NABILAN PROGRAM:

ENDING VIOLENCE

AGAINST WOMEN IN

TIMOR-LESTE

Progress report

1 July – 31 December 2017

Volume 1

Supported by the Australian Government



C:\Users\Anna\AppData\Local\Microsoft\Windows\INetCache\Content.Word\TAFVLogo_CMYK.TIF

TABLE OF CONTENTS

List of Acronyms

1. Executive Summary 1

2. Context 5

3. Progress towards outcomes

*Prevention 7*

*Services 15*

*Community-based approaches (CBA) 20*

*Access to justice 24*

4. Monitoring, evaluation, and learning 29

Annex 1.1: Consolidated Beneficiary Data - PRADET, Casa Vida, Uma Mahon Salele & ALFeLa 31

Annex 1.2: Prevention activity participant data - FUNDEF, Ba Futuru, TLMDC,   
PRADET 42

Annex 2: Grant Summary Table 43

LIST OF ACRONYMS

ADTL *Asosiasaun Defisiente Timor-Leste* (Disability Association of Timor-Leste)

ALFeLa *Asisténsia Legál ba Feto no Labarik* (Women and Children’s Legal Aid)

CBA Community-based approaches

CLE Continuing Legal Education

CMs Community Mobilisers

CNRT *Congreso Nacional de Reconstrução de Timor* (National Congress for the Reconstruction of Timor)

CSO Civil society organisation

CTRA *Centro Treinamento e Recurso Aileu* (Aileu Training & Resource Centre)

DFAT Department of Foreign Affairs and Trade

DPO Disabled people’s organisation

EOPO End of Program Outcome

EVAW Ending violence against women

FCJ *Forum Communicacao Juventude Oratorio Dom Bosco* (youth and women’s shelter)

FHFatin Hakmatek

FRETILIN *Frente Revolucionária de Timor-Leste Independente* (Revolutionary Front of Independent East Timor

FUNDEF *Foin Sa’e Unidade Dezenvolve Futuru* (United Youth for Developing the Future)

GoTL Government of Timor-Leste

INDMO *Instituto Nacional de Desenvolvimento de Mão-de-Obra* (National Institute for the Development of Human Resources)

IOs Intermediate Outcomes

JSMP Judicial System Monitoring Programme

KHUNTO *Kmanek Haburas Unidade Nasional Timor Oan* (National United Timorese for Beautiful National)

LGBTI Lesbian, Gay, Bi-sexual, Transgender and Intersex

M&E Monitoring and Evaluation

MoH Ministry of Health

MoU Memorandum of Understanding

MO Municipal Officer

MSS Ministry of Social Solidarity

NAP-GBV National Action Plan on Gender-Based Violence

OIS Organisational and institutional strengthening

OSMM Organisational Strengthening Milestone Matrix

PD *Partido Democrático* (Democratic Party)

PDC Personal Development Courses

PHD Partnership for Human Development

PLP *Partidu Libertasaun Popular* (Popular Freedom Party)

PNDS *Programa Nasional Dezenvolvimentu Suku* (National Suku Development Program)

PNTL *Polícia Nacional de Timor-Leste* (National Police of Timor-Leste)

PRADET Psychosocial Recovery and Development in East Timor

RHTO *Ra’es Hadomi Timor Oan* (Loving disabled Timorese)

SEIGIS Secretary of State for Gender Equality and Social Inclusion

SEM Secretary of State for the Socio-economic Support and Promotion of Women

SOPs Standard Operating Procedures on Case Management and Referral

TLMDC Timor-Leste Media Development Centre

UNFPA United Nations Population Fund

VPU Vulnerable Person’s Unit of the National Police of Timor-Leste

1. EXECUTIVE SUMMARY

Nabilan is a two-phase ending violence against women (EVAW) program, from April 2014 to March 2022. The goal of Nabilan is to reduce the proportion of women in focus areas (Manufahi, Dili, Suai, Oecusse, Maliana, and Baucau) who have experienced violence in the previous 12 months, and to improve wellbeing for an increased number of women and children who have been affected by violence. Nabilan achieves this through three pillars of work: Prevention; Services; and Access to Justice. The financial expenditure during the reporting period of 1 July 31 - December 2017 was USD 1,428,745 (AUD 1,915,200). This report is submitted in compliance with Grant Agreement 69943 between the Commonwealth of Australia, Department of Foreign Affairs and Trade (DFAT), and The Asia Foundation (the Foundation).

