and Lomaiviti, Kadavu and Rotuma guite extensively. As a result, MSP has strengthened partnerships with several key stakeholders such as the Ministry of Health and Medical Services, Ministry of Women, Children and Poverty Alleviation, Ministry of Education, Heritage and Arts and the Fiji Police Force. This collaboration has benefited rural communities in Naitasiri, Rewa, Ra and Nadroga/Navosa including the maritime islands of Vanuabalavu in the Lau Province, and Gau, Batiki, Koro islands in the Lau Province, island of Kadavu including Rotuma.

Another significant achievement of the project was the roll-out of Girl Empowered program in the maritime schools and the awareness and education and distribution of Days for Girls reusable and recyclable sanitary product in the maritime schools. The kits were purchased from the project funds and also through MSP's partnership with Uplift Project. The Days for Girls increases access to menstrual care and education by shattering stigmas and limitations for girls. Each kit is in a draw-string bag and includes reusable cloth menstrual pads made up of colorful shields and liners, panties, a washcloth and soap, zip-closure plastic bags and other items. The kit enables girls to carry their clean and used pads discreetly and to take care of their own hygiene needs. During the distributions, girls also receive health education to break stigmas and cultural taboos associated with menstruation.

The Maritime Outreach Project will continue to strengthen and deliver essential SRHR health and social services in hard to reach and underserved communities, enabling access to quality health care for women and girls.



Motusa Primary School, Rotuma

Malahaa Primary School

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Message from the **Executive Director**

It is my pleasure to present the 2018 Annual Report on behalf of Medical Services Pacific (MSP) and to thank the wonderful and talented team of professionals who deliver these critical health and social services.

MSP continues to provide an increasing number of health and social services and I am pleased to note that 2018 recorded the highest number of clients and patients assisted to date. MSP has provided services to over 122,247 persons since commencing operations in August 2010. In 2018, the team has assisted 27,492 clients and supported 206 sexual assault survivors the majority of whom are under 18 years of age.

I am extremely proud of our small team, what they have been able to achieve and how they are able to maximise resources to deliver quality services in rural and remote locations. They work tirelessly to ensure women and girls have not only access to health services but also improved access to justice. This year, the team travelled extensively in the remote maritime islands of Fiji to provide health and social services to vulnerable groups. We are only able to do this critical work with the ongoing support of our sponsors. MSP is a non-profit organisation which relies on the support of our national and international donors, corporate partners and the public. On behalf of the Board, I would like to thank the Australian Government, the Canadian Government, the Fijian Government, the United Nations, Uplift (Australia, New Zealand and Fiji) and Asaleo Care for your support.

I have been honoured to develop MSP programs for nearly 9 years, including founding and registering MSP Fiji as well as our marketing and sustainability arms MSP Australia and MSP Technical Services. I hope these additions will ensure that the services which MSP provides will continue to meet the needs of the people of the Pacific. Thank you to all who have supported and continue to support MSP. I wish everyone a successful 2019.

Yours Sincerely

Jennifer Poole Founder and Executive Director Medical Services Pacific



Message from the Country Director

The Founder and Executive Director Ms. Jennifer Poole has joined the Ministry of Women, Children and Poverty Alleviation (MWCPA) in the role of Permanent Secretary as of March 2019, where she will continue contributing to the advancement of the health, safety and wellbeing of women and children in Fiji.

Jennifer's energy and devotion to the role will be difficult to match, but she leaves MSP a solid organisation and on a strong footing for those who work closely with MSP.

It is my great pleasure on behalf of the Board, Trustees and Staff to thank you for your dedication and the great job you have accomplished in your term as Executive Director and wish you all the very best in your future endeavors. We look forward to your ongoing involvement in MSP.

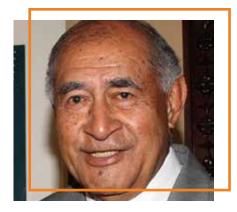
I am so thankful for the opportunity to serve as the Country Director for Medical Services Pacific. The experience will provide me with many wonderful opportunities, and a sense of pride in being able to be a part of MSP as it continues to grow. There are many exciting plans ahead for MSP, none of which would be possible without the support of MSP Board and staff – I want to say thank you for this opportunity.

Yours Sincerely

Asina Shaleen Country Director Medical Services Pacific

A Word from the Patron

It is my honour to present Medical Services Pacific's 2018 Annual Report. The team this year continued to make a real difference in the lives of women, girls and other vulnerable groups in Fiji. The highlight was the commencement of projects and joining in partnerships which saw the team visit some of Fiji's remote islands and communities. MSP Central and Northern mobile outreach one stop shop teams extensively visited communities in Vanua Levu, Kadavu, Yasawa, Lomaiviti and Lau groups. Survivors of sexual



violence experience complex needs. MSP's integrated and dedicated post rape care services specialise in managing child abuse and child sexual assault cases. The one stop shop clinic facilities enable survivors to access medical, legal and social support services both in the Central and the Northern divisions. MSP continues to provide important health and social services throughout Fiji.

Yours Sincerely

Sir Ratu Epeli Nailatikau Speaker Parliament of Fiji

SUMMARY

All of Medical Services Pacific (MSP) activities operate from a human rights approach, which encourages discussion on gender equality and respectful relationships in order to address gender-based violence, violence against women and girls as well as ensuring access to contraception and reproductive healthcare. Activities are situated within a broader policy framework of human rights and universal access to Sexual Reproductive Health (SRH), which challenges discrimination and inequality and seeks to empower individuals and communities to promote change and strengthen protections for vulnerable groups.

Across Fiji, MSP provides a broad range of health care, counselling and social services, including public awareness and educational programs with a specialised 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/psychosocial and legal support.

MSP is very grateful to our donor partners including the Australian Government, the Canadian Government, the Fiji Government and UN Women for their support, which ensure MSP's holistic programs continue to provide needed services for vulnerable women, youth and children of Fiji.

New major projects launched this year include Ensuring Dignity for Women & Girls during Disaster Response (funded by the Canada Fund Local Initiative), MSP Emergency Preparedness Project (funded by Fiji Program Support Facility), Comprehensive Health, Education and Social Services (CHESS) (funded by Fiji Program Support Facility), Access to Justice Fiji (funded by UNDP) and the Maritime Outreach Program (funded by Fiji Women's Fund).

The commencement of the Maritime Outreach Program was of particular interest this year, which saw MSP's outreach team visit some of Fiji's more remote islands and communities. The team for the first time visited Kadavu, Yasawa, Taveuni, and the Lomaiviti and Lau groups. Access to these communities is an important step in providing essential MSP services to the whole of Fiji.

The key success of 2018 is results that show steady growth in our reach, services and uptake. We performed our highest annual numbers yet in the amount of direct clients reached, services delivered, general counselling provided, cervical screenings performed and sexual assault clients supported. In 2018, MSP clinic staff and outreach teams reached 27,492 individuals across Fiji including delivering, distributing and performing a total of 71,592 services. The organisation conducted 124 community visits, 58 school visits and hosted a range of public, clinic and corporate events.

The Mobile Outreach and One Stop Shop (MOOSS) clinical services team based in Suva reached 20,071 direct clients as a result of the funding and support provided by one of the organisation's core donors, the Australian Department of Foreign Affairs and Trade (DFAT). The MSP Labasa MOOSS clinic in Fiji's Northern Division has seen improving client numbers since its opening in 2017, and with ongoing support from the United Nations Women's WPHF (Women, Peace and Humanitarian Fund) project, reached 7,421 clients in 2018.

MSP medical and nursing staff performed 1,334 cervical screenings in clinic and outreach settings throughout 2018, with 90 positive results referred onto appropriate medical care.

As a result of the organisation's ongoing agreement with the Fiji Police Force (FPF), MSP provided medical, legal and counselling support to 206 Sexual Assault Response (SAR) clients.

Moreover, 242 pregnancies and 13 unsafe abortions were averted in 2018. An increase in family planning services delivered, administered and performed indicated that our community information and awareness sessions have been effective in encouraging women to come forth and access contraceptives to prevent unwanted and unplanned pregnancies.

The national Child Helpline, funded by the Ministry of Women, Children and Poverty Alleviation (MWCPA) and staffed and operated by MSP, received 9,974 calls throughout 2018 including 1,647 genuine calls. Callers received a range of services from Counsellors staffing the 24/7 helpline including immediate and ongoing counselling sessions, information on MSP services and referrals to external agencies as required.

The MSP team comprises of two doctors, three nurses, seven counsellors, two lawyers as well as ten support and administrative personnel. We also host regularly international medical interns. As a team we design, implement and deliver services that are client centric and flexible, so we can easily change as needs emerge and become clearer.

We look forward to new opportunities and continuing to make an important contribution to Fiji health care and services in 2019.

Statistics: Our Numbers at a Glance

Cumulative To-Date	Service	2018	2017	2016	2015	2014	2010-2013
122,247	Clients directly reached	27,492	16,778	25,461	14,312	13,623	24,581
345,915	Services delivered, distributed and performed	71,592	64,284	53,946	34,798	41,433	79,810
206,610	Family planning services/ products delivered	31,598	36,360	33,439	17,021	29,349	58,826
192,324	Condoms distributed	30,415	35,422	32,458	16,702	28,173	49,154
4,920	Cervical screenings performed	1,334	1,187	529	402	868	600
5,321	General Counselling Services/Group/SOU Counselling	1,771	1,642	952	459	213	284
45,774	Child Helpline calls received	9,974	14,319	12,786	8,695	0	0
755	Sexual Assault Response (SAR) clinical clients treated	206	146	120	78	87	118
1,767	Legal Aid	587	195	299	529	157	0

Mind Pearl staff learn about family planning during workplace outreach



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.

At MSP we believe that the fulfillment of reproductive rights is essential for the health and wellbeing of women, adolescents and youths, as well as a powerful combatant to poverty. MSP is a rights-based family planning agency that believes human rights awareness and the empowerment of women go hand in hand, and both are critical in ensuring individuals and communities achieve optimal sexual and reproductive health (SRH). A woman with access to high quality reproductive health care services has greater choices and opportunities and is more able to cope with stress, change and disaster.

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 specialised focus on sexual and reproductive health. MSP has developed a comprehensive and integrated service for survivors and 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, like girls, youth, sex workers, vulnerable women, children at risk, sexual assault survivors, LGBTIs (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, the Ministry of Health and Medical Services (MHMS) zone nurses and community police under formal agreements. 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.

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 to maximise scarce resources and to strengthen local capacity.

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 organisation. 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 organisation. Our values are:

- We are a rights-based SRH organisation, committed to human rights, gender equality, child rights and reproductive rights. We recognise 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.
- 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, and counselled 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).
- 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 specialised confidential medical care and social services support for survivors.
- 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.

- 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 prioritise the rights and needs of beneficiaries and clinical clients / patients and ensure confidential services and friendly referrals.
- 9. Commitment 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 the board.
- 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 organisations 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.

Our Donors and Sponsors

MSP relies on donor funding and sponsorship to deliver our essential services to women, girls and youth in Fiji. We are grateful to our key donors and the projects they fund.

Donor	Project	Funding Duration
Ministry of Women, Children & Poverty Alleviation, Fiji	Child Helpline Fiji	Ongoing since 2015
Department of Foreign Affairs and Trade, Government of Australia	Support Sexual Reproductive Health & Clinical Services including Post Rape Care	Ending in February 2019- urgently seeking new funding
Women, Peace and Humanitarian Fund in partnership with UN Women	Protecting Our Women, Engaging Rights (POWER), Northern Division	Ending in June 2019 – urgently seeking new funding
Canada Fund Local	Project III: Ensuring Dignity for Women & Girls during Disaster Response	2018 to March 2020
Initiative (CFLI), Canadian Government	Project II: Empowering Women and Girls to improve SRHR Services and Reproductive Tract Cancers in Vanua Levu	Ended 2018
Fiji Program Support Facility	MSP Emergency Preparedness Project	July to October 2018
Fiji Program Support Facility	Comprehensive Health, Education and Social Services (CHESS)	2018 to September 2019
United Nations Development Programme (UNDP) and European Union	Strengthening Access to Justice for Survivors of Sexual Gender Based Violence	2018 to December 2019
Fiji Women's Fund	Maritime Outreach Program (MOP)	2018 to March 2020

We thankfully received the following Gift in Kind donations during 2018:

Donor	Project	Funding Duration
UPLIFT Australia and New Zealand	In-kind donation of intimate apparel, prosthetics and medical equipment.	Ongoing
Asaleo Care	Ongoing support for the publication of the Girl Empowered booklet and in-kind donation of menstruation products from Libra.	Ongoing
Global Basket New Zealand	Global Basket routinely sends feminine products, sanitary items and items of clothing, which we use to provide dignity to women who come into our care.	Ongoing
Lyndhurst Limited	In-kind donation of reusable bags and menstruation kits, 'Days for Girls Kits', for our Corporate SRHR outreach.	Completed 2018

A Partnership Approach

Partnerships with key stakeholders are an important strategy to provide effective health services to those in need. The ongoing working relationship, consultation and constant communication with key organisations and groups such as Ministries, Provincial Councils, Local Government Administrators, Advisory Councilors, MHMS divisional and sub-divisional medical teams, village Turaga ni Koros and other government and Civil Society Organisations (CSOs) has helped MSP coordinate outreach in markets, schools, village and settlement communities, as well as One Stop Shop clinics.

MSP has formalised these partnerships through MOUs. These formal protocols assist MSP to maximise health resources, enhance multi-stakeholder coordination mechanisms and strengthen local capacity.



MSP's Jennifer Poole and Matelita Seva-Cadravula, Executive Director of Reproductive & Family Health Association of Fiji sign a MOU

Our long-standing MOU partners are:

- Ministry of Health and Medical Services
- Ministry of Women, Children and Poverty Alleviation
- Ministry of Education, Heritage and Arts
- Fiji Police Force
- National Council for Persons with Disabilities
- Ministry of Women, Children & Poverty Alleviation, Digicel, Telcom, Vodafone in partnership for Child Helpline
- Homes of Hope
- The Salvation Army
- Aspire Youth Network
- · Partners in Community Development Fiji
- Empower Pacific
- Plan International
- FNU Dental Students Association
- Guadalcanal National Council of Women, Solomon Islands

We signed four new MOUs in 2018 with:

- Frank Hilton Organisation
- Ra Naari Parishad
- Smart Labs Fiji
- Reproductive & Family Health
 Association of Fiji



Cyclones & Emergency Preparedness





Australian High Commission's Counsellor for Development Cooperation for Fiji and Tuvalu, Christina Munzer, with Jennifer Poole at the Official handover ceremony





Emergency and response supplies. These include safe-birthing kits, new mother kits, dignity kits and WASH kits.

MSP is part of the CSO's Emergency Responders Pool. MSP is one of the 11 CSOs that can apply for the Fiji Program Support Facility's Preparedness & Response Fund in case of a disaster.

In August 2018, the Australian High Commission's Counsellor for Development Cooperation for Fiji and Tuvalu, Christina Munzer, officially handed over FJ\$40,000 worth of emergency and response supplies. These include safe-birthing kits, new mother kits, dignity kits and WASH kits. The handover coincided with the International Humanitarian Day 2018 celebration.

These kits are to be distributed during and post-disaster, equipping both MSP Suva and Labasa clinics for emergency rapid disaster response. The grant has enabled MSP to respond immediately to communities affected by a natural disaster providing a full range of health and social services such as reproductive health care, maternal and child health, counseling and legal advice for families and survivors.

MSP acknowledges the ongoing partnership and support of the Australian Government and the people of Australia in responding to disasters across the Pacific.

On 9 April 2018, a Category 3 Tropical Cyclone Keni passed to the west of Fiji's main island, Viti Levu, causing devastating flooding in the Western Division of Ra. MSP was able to mobilise its Emergency Relief Team to the area through assistance from DFAT, UNFPA, Global Basket New Zealand and corporate organisations—Colgate Palmolive, Asaleo Care and HFC Bank. MSP distributed dignity kits, seeds, diapers, sanitary pads, toiletries and other essentials to communities in Ra.

MSP is now part of the WASH Steering Committee in partnership with the Ministry of Health and Medical Services WASH Cluster Secretariat.



Partnership with Police



MSP has achieved outstanding results in collaboration with the Fiji Police Force (FPF). MSP has seen an increase in the number of sexual assault cases. FPF 10 years (2010-2018) Crime Trend and Sexual Offence cases highlight over 18,800 sexual offences. In 2018, of the 195 rape cases recorded, 123 were against children. The majority of MSP clients are under 18 years of age, demonstrating a priority need for SRHR services to be tailored for vulnerable youth and children. MSP recognises that efforts to address VAWG must address the structural barriers that prevent their engagement, as well as strengthen support services for women, youth and survivors of gender violence and rights abuses. MSP is currently implementing an access to justice project with UNDP under

EU funding through the OSS clinics in Suva and Labasa. However there are still gaps in the system, the courts have backlogs and there is weakness in national coverage and issues with the referral process between the key stakeholders. In addition, few Police Officers are trained in how to handle sexual assault cases and medical forensic evidence is not always passed on for processing in a timely manner. MSP works with the FPF to strengthen systems, facilitate appropriate medical forensic collection and ensure access to justice for survivors. However, MSP One Stop Shops only cover Central and Northern Divisions. There is still a desperate need to provide these specialised services and capacity in Western Division, which is experiencing high rates of sexual offenses.