At the end of this reporting period, which represents the new end date of Phase I of the program (see below Section 2, Context), Nabilan achieved the majority of expected Intermediate Outcomes (IOs), and End of Program Outcome (EOPO) 3. Nabilanalso made substantial progress towards achieving EOPOs 1a, 2a and 2b, and remains on track to achieving these EOPOs by the end of Phase II.

Most targets from the MEF were met or in some cases greatly exceeded during Phase I. It is notable that the number of clients seen by Nabilan-supported services experienced an average annual increase of 266% over three years on the baseline of 2014;[[1]](#footnote-1) significantly exceeding the total targeted increase of 5% per annum in the MEF for Phase 1. Other targets met or exceeded include reduction in percentage of people in Manufahi who displayed negative attitudes to gender equity and violence, the number of community mobilisers signing MoU’s with Nabilan for participation in SASA!, the percentage of grantees implementing adequate gender equity policies or practices, increased use of appropriate messaging and terminology and citations of Nabilan generated findings by SEM/SEIGIS and stakeholders, completion of policies and SOPs, and completion of the Certificate III in Social Services by MSS staff. There have been some delays in the CBA work in Manufahi (IO 1.3), which should be back on track in the next reporting period. Over the past two years, new client numbers have held largely steady, showing that partners are already at maximum capacity in their delivery of services. More limited staffing resources in Nabilan has also been a challenge and restricted technical assistance offered to partners to improve their service delivery.

As a result of funding restrictions, Nabilan did not have specialist M&E support during this reporting period, and this impacted on data collection and analysis, and the ability to demonstrate outcomes as fully as required. The Pillar teams and Team Leader took on all responsibility for M&E during the reporting period. As part of Nabilan Phase II, a draft MELF was developed and will be finalized in 2018. There will also be a revision of monitoring tools, including the Case Management Assessment tools (CMAT) for services partners, and CBA tracking tools.

During the reporting period Nabilan has contributed to the professionalization of the Timorese workforce, and the improvement of the quality of service provision to victims of violence by providing the Certificate III in Social Services (a national level qualification) which has now been completed by over 40 students from 13 organisations. Nabilan’s prevention messaging has also reached over 160,000 people. Key achievements during the reporting period are summarised below:

**EOPO 1a: Fewer men in focus areas are using violence against women and children.**

* Violence prevention initiatives implemented by prevention partners directly involved 512 people (262 women and 250 men) in Dili, Ermera, Manufahi, Manatuto, Liquica, Viqueque, Covalima, and Baucau (not including many TLMDC radio show listeners and attendees of Ba Futuru performances).
* Participants in prevention initiatives illustrated reduced tolerance and use of violence against women and children – refer to pre/post activities questions in Figure 1, 2, 3 & 4 below.
* All partners showed increased effectiveness, based on the prevention effectiveness assessment tool – refer to Chart 1 below.
* Nabilan 16 Days of Activism against Gender-Based Violence public service announcement films on violence prevention, made in collaboration with *Grupu Feminista*, was viewed over 75,000 times and radio versions broadcast nationally.
* A further prevention message *Lafaek* magazine, designed by Nabilan, will reach over 85,000 households across Timor-Leste.
* SEIGIS frequently cites the Nabilan Baseline Study data in public presentations, compared with no citations to reliable prevalence data in 2015.

**EOPO 2a: More women and children are being assisted by comprehensive, quality, CSO and government support services in hub districts of Dili, Baucau, Bobonaro, Covalima and Oecusse.**