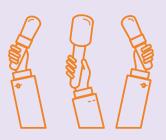
School outreach in Kadavu



Communications and Media



A regular presence at events, in the media, as well as our own communications, helps us to raise awareness, improve visibility and the profile on MSP services and to attract much needed funding. MSP had a dedicated Communications Officer in 2018 to manage all social media channels and contribute to professional internal communications.



Press Coverage:

MSP and our services featured in digital articles with the Fiji Times and Fiji Sun a total of 12 times in 2018. The articles included community outreach messages about sexual assault, court cases, healthy ways of disciplining your children, and the success of the Child Helpline.

Web analytics:



The MSP website received a total of **9,937** visits in 2018 with an average of **35 visits per day.**

Followers of MSP on Facebook increased by 1,327 to 5,154, and our page received 1,305 likes in 2018, which now gives a total of 5,162 since the page launched on 22 November 2010. Posts from our page were seen on average by 555 people per day.





The Child Helpline Facebook page

received a huge surge in both followers and 'Likes' in 2018. Followers increased by 4,655 to 6,098. Total 'Likes' increased from 1,443 to 6,092. This could be attributed to media attention in 2018 surrounding high levels of child self-harm, along with the release of Charlie the mascot by the Ministry of Women, Children & Poverty Alleviation.



2018 Making a Difference

Our numbers and results clearly show that MSP's holistic and integrated approach of providing our services to women, girls and other vulnerable groups in Fiji is making a difference.

Maternal and Child Mortality

It is widely recognised that family planning contributes to reducing maternal mortality by reducing the number of births that expose women to mortality risk. There is also evidence that increases in contraceptive use may reduce the risk per birth by eliminating the highest risk. Our MSP clinical outreach model and programs deliver quality integrated SRH care service for women, girls, youth and children. In 2018 we delivered/administered 31,598 family planning services/products, including handing out 30,415 condoms (male and female).

Using standard "Couple Years-of-Protection" (CYP) conversion, this can be calculated as averting 242 pregnancies, 161 births, 65 abortions and 13 unsafe abortions.

Early Detection

Fijian 2012 cancer statistics¹ show that of a population of 880,000, 1,100 people are newly diagnosed with cancer each year and that 700 people die from cancer per year. MSP carried out a total of 2,835 reproductive cancer screenings in 2018 returning 31 abnormal results. These clients were referred to appropriate advanced medical and surgical care services.

Dr Bakani at an evacuation centre in Ra

Screening data indicates a significant increase in cancer screening services between 2017 and 2018. MSP saw breast exams increased approximately 125%, from 588 in 2017 to 1,334 in 2018. Prostate checks increased 300% from eight in 2017 to 32 in 2018. There is still room to improve as prostate screening numbers remain low overall. There is a need to promote health services and engage Fijian men. Cervical screenings recorded only a 12% increase to 1,334 in 2018 however we note significant increase in figures over previous years as the result of an initiative with Canada Fund, "Eradicating Cervical Cancer among young rural Women in Fiji" conducted from November 2016 to February 2017.

Suicide Prevention

MSP has seen a worrying national trend where victims are getting younger. The average age of suicide and attempted suicide cases is now 16. Recent statistics have shown an increase in student deaths by suicide, and Fiji Police have released data showing that rates of suicide have surpassed road deaths in Fiji in 2018.

MSP services such as the Child Helpline and counselling actively contribute to reducing suicide numbers by providing a 24/7 service. In 2018 the Child Helpline received 1,647 genuine calls. Of these, most callers cited fear and anxiety issues (47%) as the reason for calling, followed by lack of confidence (8%).



www.cancerindex.org/Fiji

2018 Projects at a Glance

Donor	Project	Funder	Term	Grant
Child Helpline	Government initiative with UNICEF to provide improved services for prevention and response to abuse of children.	Ministry of Women, Children and Poverty Alleviation (MWCPA)	April 2015 - Renewed Annually	FJD200,000
Support Sexual Reproductive Health & Clinical Services including Post Rape Care	One Stop Shop (OSS) clinics in Suva & Labasa, Mobile Outreach to deliver the national SRHR Program for women and youth, activities to prevent GBV and promote gender equality.	Department of Foreign Affairs and Trade (DFAT)	June 2018 - February 2019 Urgently seeking new funding	AUD150,000
Protecting Our Women, Engaging Rights (POWER)	Responding to Gender Based Violence in populations affected by disaster.	United Nations Entity for Gender Equality and Empowerment of Women (UN Women)	2017 - June 2019	FJD553,500
Empowering Women & Girls to improve SRHR Services & Reproductive Tract Cancers in Vanua Levu	Project II: extending VIA to the Northern Division.	Canada Fund for Local Initiatives (CFLI)	2017 - June 2019	CAD27,500
Ensuring Dignity for Women & Girls during Disaster Response	Project III: improving responses to gender-based violence in populations affected by disaster and provision of emergency response kits.	Canada Fund for Local Initiatives (CFLI)	August 2018 - March 2020	CAD99,944
MSP Emergency Preparedness Project	Funded through Fiji Program Support Facility, an Australian funded Initiative. Funding emergency preparedness for Ba and Bua.	Fiji Program Support Facility	July 2018 - October 2018	FJD40,000
Comprehensive Health, Education, and Social Services (CHESS)	Funded through Fiji Program Support Facility, an Australian funded initiative	Fiji Program Support Facility	April 2018 - Anticipated September 2019	FJD349,959
Strengthening Access to Justice for Survivors of Sexual and Gender-Based Violence	through mealea, legal and	European Union/ United Nations Development Programme	December 2018 - Anticipated December 2019	USD150,000
Maritime Outreach Program (MOP)	Girl Empowered training package and products in Maritime areas. Contribute towards linking communities in the islands with health and social services referrals.	Fiji Women's Fund	2018 - Anticipated March 2020 MSP Annual Report 2	AUD200,704 018 15

One Stop Shop – Suva and Labasa

"One Stop Shop" (OSS) is the concept of providing holistic healthcare, social services and legal services for women and youth under one roof.

Labasa Clinic

The Labasa clinic was able to open in 2017 due to a two year funding commitment 'POWER' from the Women, Peace and Humanitarian Fund, in partnership with UN Women. The objective is to increase safety, access to sexual and reproductive health and rights services, and access to justice in the Northern Division of Fiji. This funding ends in June 2019 and we are urgently seeking funding for the continuation of the clinic in Labasa.

Project Outcomes and Achievements

The Women's Peace and Humanitarian Fund project was set up to respond to gender based violence (GBV) in populations affected by disaster. The MSP POWER project team is a disaster response team, skilled and ready to address gender concerns in emergencies.

The Labasa One Stop Shop model delivers the following:

• OSS Clinic - Medical Services: Medical consultation and examination, medical forensic, emergency contraception (ECP) to prevent unwanted pregnancies, HIV PEP and STI treatments and vaccinations to prevent Hepatitis B and Tetanus.

- **Counselling and Social Services:** Professional counsellors provide pre- and post-procedure counselling for survivors and general ongoing therapeutic counselling for those in need, as well as referrals for ongoing support services including welfare and shelter.
- **Legal Advice:** Legal advice, referrals and assistance to obtain justice including escort to court and ongoing monitoring and updates on the progress of the case.
- Emergency Shelter: Safe accommodation onsite or by referral, which includes access to a shower facility, fresh underwear, clean clothes and breakfast/lunch/dinner depending on the time of arrival and stay.
- **Security:** Enclosed fenced or safe compound (with security or alarm) and safe transport to and from referrals (using MSP warm referrals protocols).

The POWER project has enabled MSP to set a firm foundation in the Northern Division and build a strong partnership with key stakeholders to improve service provision for women and girls.

Dedicated Post Rape Care Services for Women, Youth and Children

MSP delivers the only integrated and dedicated post rape care service in Fiji, and our team are specialised in managing child abuse and child sexual assault cases. The Ministry of Health and Medical Services national reproductive health services are strengthened by the coordinated support and skills of non-government organisations. Apart from the CWM Hospital in Suva and the Labasa Hospital in the Northern Division, MSP is the only other agency currently providing confidential clinical services to sexual assault clients, e.g. rape kit/medicals, and confidential information on emergency contraception, safe abortion and referrals as designated under the Fiji Crimes Decree.