* Civil society organisation (CSO) partners (ALFeLa, Casa Vida, PRADET and Uma Mahon Salele) supported a total of 556 new clients, comprising 530 (95%) new female clients and 26 (5%) new male clients. CSO partners supported a total of 536 new clients during the previous reporting period.
* Of all new clients, 186 clients (33%) were children under 18 years of age and a significant percentage of new female clients were vulnerable: 14% have no formal education; 3% have a disability; 14% are female head of households; and 8% do not speak Tetum.
* Clients (new and existing) received a total of 3,941 services from NabilanCSO partners, including referrals, legal services, medical treatment, temporary accommodation, shelter, counselling, life skills training, and re-integration support. This was an increase compared with 3,654 services provided during the last reporting period. This brings the total number of services supported by Nabilan to more than 21,000 in Phase I.
* Nabilan continued to strengthen the reach of services for vulnerable women and girls:
  + Nabilan contracted *Asosiasaun Defisiente Timor-Leste* (disability rights organisation, ADTL) to conduct an accessibility assessment of PRADET’s Fatin Hakmatek (FH) Baucau building.
  + Nabilan also supported ADTL to train all Nabilan CSO service providers in Dili and the municipalities on working with clients with disabilities.
  + Nabilan provided training to all CSO service providers in Dili and the municipalities on gender, child protection and positive discipline techniques.
  + Nabilan, ALFeLa and JSMP partnered with the Office of the United Nations High Commissioner for Human Rights to provide training to Disabled People’s Organisations (DPOs) and LGBTI groups on monitoring and documenting human rights violations.
* The training provided by Certificate III in Social Services is helping to increase quality of service provision. Nineteen students from 9 organisations (PRADET, Casa Vida, FOKUPERS, ALFeLa, ACbit, Bairo Pite Clinic, RHTO, Marie Stopes International, and DNDS – MSS) officially graduated from the first round of the Certificate III in Social Services and received their certificates from the national vocational accreditation body, *Instituto Nacional de Desenvolvimento de Mão-de-Obra* (INDMO). The second round of the Certificate III in Social Services with a total of 24 students from 12 organisations (PRADET, Casa Vida, FOKUPERS, ALFeLa, ACbit, Bairo Pite Clinic, RHTO, Marie Stopes International, HAI, Estrela+, FCJ and Youth off the Street) finished their 132 hours’ of class time, 88 teaching session, and will now need to complete 10 assessments for graduation.
* Nabilan staff drafted the SOPs on Case Management and Referral, which was launched by MSS during this reporting period. Nabilan supported the production and provided socialisation training for MSS staff in Bobonaro and Liquica. The SOPs will help improve quality of service delivery by all referral network members, including MSS.

**EOPO 2b: Women and children affected by violence in selected non-hub districts are accessing community-based support.**

* All 14 Community Mobilisers (CMs) continued to be actively involved in reducing violence against women and children in Suku Letefoho: the CMs completed 24 activities with 133 community members, and CMs are displaying attitude and behaviour change.
* The CMs and the community leadership in Suku Letefoho have an increased understanding of the referral network, their role in supporting women and children who experience violence, and continue to support the CBA work.

**EOPO 3: More women and children affected by violence have satisfactory outcomes and processes of resolving their cases, including support received, legal decisions, and an increased feeling of safety.**

* ALFeLa supported 177 new clients and successfully advocated with MSS to provide social assistance for 47 clients. The second independent audit of ALFeLa conducted in July 2017 found some key improvements in the quality of ALFeLa’s case work.
* As a result of JSMP’s strong advocacy, the courts are continuing to impose additional monitoring obligations on domestic violence offenders. During this period, JSMP monitored 5 domestic violence cases which resulted in an obligation to periodically report to the court or police. Since JSMP first began advocating on this issue in 2014, there has been increasing recognition of the importance of offender monitoring.
* Nabilan assisted with improving access to justice for women and children by holding continuing legal education sessions with Timorese judges to increase their understanding of civil and family law, and cases involving minors and parental authority. This event responded to a specific request from the Timor-Leste Judges’ Association for training support.

1. CONTEXT

Parliamentary elections were held in July 2017. FRETILIN won the most votes, and was invited by the President to form a government, but did not hold a majority in the parliament despite forming a parliamentary coalition with PD. The second most voted party, CNRT, formed a parliamentary coalition with two other small parties (PLP and KHUNTO) and held the parliamentary majority. Due to disagreements between the two parliamentary blocks, the government’s program and 2017 rectified budget were not passed. The 2018 budget was also unable to be passed.

The failure to pass the 2018 State Budget, and the announcement on 26 January 2018 of the dissolution of parliament leading up to new elections, has resulted in no government funding for service providers. This not only affects Nabilan partners, but also other essential service providers who rely largely on MSS funding (including *Forum Communicacao Juventude Oratorio Dom-*FCJ, a shelter for women and children in Dili; and FOKUPERS). These service providers rarely receive government funding until July. However, because the new elections will not be held until May, the new government is unlikely to be able to distribute funds to civil society organisations before the end of 2018. This funding crisis will have a negative impact on delivery of services for women and children victims, and may mean that many victims will be left without safe accommodation.

PRADET did not receive the funds (USD 85,000) that were transferred under the 2017 State budget from the Prime Minister’s Civil Society Fund to the Ministry of Health (MoH), specifically for the purpose of supporting PRADET’s Fatin Hakmatek (FH). This was despite PRADET signing a new MoU with the MoH as a prerequisite for receiving the funding. There are clearly public financial management issues at the MoH which are beyond the scope of the Nabilan program. Nabilan notified DFAT of this issue during the reporting period.

During this reporting period, there were also new opportunities to strengthen Nabilan’s engagement with government, and reach the broader Timorese community. On 13 November 2017, the Timor‑Leste Judges’ Association was accepted as a member of the International Association of Judges. Nabilan supported the Association in their application, including organising the inspection by a Rapporteur from the International Association of Judges. This further strengthens international linkages and the independence of the judiciary in Timor-Leste.

After the formation of government in August 2017, a new Secretary of State, Sra. Laura Menezes Lopes, who has a strong background in the Timorese women’s movement, was appointed to lead as Secretary of State for the Socio-economic Support and Promotion of Women (SEM). There are early indications that this change will broaden the scope for Nabilan to engage with the Government of Timor-Leste (GoTL). For example, since Sra. Lopes took up the position, the name of SEM has changed to Secretary of State for Gender Equality and Social Inclusion (SEIGIS), suggesting a clearer political will to address power inequalities. In December 2017, SEIGIS also took a strong and influential position on victim-blaming attitudes expressed by a representative of another Government ministry, resulting in a formal retraction of the statement.

During the reporting period, the independent feminist movement, *Grupu Feminista iha Timor*, has gained significant momentum. The movement’s strong advocacy responses to the GoTL on family planning and violence against women have gained international media attention, and their Facebook group has increased to almost 450 members. As an active and independent feminist movement is a crucial pre-cursor for wider social norms change on gender equity, this is a very positive development.

**Nabilan Phase II**: As evidenced by the Nabilan Baseline Study 2015, the prevalence of intimate partner violence against women in Timor-Leste is the highest in Asia.[[2]](#footnote-2) The Timor-Leste Demographic and Health Survey conducted in 2016 also showed high prevalence rates.[[3]](#footnote-3) Importantly, both surveys found that most women do not seek help from formal services, and there is a strong relationship between experiences of violence and attitudes which normalise violence. Therefore, Nabilan’s approach to primary prevention, and increasing access to formal services as well as community-based helping mechanisms, remain highly relevant.

In this context, DFAT announced that it was awarding the second phase of its EVAW program in Timor‑Leste (2018 – 2022) to The Asia Foundation, with the Deed of Amendment to the Grant Agreement being signed on 9 August 2017. The reduction in Nabilan’s funding envelope in Phase II will limit certain activities, including technical assistance and grants to CSOs.[[4]](#footnote-4) During August and September, with the assistance of a consultant, Nabilan developed a new theory of change, program logic, Monitoring, Evaluation and Learning Framework (MELF) and Program Document which were submitted on 30 October 2017.