Our Protection Officer (gender/human rights/legal aid) focuses on human rights awareness, legal advice and support, as well as strengthening the child protection program. This is a key position in the One Stop Shop. Legal services under the One Stop Shop enables MSP to assist clients in a number of areas such as child adoption, restraining orders (DVRO), managing child abuse and child sexual assault cases, legal support and advice, child and spouse maintenance, child custody, child protection (advise on child rights) and witnessing legal documents. The MSP program fills essential gaps in SRHR service provision for survivors and their families in terms of information services for vulnerable women and girls.

Since 2012, MSP has been working closely with the Fiji Police Force under a formal Memorandum of Understanding (MOU). The MOU and Standing Operational Procedures with the Fiji Police Force Sexual Offenses Unit ensure survivors of sexual abuse have access to justice. MSP has seen 755 sexual assault survivors in our dedicated Post Rape Care Suva clinic. In 2018, 206 clients accessed MSP's post rape care clinics.

Types of Sexual Assault medically treated in 2018

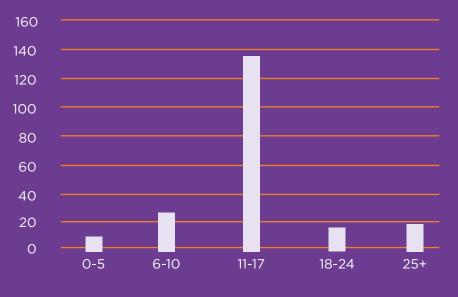
Sexual Assault Response 2018



Sexual Assault Response by Age Breakdown-2018

Donate

Save lives!



www.msp.org.fj

Community Outreach





MSP's One Stop Shop concept is extended into the community in rural, urban and peri-urban areas through Mobile Outreach. Clinical services provided by MSP during outreach to communities strengthen national reproductive health services and are conducted in conjunction with the Ministry of Health and Medical services.

MSP delivered Mobile Outreach activities in 2018 to 203 sites including 124 community visits (80 villages and 44 settlements), 58 schools (nine tertiary, 13 secondary and 36 primary), ten public events, ten corporate visits and one market visit.

The MSP Outreach Team visits schools to create awareness on Child Protection and Child Helpline services. The team has visited a total of 154 schools since the start of the outreach program in 2010. In 2018 the team visited 58 schools across Central, Northern, Western and Eastern divisions. Students were provided with information on child protection, child abuse, good and bad touches, gender-based violence, girl empowered and psychosocial information. Creating awareness about these issues can empower students, parents and caregivers.

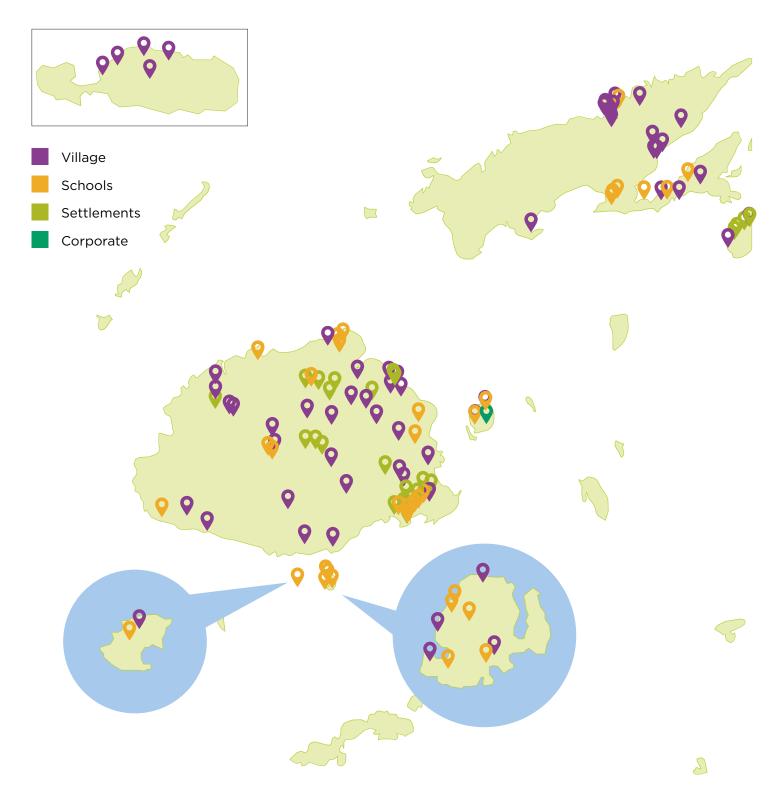
 Community outreach in Navosai settlement in Narere
 Relief effort during TD047 in 2017
 Education on Sexual Reproductive Health to mothers during community outreach







The map below shows the locations where the MSP Outreach Team visited during 2018.



Child Helpline



The Child Helpline (CHL) is a government initiative under the Child Protection Multi Year Work Plan agreed with UNICEF to provide improved services for the prevention of and response to the abuse of children. The CHL responds to the increasing incidences of child abuse and exploitation which were being reported by authorities and civil society. MSP has delivered this service proudly on behalf of the Ministry of Women, Children and Poverty Alleviation (MWCPA) and the Information, Technology and Computing Services of the Ministry of Justice since 2015, with increasing success.

The Child Helpline offers help and support services for children. A variety of communication methods can be used to ensure that children can always access help and find someone to talk to. These methods include telephone services, mobile phones, text messaging, online via email, Facebook chat, radio and mobile community/school outreach.

The CHL's qualified Counsellors actively listen to children, and link them to resources and emergency assistance when needed. The CHL also assists those who may not be able to access essential services, including street children, children living with disabilities and children in marginalised areas or communities. The CHL provides children with their fundamental right to amplify their voices and to be heard, as outlined in the United Nations Convention on the Rights of the Child (UNCRC), and plays a key role in shaping, strengthening and filling in the gaps of existing national child protection systems.

On 9 November 2018, the MWCPA launched the new mascot, "Charlie" the Helpline Turtle, at the Grand Pacific Hotel. Stakeholders and the MSP team were there in strength and support for this joint program for the children of Fiji. Upon the official launch of Charlie the Helpline Turtle, advertisements appeared on TV and in cinemas, as well as the CHL jingle playing over radio stations. Following this official launch, the MWCPA held the Prevention of Child Abuse and Neglect campaign in Lautoka's Churchill Park. MSP Senior Counsellor and staff participated in this event to raise awareness of child protection measures and MSP's services, reaching close to 200 participants in the Western division.

The Ministry's efforts to increase the number of child callers to the Helpline was achieved, as the Helpline noticed a spike in child callers. The jingles and TV advertisements were clear and easily understood by both young and old. Many also called the Helpline acknowledging and appreciating the introduction of the mascot and some children called to speak with Charlie the Helpline Turtle.

The table shows the type of calls the Child Helpline received. MSP records all calls, including silent and prank calls, as even these can indicate community awareness for the "1325" number.

The CHL received almost 10,000 total calls by the end of 2018 with an average of 27 calls per day.



National Child Helpline awareness raising to Primary School students

Cumulative (to Date)	Achievements for the Child Helpline	Annual 2018	Annual 2017	Annual 2016	Annual 2015
5,571	Genuine calls	1,647	1,743	1,502	679
9,196	Prank calls	2,083	2,600	2,440	2073
11,427	Silent calls	2,639	3,484	2,720	2,584
16,968	Test calls	3,605	6,492	5,532	1,339
2,612	Voice mail	0	0	592	2,020
45,774	Total Calls	9,974	14,319	12,786	8,695
1,929	Total Male callers (Genuine only)	550	638	493	248
3,499	Total Female callers (Genuine only)	954	1,105	1,009	431
9	Total LGBTI callers	9			
155	Total schools visited from 2015-2018	72	30	30	23
289	Total villages visited/ Open days/Public events 2015-2018	110	85	68	26

The MSP Outreach Team visit schools to provide information and education to Fiji's youth and to create more awareness about the 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. Students are invited to test the CHL, encouraging them to feel safe and supported when speaking to a Counsellor if they suspect or experience abuse or bullying. The MSP Counsellors also focus on providing psychosocial support during group and individual face-to-face counselling/information sessions, making necessary referrals and case management.