1. Progress Towards Outcomes

Prevention



Still image from Nabilan PSA film

|  |  |
| --- | --- |
| **Grants disbursed during this reporting period:** US $68,389.33 | |
| **Partners:** | **Key government stakeholders:** |
| Foin Sa’e Unidade Dezenvolve Futuru (FUNDEF)  Timor-Leste Media Development Centre (TLMDC)  Ba Futuru  Psychosocial Recovery and Development in  East Timor (PRADET) | Secretary of State for Gender Equality and Social Inclusion (SEIGIS)  **Total number of participants in prevention activities:** 512 (262 women and 250 men) |

|  |  |
| --- | --- |
| **Progress towards Outcomes** |  |
| **EOPO 1a:** Fewer men in focus areas are using violence against women and children. | *On track* |
| **IO 1.1:** CSOs are designing and implementing coordinated and effective research and evidence-based primary prevention initiatives that target behaviour change in selected focus areas. | *Achieved* |
| **IO 1.2:** Community members in selected focus areas are involved in primary prevention initiatives and demonstrate reduced tolerance of violence against women and children. | *Achieved* |
| **IO 1.3:** Program partners and stakeholders, including The Asia Foundation, CSOs, and SEM are institutionalising gender equity and increasing their use of evidence in advocacy and messaging on violence against women and children. | *On track* |

**Summary progress towards achieving EOPO 1a**

Nabilanis **on track** tomaking a substantial contribution towards achieving EOPO 1a during this reporting period. Post-testing (2-4 months later) indicates that the MEF target for Phase 1 has been met by the end of 2017, with significantly less than half the participants in primary prevention initiatives displaying negative attitudes to gender equity and violence. The positive reduction in the first four criteria tested, and positive increase in the last criteria is illustrated for this reporting period in Chart 1. Similarly positive data is also available for the previous reporting period. A new baseline will be constructed for this work in May 2018. The proportion of men reporting perpetrating violence against women in the last 12 months will be measured in the Endline Survey (2021).

Prevention activities implemented by partners in Dili, Ermera, Manufahi, Manatuto, Liquica, Viqueque, Covalima, and Baucau showed positive attitude change towards violence against women and children, including reduced tolerance of violence. Pre and post testing (conducted 2–4 months after each activity) highlighted that these changes are sustainable; and will contribute towards fewer men in focus areas using violence against women and children. Nabilan activities in support of this EOPO also included continued engagement with the emerging local feminist group, *Grupu Feminista*, including on developing targeted prevention messaging for the Timor-Leste context during the 16 Days of Activism against Gender-Based Violence. Using best practice and positive messaging, this approach also has potential to create lasting social norms change.

There have been continuing difficulties with inconsistent prevention approaches used by other organisations in the sector, which undermine Nabilan**’**s approach by reinforcing negative stereotypes. The limited reach of prevention partners, and intensive technical assistance required from the Nabilanteam, are also challenges for achieving EOPO 1a. While there has been increasing understanding by SEIGIS of the importance of primary prevention and the utility of the NabilanBaseline Study, further efforts are required across government to integrate positive prevention approaches.

**IO 1.1: CSOs are designing and implementing coordinated and effective research and evidence-based primary prevention initiatives that target behaviour change in selected focus areas.**

Prevention partner organisations (FUNDEF, PRADET, TLMDC and Ba Futuru) continued to implement primary prevention initiatives including radio programs for youth, positive discipline activities in schools, and personal development courses for couples. Using the Prevention program effectiveness assessment tool,[[5]](#footnote-5) Nabilan was able to demonstrate that all prevention partners have consistently improved their effectiveness between July 2016 and December 2017 (See Chart 2), thereby exceeding their MEF target of 60% of initiatives demonstrating improved effectiveness. 91% of prevention partners sent representatives to all coordination meetings and workshops related to prevention as organised by Nabilan in 2017, exceeding the MEF target of 75%. The Prevention Pillar supported the achievement of this IO by continuing to provide intensive technical assistance for prevention partner organisations, designed to support the integration of evidence-based prevention work, accompanied by regular monitoring. Responding to partner requests, Nabilan delivered training on SASA! participatory activities to prevention partners and shared the translated activity materials for partners to use in their own work with communities and with their staff.

**IO 1.2: Community members in selected focus areas are involved in primary prevention initiatives and demonstrate reduced tolerance of violence against women and children.**

This IO has been **achieved** with significant numbers of community members involved in primary prevention activities and demonstrating reduced tolerance of violence against women and children. The MEF target (five people) for the number of community mobilisers signing MoU’s with Nabilan for participation in SASA! has been exceeded, with 14 CMs signed up and continuing to actively participate during 2017. A total of 512 people (262 women and 250 men) were counted as directly involved in prevention initiatives in Dili, Ermera, Manufahi, Manatuto, Liquica, Viqueque, Covalima and Baucau. In addition, many people listened to TLMDC’s radio show and attended Ba Futuru’s performance. The decrease in participants compared with the previous reporting period (1,160 participants in the last reporting period) was due to the closure of the grant with Sub-Justice Peace Commission Liquica in June. Inclusion of people with disabilities slightly decreased, from five in the last period to three in this period, however this represents an increase from 2016.