The CHL team will modify data collection to categorise and capture calls regarding suicide, as they are currently reporting based on the priority of the call or the treatment such as depression. With MSP internally providing intervention to over 70% of calls received, this helps to reduce the burden on government resources and is hoped that an increased support for MSP's wider health services will be factored into future MOA's with government. At least 80% of sexual abuse cases are children. MSP integrated clinics support the post rape care protocols of the MWCPA and MHMS. It is essential that post rape care is maintained to enable better support and garner crucial evidence in the cases of court presentations and a survivors path to access to justice. To do this, MSP requires funds and looks to government and donors for financial support.

Future allocations in the national budget would contribute to the mandate of CHL and also increase related health and social services, thus improving access to justice for women, children and child survivors of sexual and gender-based violence. Ongoing resources for the CHL and related services will continue to strengthen child protection networks nationally.

Canada Fund for Local Initiatives

Our Valued Partner

Medical Services Pacific has found a valued partner in the Canada Fund for Local Initiatives (CFLI), selected and approved by the Canadian High Commission. The CFLI is a unique fund in that most projects are designed and implemented by small, local civil-society organisations. CFLI has funded MSP three consecutive years. CFLI funds CSOs that understand local needs and priorities and are often best placed to respond to them. CSOs, like MSP, are in the forefront of increasing the overall impact of projects and strengthening engagement in issues that are important to the prosperity and well-being of local communities. All succession projects under CFLI funding are aimed at serving marginalised and vulnerable women, children and communities in Fiji.

CFLI funding has equipped the MSP Labasa Clinic and the Suva Clinic with much needed medical equipment. The support enabled MSP to procure three cryoguns for the treatment of cervical lesions. MSP medical teams were trained to provide cervical screenings and treatment using Visual Inspection with Acetic Acid (VIA). The project also provided SRH medical supplies and consumables to treat STIs and other diseases. The current Canadian Government funded project titled Ensuring Dignity for Women and Girls, is designed to respond to genderbased violence (GBV) in populations affected by disaster. The project team is an ever-ready disaster response team, proficient in addressing gender specific concerns in emergencies. The project will ensure the Mobile Outreach Team are ready for rapid response post-disaster—stocked with 200 Dignity Kits, 50 WASH kits and 20 Safe-birthing kits. The team is also equipped to address SRHR needs during emergencies.

Monitoring visit

The Canadian Government representative, Deputy Director (Development) Mongolia and Oceania, Mr. Luke Myers accompanied the MSP Outreach Team to Nakorovou village in the tikina of Mataso in the Province of Ra in September 2018 during CFLI's monitoring and evaluation. An initial visit to Nakorovou village was carried out post Tropical Cyclone Keni (Category 3) in April 2018. Mr. Myer's visit was timely as MSP was preparing for a revisit to Nakorovo village, four months post TC Keni. The MSP team comprised of a Program Manager, MSP Nurse, MSP Medical Officer, MSP Legal Aid Officer, MSP



Canadian Government reprsentative, Mr Luke Myers with Roko Tui Ra during a monitoring visit



Counsellor and Protocol Officer. The team was also accompanied by the Assistant Roko Ra and the Zone Nurse of Nanukuloa Health Centre. The villagers were able to access a full range of health and social services. Thank you to the Canadian Government and the people of Canada for the ongoing support, which has enabled MSP to expand and provide quality health services to the people of Fiji.



Mr. Luke Myers accompanied the MSP Outreach Team to Nakorovou village in the tikina of Mataso in the Province of Ra.

High Commissioner of Canada visit to MSP

The High Commissioner of Canada, His Excellency Mario Bot and Ms. Tara Bickis, Consular Officer, visited MSP on 16 November. The meeting covered work done in partnership under Canada Fund Livelihood Initiative funding. Thank you Canada and the Canadian people for the ongoing support, trusting and enabling MSP to expand and strengthen the sexual genderbased violence elimination effort in Fiji!



His Excellency Mr Mario Bot, High Commissioner of Canada, and Ms Tara Bickis visit the MSP office



Wash kits ready for distribution during disaster



Access to Justice for Survivors of Sexual and Gender-Based Violence

The Access to Justice grants are aimed to strengthen the capacity of civil society organisations (CSOs) to deliver access to justice services to impoverished and vulnerable groups. This includes a need to raise awareness and understanding of legal rights and the justice services available to the Fijian people and provide basic services, such as referrals, on access to justice and human rights at the community level reaching those in more remote areas of Fiji.

The Fiji Access to Justice Project is funded by the European Union (EU) and implemented by the United Nations Development Program (UNDP), in partnership with the Judicial Department and Legal Aid Commission.

The Access to Justice Project supports access to justice for impoverished and vulnerable groups through empowering people to access legal rights and services, and strengthening key justice institutions to deliver improved services.

The grants for justice support services aim to increase knowledge about access to justice and human rights, identify and discuss key human rights challenges, and to establish and promote a robust platform for engagement between government justice institutions, the Legal Aid Commission, the Human Rights and Anti-discrimination Commission, and CSOs. MSP is expected to provide justice support services from their respective areas of expertise, with a focus on marginalised communities throughout Fiji, in cooperation and consultation with the local Legal Aid Commission and the Human Rights and Anti-Discrimination Commission office. These activities include:

- Providing legal and human rights information, referral support, counselling and accompaniment services to marginalised people.
- Raising awareness and providing training to community members on legal rights, human rights and social support services.
- Promoting alternative dispute resolution services, such as mediation and reconciliation (where appropriate) to communities.
- Working with government partners to inform policy and advocating for improvements in the provision of justice sector services for people.



Nacokaika Village students learn about human rights and social support services

Girl Empowered





The Girl Empowered booklet has everything young people need to know about gender, puberty, sexuality, contraceptives and more. It has been approved for use in schools since 2015. In 2018 we made the 3rd edition, with consultation from teachers and parents in the community and our own monitoring and evaluation statistics. We added 8 new sections to better serve the youth and teens of Fiji.

The 8 new topics include:

(i) Inclusion of Male Reproductive Organs

Both boys and girls are taken through the Girl Empowered sessions. The first two versions of the booklet only showed the female reproductive organs and the Outreach Team noticed that the boys would laugh

when discussing body changes. In 2018, the team decided to include the male reproductive organs in the Girl Empowered booklet so that both boys and girls could learn each other's reproductive organs and their functions. The idea is to go over the different ways boys and girls experience puberty and hormonal changes including menstruation for girls and nocturnal emissions for boys. It is important for children and teens to understand that, while these changes may mean they are able to make a baby, they are still children. We remind the students that they are children, under the law, until the age of 18.

- (ii) Understanding LGBTIQ
- (iii) What is Cervical Screening
- (iv) Preventing Suicide
- (v) Eat well, Fell Great!
- (vi) WASH
- (vii) Dengue
- (viii) Bullying



Girl Empowered awarness and education in a primary school



 A counsellor is a person trained to help with concerns or problems such as anxiety, depression, grief or relationship difficulties. They aim to help resolve problems in a positive way by helping to clarify the issues, explore options, develop strategies and increase self-awareness. MSP counselling services are delivered by a team of qualified counsellors and health professionals.

Counselling Services	Total Counselling 2018	Share of Services
General Counselling	190	7.0%
HIV Counselling	19	0.7%
Sexual Assault Response (SAR) Counselling	146	5.3%
Sexual Assault Response (SAR) Family Member Counselling	81	3.0%
GBV Counselling	75	2.7%
Positive Cervical Screening Result	3	0.1%
Mental health/Suicide Counselling	8	0.3%
Child Counselling	17	0.6%
Child Helpline (Genuine Calls)	1,647	60.4%
Community Counselling	105	3.8%
Telephone Counselling	14	0.5%
Lifestyle Counselling	19	0.7%
Family Case Conference	1	0.1%
Stress Management	188	6.9%
Psycho educational Counselling	133	4.9%
School Counselling	37	1.4%
Positive Parenting	46	1.7%
Total	2,729	

Awareness raising on Humans Rights and Access to Justice with women in Malawai Village, Gau

- Most of our counselling services are conducted face-to-face. We also offer telephone counselling for people in remote areas.
- MSP counsellors in 2018 provided counselling services to 2,729 individuals, couples, groups and children. Counsellors are trained to be inclusive of people living with a disability (PWD) and those who identify as lesbian, gay, bisexual, transgender or intersex (LGBTI).MSP has a Counselling Policy in place that seeks to safeguard MSP Counsellors, clients and the organisation from any harm during or after the course of intervention. The Counselling Policy serves as a guideline for Counsellors to work within their professional boundaries and follow standard protocols and procedures in counselling and referral processes. MSP Counsellors ensure that the client is well informed with the counselling service protocol and procedures, its confidentiality and limitations during contact.