Using pre- and post-testing, and qualitative follow up interviews, across all partner prevention initiatives, Nabilan is able to demonstrate a reduction in tolerance for violence against women and children in selected focus areas. In the pre-tests, 50% of women and 41% of men agreed or strongly agreed that ‘sometimes you need to beat a child to make them listen and change their behaviour.’ Several months later, only 25% of women and 22% of men agreed. This shift is apparent, for example, from the reflections of a teacher in Ba Futuru’s program from Marinir Primary School, who said: *“I am very proud of the training and accompaniment that I received from Ba Futuru. In the past I always punished my students and my own children. Now, after participating in the training and being observed by the Director of the school and by Ba Futuru, I have become more conscious and aware of the negative impacts of using violence against children when they do something wrong. This feeling really helps me avoid using violence against children and is helping me to develop a positive way of educating children in the future.”*

There was also a steep increase in both male and female participants’ recognition of the harmful effects of violence against women. In the pre-tests, only 56% of women and 44% of men believed that violence against women can have negative consequences, while, in the post-tests, this increased to 89% of women and 91% of men.

As in the previous period, data also indicated that prevention initiatives significantly reduced participants’ tolerance of men’s use of violence against women (see Charts on Q1 – 4 below). Between the start of the prevention initiatives and several months later (2–4 months after each activity), the number of both men and women agreeing with each justification for a man to beat his wife decreased. Interestingly, although in the pre-tests, a higher proportion of female participants than male agreed with every justification, the post-test data suggests that the initiatives had a greater impact on reducing women’s tolerance of violence against women. A similar pattern was evident in the previous period.

Follow-up interviews with participants and their family members (conducted between 2–4 months after each activity) indicate that these changes are not just short-term and that these prevention initiatives are also having a positive impact on others, beyond the people who participated in the initiatives. The wife of one of the participants in FUNDEF’s program in Manatuto said: *“My husband has become a good example for other men. In the past, he always invited his male friends over to drink together, but now he no longer does this. My husband also now pays much more attention to those of us in his household. Previously, he didn’t care about our children’s schooling but now he is much more involved in our daughters and sons’ education. Now he and I share responsibilities in the home – for example, I grow the vegetables in the farm and he takes the kids to school. For the first time, I can now see my family living harmoniously. As a wife, I’m really happy with my husband, who has really changed his bad behaviour into behaviour that is good for our family.”*

A youth participant in TLMDC’s radio listening group in Suai also spoke about sharing the knowledge he had gained: *“Through this program, I was able to learn a lot of information that I have then shared back with my family and school friends, for example about how we cannot treat transgender people differently from anyone else because everyone has equal rights. I feel very proud because the Teki Toke Program brought us new ways of thinking that allow us to treat other people with dignity and respect.”*

It is also worth noting that in this period, the pre-test figures for tolerance of child abuse and of intimate partner violence were lower for both women and men, compared to the previous reporting period. It is not possible, without further research, to know the extent to which this is attributed to the Nabilan Program partners’ initiatives. However, given the partners worked in the same municipalities as in the last period, two partners – Ba Futuru and FUNDEF – worked in the same communities as in the previous period, and two partners ran their initiatives in Suku Letefoho in Manufahi, where Nabilan is also implementing its CBA work, this is likely to signify the start of broader community-level shifts in attitudes.

The activities conducted by partners during this reporting period that supported the achievement of this IO included:

* FUNDEF- two courses on non-violent communication and equality in the home;
* PRADET-three Personal Development Courses (PDC);
* Ba Futuru- two positive discipline trainings with parents, two trainings with students on conflict resolution and the referral network, two workshops with teachers on positive class management and the referral network, and an after-school music and drama club; and
* TLMDC-produced 16 episodes of the Teki Toke interactive radio program, equating to 18 hours of broadcast time and ran 50 Radio Listening Group discussions with youth.