Types of counselling that were accessed by clients in 2018 and respective share of the total are shown in Table.





MSP is in its fifth year of providing legal services to help women, girls and youth access justice. Human rights education and awareness is a fundamental aspect of accessing justice. MSP worked with key partners and stakeholders such as the Legal Aid Commission, Office of Director of Public Prosecutions and Ministry of Women, Children

Type of Legal Services	2018 Services Provided	Share of Services
Adoption	11	1.9%
Child Custody	3	0.5%
Child Maintenance – IPV/GBV	43	7.3%
Dissolution of Marriage	6	1.0%
Domestic Violence - Advice on Rights	64	10.9%
Gender Equality	1	0.2%
General Legal Aid	113	19.3%
Legal Consultation - Child Protection	316	53.8%
Registration of a Child	4	0.7%
Social Welfare Assistance	4	0.7%
SOU (Sexual Offence Unit) Legal Support	2	0.3%
Spousal Maintenance GBV/IPV	2	0.3%
Witnessing of Documents	18	3.1%
Total	587	

and Poverty Alleviation. MSP also worked very closely with Fiji Police Force under its One Stop Shop Post Rape Care Services.

In 2018, we saw a 200% increase from 2017 in legal services provided.

MSP provided legal services for a wide range of topics as per the table below. The majority of beneficiaries were children and women.



International Women's Day 2018, Nausori market



Training World Wildlife Fund Fiji staff on Child Protection

MSP Technical Services

MSP is working towards establishing its Technical Services Limited in 2019. It will be a registered company under the Companies Act 2015. This new division will allow MSP to:

- a. Provide consultancy, advisory, training, expertise and technical assistance in Fiji and abroad.
- b. Collect and receive funds by way of a consultancy fee to build the company and to provide financial support to MSP (a registered charitable organisation).
- c. Assist with the training, advisory, expertise, technical assistance and project management of MSP board, staff and volunteers.
- d. Provide opportunities for staff to become expert advisors.
- e. Assist MSP with income generating activities.
- f. Deliver expert technical services in the areas of Sexual and Reproductive Health (SRH), human rights, development, humanitarian aid, management and human resources.

Consultancy: The Australian Government's Child Protection Capacity Building

The Department of Foreign Affairs and Trade (DFAT) partners and grantees are required to follow the DFAT Child Protection Policy 2017, which articulates a zero-tolerance approach to child exploitation and child abuse. MSP was consulted to review the child protection compliance of selected Fiji Program Support Facility (Facility) grantees. These grantees include FRIEND Fiji, World-Wide Fund South Pacific, Rainbow Pride Foundation, Rama Krishna Mission, Rise Beyond the Reef and also a review of MSP's Child Protection Policy.

The training enabled partners and staff to build on positive outcomes and mitigate risks or change certain activities and practices to ensure desired outcomes were achieved as per DFAT's child protection requirements.

MSP CORPORATE OUTREACH

Health Checks

Women's Health -Gynaecological Services Family Planning and Contraception Breast Health Awareness & Screening Cervical and Prostate Cancer Screening STI and HIV Awareness, Testing and Treatment Maternal & Child Health Care Gender-Based Violence Services - legal & psycho-social counselling and social services Health & Wellness Education Child Protection & Human Rights Awareness and Training Other specialty services available upon negotiation CORPORATE OUTREACH INQUIRIES (679) 4502906 info@msp.org.fj Follow us on 🦵 /msp. org.tj 💟 @MSPFiji The Child Protection training reiterated

The Child Protection training reiterated that child protection is a compulsory area for capacity building for all Civil Society Organisations (CSOs) that partner with the Facility. Awareness on child protection has continued to improve within the organisations. The majority have a Child Protection Policy or they understand that it is a donor requirement to have a policy. However, for some CSOs there was a need to further embed child protection into their cultures and to ensure organisations were DFAT compliant.

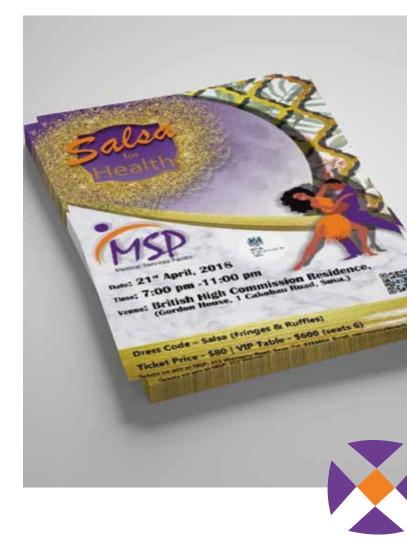
In 2018, MSP carried out child protection policy reviews with the purpose of improving Access to Quality Education (AQEP) commercial contractors' child protection policies and practices. This was carried out in order for the organisation to continue meeting donor



requirements and be considered a model for child protection best practice in Fiji. MSP held training sessions with the commercial contractors in three locations: Ra, Koro and Suva.

MSP was further contracted to monitor outcomes of aforementioned AQEP commercial contractors. Monitoring the performance of an activity, such as refresher training, and measuring the impact of an activity is extremely important, both in order to support the outcome and to ensure quality and accountability. The monitoring team sought to assess the performance of key stakeholders who were part of a child protection initiative and to support the participants of the recent Child Protection training to achieve their commitments. The consultants considered the agreed child protection outcomes and monitored indicators for each organisation. The indicators considered any changes made to ensure the safety of children around the workplace or in the community. It was vital that all safeguarding measures discussed in the training were employed as needed to reduce risks to children in each location.

The monitoring team concluded that results were quite impressive and positive. All companies had instituted child protection safety mechanisms and, in most instances, their staff and key stakeholders were very aware of child protection reporting procedures. All construction workers engaged with the three companies had police clearances, as per DFAT child protection policy requirements. MSP also provided child protection training to the AQEP administration staff. The detailed report was submitted to AQEP.



MSP Fundraiser: Salsa for Health

'Salsa for Health' was MSP's first fundraiser for 2018. The then Minister for Health and Medical Services Ms. Rosy Akbar officiated the charity event at the British High Commissioner's residence.

The event raised funds to buy a new steriliser machine worth \$10,000 to enable MSP to conduct improved prenatal scanning in remote rural areas. It was an event full of music and dancing with wonderful atmosphere of Latin music, lighting and guests energised to dance to the Salsa rhythm. A big "Vinaka Vakalevu!" to the British High Commissioner to Fiji, Her Excellency, Ms. Melanie Hopkins and partner Mr. Alessandro Truppia for their generous support in hosting the fundraiser at their residence.

Expansion and Replication

The One Stop Shop (OSS) integrated post rape care program has functioned effectively to ensure women and girls in Fiji receive access to health care, counselling, legal services and justice. The MSP OSS has contributed towards an increased number of successful prosecutions for sexual assault and child abuse in Fiji. The 2018 program directly assisted over 206 sexual assault survivors. Additionally, in 2018 MSP implemented the project "Protecting Our Women, Engaging Rights" (POWER) in the Northern Division, funded under Women, Peace and Security and Humanitarian Action in partnership with UN Women.

In view of this, the Fiji Police Force Sexual Offenses Unit and MWCPA have asked MSP to extend these services to the Western Division. MSP is seeking resources from grants and donations to expand the One Stop Shop model to the Western Division as well as regional locations, namely the Solomon Islands and Papua New Guinea. The specialised services and capacity are desperately needed in the Western Division, which is experiencing high rates of sexual offenses. The Western OSS clinic will follow best practices established by MSP over the past 10 years. It will be a safe, private, therapeutic setting, providing highly specialised care and treatment for survivors of sexual assault and GBV—both children and adults. Clinical services will include emergency medical treatment, forensic evidentiary examinations, referrals, counselling, assistance with police reporting, information about legal rights and options, and other support services. This clinic will be the first of its kind for the Western Division. All clinic services will be provided free of charge to sexual assault survivors.

In the Solomon Islands, MSP has established partnerships with the Guadalcanal Provincial Council of Women and the Ministry of Health to improve protection and services for women. The goals will be to increase protection for women and girls, action human rights provision, enable women's participation and agency, improve health, social services and security, and better enable the prosecution of sexual offenders.





Capacity Building

One of MSP's key activities is to build capacity in healthcare awareness and services in the community, within government and with other key stakeholders. Further MSP strives to use their expert staff to provide training in the community and to organisations. In recognising the importance of capacity building to effect positive change and to provide stronger services nationally, MSP actively pursues capacity building activities for its staff. Below are some of 2018's events whereby MSP shared its expertise with others.

February

The Sexual Offence Unit (SOU) at the Nabua Police Station requested MSP to conduct victim counselling, training, and rape-kit demonstration. A total of 25 Police officers were present on the day of the training.

The MSP Nurse and the Protection Officer talked on Standard Operational Protocol (SOPs) when a survivor/victim is brought in by the SOU to MSP. The emphasis was placed on the importance of bringing in a survivor as soon as practical for examination to prevent unwanted pregnancy and STIs, including HIV. For women and girls surviving rape, the emergency contraceptive pill needs to be offered systematically less than five days after the incident. The Senior Counsellor delivered a session on the Child Helpline and the psychosocial support work available both in the Suva and the Labasa clinics for their clients and also the police officers, when the need arises.

May

Menstrual Hygiene Day #MHDay2018 #EmpoweringWomenandGirlsthroughGoodMenstrualHygiene

The Global Menstrual Hygiene Day (MH Day) was celebrated in Fiji for the first time in 2018, themed "Empowering Women and Girls through Good Menstrual Hygiene". An important part of MH Day is to provide women and girls with information about managing menstruation in a hygienic way - in safety, privacy and with dignity. The 28th of May was chosen for MH Day because May is the fifth month of the year and women's menstruation period lasts an average of five days. The 28th was chosen because the average menstrual cycle is 28 days.

MH Day is a global advocacy platform that brings together the voices and actions of CSOs such as MSP to promote good menstrual hygiene management (MHM) for all women and girls. Specifically, MH Day:

- breaks the silence, raises awareness and changes negative social norms around MHM; and
- engages decision-makers to increase the political priority and catalyse action for MHM, at global, national and local levels.

The event was officially launched by MSP at Deenbhadoo Memorial Primary School. MSP conducted an awareness session with a total of 61 students (both male and female) and eight teachers at the school. An overview was given of menstruation, how and why it happens, menstrual hygiene products, managing pain during menstruation, and hygiene practices that should be followed during menstruation. The session ended with a participatory myth busting fun activity to shed light on myths and truths about menstruation.





August

MSP received a training request from Pacific Community Development Fiji (PCDF). MSP provided PCDF staff and management training on Psychological First Aid (PFA). There are many types of PFA and it is increasingly being used in the post disaster field. There is an urgent need for this technique to be given a Fijian context. PFA needs to be packaged in a way that clearly outlines its aims, components, when it is used, where it can be applied, who benefits from its use, and who can deliver it.

A total of 22 PCDF staff were part of the half day training session, which was held on 7th August at the House of Sarah's training facility.

September

Capacity Building with the Sexual Offence Unit in the Northern Division

MSP's Northern branch conducted a two day Fiji Police Force Sexual Offence Unit (SOU) training session for officers who handle sexual and gender-based violence in the Northern Division. A total of 13 Police Officers were part of the 'Responding to Sexual Violence' training at Macuata House conference room on 17 and 18 September. Participants were taught counselling and social skills for handling survivors as first responders, child protection, human rights and reproductive health rights, family planning choice kit, rape kit, MSP-FPF Standard Operating Procedures (SOP), virginity and hymen (its significance in post-rape cases) and MSP's post rape protocol.

The beginning of the training focused on creating an environment that was conducive for adult-interactive learning, a safe space to share work experiences while maintaining confidentiality and respect for the survivors, as well as establishing respect for each other to set the learning and sharing platform. At the end of the first day, it was noted that almost all of the participants had a better understanding from the survivors' perspective and they were more empathetic in their views. They realized the challenges that survivors face before and during accessing justice, as well as the traumatic and agonising ordeal of having to go through court hearings. They also were able to identify the personal biases and limitations that they had which prevented them from providing their best.

The SOU officers in the Cakaudrove and Nabouwalu sub-divisions (with the exclusion of Taveuni subdivision) are now aware of the MSP One Stop Shop (OSS) and the integrated mobile outreach services. Coordination and collaboration will now need to be strengthened and improved for better management of sexual offence and sexual assault survivors, as well as gender-based violence.

October

GESI Training

A 3-day training on Gender Equality and Social Inclusion (GESI) was held at the Peninsula Hotel. The training was facilitated by the Protection Officer Elizabeth Rova and Counsellor Jacintha Roberts, and was supported by the staff of Fiji Program Support Facility.

December

International Day to End Violence Against Sex Workers

MSP Executive Director Jennifer Poole was invited by Survivors Advocacy Network Fiji (SAN Fiji) as a guest speaker for the International Day to End Violence Against Sex Workers.

17 December 2018 marked the 15th annual International Day to End Violence Against Sex Workers (IDEVASW). This event draws attention to the high rates of murder and violence perpetrated against sex workers around the world. Violence continues and everyday sex workers are at risk due to the marginalised positions sex workers are forced to occupy within our societies.

SAN Fiji has signed an MOU with MSP and continues to access sexual reproductive services both in the Northern and Suva clinics. MSP and SAN Fiji have strengthened this partnership to enable sex workers stigma-free access to SRHR and HIV prevention services including comprehensive PEP and STI management, information and counselling on gender-based violence services, and legal and psychosocial support.

Medical Services Pacific strongly believes we can play a role in ending commercial sexual exploitation and human trafficking in the Pacific.



Making a difference

MSP captures stories from those who have been positively affected by our services. Below are two from 2018.

Most Significant Change Stories 2018

I am a 35 year old iTaukei single mother,

separated from my husband. I have four children and now live back in my village with my 65 year old widow mother and younger sister who is also a single mother. Life in the village is very hard especially when there is no support. I spend my days with my mother in the sea to cater for our daily living. Sometimes I feel like dying because I cannot take it any longer. I blame my children for putting me in this position and I often badly abuse them.

During MSP's Awareness visit, I realised how bitter my life had become and how it was affecting my children and my family as a whole. I asked to see the MSP Counsellor. After my session, I started to understand the importance of my role as a mother, a sister and a daughter. My session with the Counsellor empowered and helped me to see how strong I have been, helped me to identify some healthy coping mechanisms and also to prioritise my chores so that I can have more time with my children as well as for myself.

MSP also advised me to see the Department of Social Welfare for financial assistance and helped me to put together everything that is needed in order for me to qualify for the assistance. My time with MSP changed my perspective and helped me to see things in a different way. Now I feel less stressed and more positive to continue my beautiful life as a mother, a daughter and a sister. Thank you! I am a 24 year old iTaukei mother who almost killed myself and my three year old daughter due to anger, frustration and misunderstanding. After a heated argument with my husband one afternoon, I decided to end my life together with my 3 year old daughter's. I was so angry with my husband that I decided to jump out of a moving vehicle, but somebody stopped us and took us to the nearest police station. At the station, the Police told me that I will be taken to MSP for counselling.

It was the first time I had been to counselling and I found it very unique due to the environment that was created. Even though I was at fault, I didn't feel I was being judged and that allowed me to talk about things that I have never shared with anyone before. I cried, I laughed and I really felt lighter and at ease.

The MSP Counsellor also asked for my husband to be brought in which was embarrassing at first, but it really helped in the end. I have been married for five years and as a modern and educated woman, I always do things my own way. My husband is a very quiet man and I had never heard any complaints from him. However to my surprise, my husband disclosed everything in the counselling session including how my behaviour had been affecting him for years.

I was sad and hurt while listening. I didn't realise how my behaviour was affecting our relationship in a negative way. I felt bad but I was thankful that through the session we were able to talk about things that had been creating stress for many years. The counselling helped me to see that suicide wasn't the answer to my problems. My husband and I felt empowered to work on our relationship and learn how to communicate effectively. It was a new day for both of us. We cried, hugged each other and realised how our stupid misunderstanding could have taken mine and my little girl's life. Now we understand each other better and we have promised ourselves that we will help each other to build a better family life together, especially for our little daughter. Thank you MSP for saving our lives.

Financials

UNUSUAL TRANSACTION

In the opinion of the Board of Trustees, the results of the operation during the financial year were not substantially affected by any item, transaction or event of an abnormal character, nor has there arisen between the end of the financial year and the date of this report any item, transaction or an event of an abnormal character likely in the opinion of the Board of Trustees to affect substantially the results of the organisation in the current financial year.

SUBSEQUENT EVENTS

No matter or circumstance has arisen since the end of the financial year that has significantly affected or may significantly affect the operations of the organisation, the results of those operations or the state of affairs of the organisation in financial years subsequent to the financial year.

OTHER CIRCUMSTANCES

At the date of this report, the Board of Trustees is not aware of any circumstances not otherwise dealt with in this report or financial statements which would render any amounts stated in the financial statement misleading.