Based on the results of the prevention effectiveness scores of partners, and positive trends in the pre and post assessments from partner activities, we can demonstrate that these activities are contributing to the broader shift in attitudes and behaviours. However, Nabilan does not compare prevention partners against each other, and it is clear from international research that coordinated and multiple approaches are required for effective prevention.

**IO 1.3: Program partners and stakeholders, including The Asia Foundation, CSOs, and SEM are institutionalising gender equity and increasing their use of evidence in advocacy and messaging on violence against women and children.**

This IO is **on track** with the MEF target of 100% of grantees implementing adequate gender equity policies or practices being met, and the MEF target related to increased use of appropriate messaging and terminology and citations of Nabilan generated findings by SEM and stakeholders also being met. A follow-up TAF Gender Equity survey was not conducted in the reporting period but will be conducted in 2018/19 to measure changes in TAF staff values against the 2015 baseline.

**Institutionalising gender equity:** Services and Access to Justice partners continue to perform at “high capacity” in terms of organisational gender equality (such as relevant policies in place, gender equity in management positions, parental leave practices etc.), based on the Organisational and Institutional Strengthening (OIS) assessments conducted with all partners during this reporting period. All prevention partners now have a sexual harassment policy and a gender equity policy. Activities conducted during the reporting period in support of this IO included continuing promotion of gender equity within the Foundation, and support to a wide range of organisations to ensure implementation of adequate gender equity policies and practices. Nabilan contributed to internal discussions within TAF worldwide about conducting a gender audit of the organisation, which will continue in the next reporting period. Nabilan also provided guidance to Marie Stopes on their internal gender audit by sharing the TAF gender equity survey template.

The Prevention Pillar provided a scholarship for two Timorese civil society actors – one from TLMDC and one from Bairo Pite Clinic – to attend UN Women’s Transformative Leadership for Gender Equality and Women's Rights course in Switzerland in July. The scholarship recipients have already begun using the skills they gained through the course to make their workplaces more gender equitable. UN Women sent very positive feedback on the two Timorese participants, saying that they, *“were wonderful in terms of their meaningful participation, knowledge and experience, and work. We are all inspired by what they have done and achieved and what they will be doing to advance gender equality and women’s rights agenda in Timor-Leste.”*

**Increasing use of evidence-based advocacy and messaging:** During the reporting period, SEIGIS cited the Nabilan Baseline Study data in several presentations, including at the National Action Plan on Gender-Based Violence 2017–2021 (NAP-GBV) technical workshop and at the International Human Rights Day conference on the Sustainable Development Goals. The Nabilan Baseline Study data is included as evidence in the new NAP-GBV 2017–2021. This is compared with no such citations of reliable prevalence and perpetration data by SEM/SEIGIS at the start of 2015. Nabilan alsocollaborated with The Equality Institute and the United Nations Population Fund (UNFPA) to produce a briefing paper outlining the differences in the Nabilan Baseline Study data and the 2016 Timor-Leste Demographic and Health Survey (DHS) data on violence against women, which will help SEIGIS and others better understand and more effectively use the NabilanBaseline data. The briefing paper is scheduled to be released in 2018.

The Prevention Pillar continued to support this IO by drawing on program learning and global best practice, combined with the local expertise and creativity of the *Grupu Feminista iha Timor*, to produce positive and inspiring context-specific preventing messages. As part of the 16 Days of Activism against Gender-based Violence, the Prevention Pillar worked with *Grupu Feminista to* produced three short public service announcement films on preventing sexual harassment, child abuse, and intimate partner violence. To date, the films have been viewed more than 75,000 times on Facebook and the television and radio broadcasts have reached people across the country, including in remote areas with limited or no access to internet. These films cost less than USD 7,000 to produce and were an excellent value for money method of reaching a large number of people with very effective positive prevention messaging. Global best practice shows that positive messaging is the most effective way to prevent violence, and it is to be hoped that other programs will follow Nabilan’s evidence-based example in the future.