Dated this 10th day of September 2019

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

istee

Country Director

QUALIFIED OPINION

We have audited the accompanying financial statements of Medical Services in the Pacific ("the Organisation"), which comprise the statement of financial position as at 31 December 2018, the statements of income and expenditure, changes in accumulated funds and cash flows for the year then ended, and notes, comprising significant accounting policies and other explanatory information as set out in notes 1 to 11.

In our opinion, except for the possible effects of the matters described in the Basis for Qualified Opinion section of our report, the accompanying financial statements give a true and fair view of the financial position of the Organisation as at 31 December 2018, and of its financial performance and its cash flows for the year then ended in accordance with International Financial Reporting Standards for Small and Mediumsized Entities (IFRS for SME's).

BASIS FOR QUALIFIED OPINION

Income from sources other than specific grants

Income from sources other than specific grants, principally being donations and fundraising income, are significant sources of revenue for the Organisation. The Organisation has determined that it is impracticable to establish sufficient controls over the collection of these revenues prior to entry into its financial records.

Accordingly, as the evidence available to us regarding revenue from these sources was limited, our audit procedures with respect to income from sources other than specific grants had to be restricted to the amounts recorded in the financial records. We therefore are unable to express an opinion whether income from sources other than specific grants, is complete.

We conducted our audit in accordance with International Standards on Auditing (ISAs). Our responsibilities under those standards are further described in the Auditor 's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Organisation in accordance with International Ethics Standards Board for Accountants Code of Ethics for Professional Accountants (IESBA Code), and the ethical requirements that are relevant to our audit of the financial statements and we have fulfilled our ethical responsibilities in accordance with these requirements and the IESBA Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified opinion.

Auditor's Responsibilites for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with International Standards on Auditing (ISAs) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

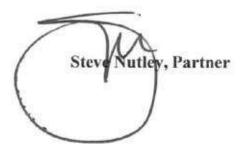
• Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

 Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organisation's internal control.

- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organisation's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organisation to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

KPMG KPMG 10 Septembes, 2019 Suva, Fiji



Financial Statements

STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED 31 DECEMBER 2018

	2018 \$	2017 \$ Restated
INCOME		
Grant income	1,175,851	1,196,579
Grant income	30,897	11,326
Total income	1,206,748	1,207,905
EXPENSES		
Administrative and professional cost	(3,371)	(1,993)
Advertisement, marketing and fundraising	(12,924)	(16,423)
Consultancy	(1,120)	(28,250)
Depreciation	(80,302)	(33,797)
Insurance	(8,491)	(13,512)
Medical services	(27,615)	(24 ,996)
Motor vehicle expense	(21,450)	(12,095)
Office expenses	(30,086)	(31 ,899)
Rent expense	(74,437)	(66,302)
Repairs and maintenance	(7,260)	(5,541)
Staff Cost	(983,742)	(852,032)
Training and workshop	(28,236)	(14,969)
Travel, telecommunications and utilities	(70,638)	(90,164)
Total expenses	(1,349,672)	(1,191,973)
Deficit before finance charges	(142,924)	15,932
Finance costs	(267)	(255)
Net surplus/(deficit) for the year	(143,191)	15,677

STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED 31 DECEMBER 2018

ASSETS	2018 \$	2017 \$ Restated
CURRENT ASSETS		
Cash and cash equivalents	493,198	307,050
Inventory	6,482	6,482
Other receivables	89,481	19,065
Total current assets	589,161	332,597
NON-CURRENT ASSETS		
Property, plant and equipment	145,830	202,909
Total non-current assets	145,830	202,909
TOTAL ASSETS	734,991	535,506
LIABILITIES		
CURRENT LIABILITIES		
Salary accruals	9,079	-
Provision for annual leave	31,253	44,973
Deferred revenue	533,503	186,186
Total current liabilities	573,835	231,159
TOTAL LIABILITIES	573,835	231,159
NET ASSETS	161,156	304,347
ACCUMULATED FUNDS		
Opening balance	304,347	288,670
Accumulated surplus/(deficit)	(143,191)	15,677
TOTAL ACCUMULATED	161,156	304,347

STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED 31 DECEMBER 2018

STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED 31 DECEMBER 2018

Accumul	ated Funds \$	Total \$		2018 \$	2017 \$
Balance as at I January 2017	288,670	288,670	Cash flows from operating activities		
Total comprehensive income for the year, net of tax			Cash receipts from grants and donations	1,550,709	1,056,698
Initial surplus for the year	(90,558)	(90,558)	Payments to suppliers and employees	(1,344,429)	(856,337)
Deferred income adjustment	151,207	151,207	Cash generated from operations	206,280	200,361
Employee benefits	(44,972)	(44,972)	Interest paid	(267)	(255)
adjustment			Interest received	3,358	2,084
Other comprehensive income for the year, net of tax	-	-	Net cash from operating	209,371	202,190
Restated total comprehensive income for the year	15,677	15,677	activities		
-			Cash flows from investing activities		
Restated balance as at 3 1 December 2017	304,347	304,347		(27.222)	(01 025)
-			Payments for property, plant and equipment	(23,223)	(81,825)
Restated balance as at 1	304,347	304,347			
January 2018			Net cash used in investing activities	(23,223)	(81,825)
Total comprehensive income for the year, net of tax			Net increase in cash and cash equivalents	186,148	120,365
Net (deficit) for the year	(143,191)	(143,191)	Cash and cash equivalents	307,050	186,684
Other comprehensive income for the year, net of tax	-	-	at the beginning of the year	307,030	100,004
Total comprehensive income for the year	(143,191)	(143 ,191)	Cash and cash equivalents at the end of the year	493,198	307,050
Balance as at 31 December 2018	161,156	161,156			

Uplift Project

How we started by Liz Baker (Founder of Uplift Project)

MSP is delighted to partner with the Uplift Project in serving women and girls in the communities. The Founder, Liz Baker takes you through on how it all started.

In 1992, I became aware of the need for bras in Fiji whilst staying in a 4 star resort. I was being waited on by a 20DD woman who did not have a bra. Australians do not like power imbalance. Many of us see ourselves as the equal of the staff who take care of us, and it made me ashamed that this woman did not have this small piece of dignity that Australians take for granted. Uplift started in 2005 at the request of an Aussie expatriate aid worker, Heather Van Vlokhoeven, who has martial links to Coral Coast. We started by trying to collect 1,000 bras for the women of coral coast.

We have now send 2 1/2 million bras to about 21 African/ Asian/ Pacific countries, and supplied women's refuges in our own country. We have branches in NZ and Singapore collecting, and branches in Fiji, Botswana and Solomons distributing.

We know that what we provide is not generally health, education or employment, but a small dignity for adult women. To our knowledge we are still the only charity in the world with bras as their primary focus. Particularly for larger breasted women a bra can save embarrassment and humiliation. For breast feeding women, it provides comfort and a way to catch leaks. A breast form provides privacy and dignity after mastectomy for breast cancer. And of course, a bra allows women to play sport.

The secondary gains of bra distribution are interesting. Women feel valued as individuals, (which they are), they come together and talk, hear lectures on health and sexual and domestic violence. In one instance bras were given to PNG women who brought babies in for immunization, increasing the immunization rate. Also women learn that they are capable of organizing a complex task like this, and handling the legal requirements, which builds their capacity. Huge effort goes into distributing bras, particularly in island nations, where transport is complex. In Solomon Islands 2 men once put 200 bras in a backpack each and walked them 12 hours over the mountain to get to villages otherwise a long boat journey around the coast. The Fiji Distribution Team, 12 women, 3 box handlers, undertake 1-2 week long bra fitting trips to get to remote communities, for no pay. They can fit over a thousand women a day, 3-4 bras each. Often there is lots of laughter and smiles, but it is exhausting work.

Uplift has over 400 volunteers in 6 countries, spreading this little dignity.



Nakalavo Village,Sigatoka Valley



Muani Village School,Kadavu







International Women's Day celebration with Suva Market vendors and Westpac Banking Corporation.

With thanks from the 2018 MSP Governing Board

Mr. Don Angikiamo - Board Chair 2018 Mr. Suluo Daunivalu - Founding Board Chair 2010, Secretary Ms. Jennifer Poole - Founder, Executive Director 2018 Ms. Veronica Thoms - Management Collective Member Ms. Loren Eastgate - Management Collective Member Ms. Kelly Robertson - Board Treasurer Dr. Rachel Devi - Management Collective Member Ms. Sachiko Soro - Management Collective Member And the MSP Trustees, Ms. Alicia Sahib, Mr. Tevita Ravumaidama, and Dr. Tamara Kwarteng

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