The program also extended our partnership with CARE International to design one more comic using positive messaging to encourage community members to support women experiencing violence in an issue of the *Lafaek* magazine, which will reach roughly 85,000 households in Timor-Leste. The issue will be distributed in April 2018. The Prevention Pillar continued our support to Madre Rosalva from the *Centro Treinamento e Recurso Aileu* (CTRA) and we were invited by CTRA to run a booth in the Aileu Expo for three days to ensure that Nabilan prevention materials reached a wider audience in Aileu.

There was significant engagement on prevention between Nabilan and other Australian development programs. During this period, Nabilan: provided technical input on the Gender and Disability Action Plans of other DFAT-funded programs; met with the Partnership for Human Development (PHD) Education and Gender teams to discuss areas for potential collaboration on positive discipline; coordinated with the Timor‑Leste Police Development Program on the *Polícia Nacional de Timor-Leste* (national police – PNTL) Gender Working Group meetings; continued technical discussions with TOMAK and Hamutuk about the intersections of nutrition, violence, and household decision-making; and delivered training on gender equity and violence prevention to Programa Nasional Dezenvolvimentu Suku (PNDS).

Nabilan also increased its technical support to the independent feminist movement, *Grupu Feminista iha Timor*. In July, Nabilan attended a consultation workshop at the MoH on a new proposed Family Planning Policy. Concerned by the regressive and potentially harmful contents of this proposed policy, the Prevention Pillar alerted *Grupu Feminista* and, together with other members of civil society, supported *Grupu Feminista* in the drafting of a public petition and a formal letter to the then Prime Minister, Rui de Araujo. The Prevention Pillar then continued to link up *Grupu Feminista* with international media and networks to gain further interest. This quick and coordinated action resulted in the shelving of the proposed policy.

In November, Nabilan again collaborated with *Grupu Feminista* in a response to a film produced by the Embassy of the United States of America in Timor-Leste featuring a representative of the Ministry of Education making misleading and victim-blaming comments about ending violence against girls. Nabilan worked with *Grupu Feminista* to draft letters to both the U.S. Embassy and, separately, to the Ministry of Education. The Prevention Pillar Coordinator also maintained close contact with SEIGIS to ensure that *Grupu Feminista*'s messaging was consistent with that of SEIGIS. The Prevention Pillar Coordinator was invited to join other members of *Grupu Feminista* at a meeting on this issue. Within the same week, the film was removed and both the U.S. Embassy and the Ministry of Education issued formal public apologies.

**Other activities**

* Met with SEIGIS five times and maintained regular contact with key staff. SEIGIS did not request any technical assistance from Nabilan during this period but the program remains open to providing this.
* Reached 227 people (103 women and 125 men) via gender equity and violence prevention trainings to PNDS, Red Cross Timor-Leste (CVTL), Services and Prevention partners, and a Sport for Life youth group.
* Provided further guidance to UNFPA on the GBV chapter of their sexual and reproductive health manual for youth.
* Provided technical input to UN Women on their Safe Cities research.
* Delivered a session on the Prevention Toolkit for the Social Services Certificate III Course.
* Coordinated with UNFPA to discuss the Nabilan Baseline and DHS findings on disability.
* Regularly attended the Informal Gender Discussion Group meetings.
* Provided technical feedback to Ba Futuru and DFAT on social norms change messaging for violence prevention.
* Made two presentations about the Nabilan Baseline Study during this period: to international academics and practitioners at the Sexual Violence Research Initiative Forum in Brazil; and to local government and CSO stakeholders at the NAP-GBV workshop coordinated by SEIGIS and UNFPA in Timor-Leste.
* Submitted a paper on the Nabilan Baseline Study findings on mental health and violence to the 2017 Timor-Leste Studies Association Conference.
* Coordinated a TAF-wide competition during the 16 Days of Activism against GBV, involving a variety of activities including reflecting on feminist role models and painting a mural with gender-equitable messaging.
* Worked with *Grupu Feminista*to organise an event for World Contraception Day.

Services



Graduation ceremony for the 1st round of Certificate III – 6 December 2017

|  |  |
| --- | --- |
| **Grants disbursed during this reporting period:** US $ 233,716.14 | |
| **Partners:** | **Key government stakeholders:** |
| Casa Vida  PRADET - 5 Fatin Hakmateks  Uma Mahon Salele | Ministry of Social Solidarity (MSS)  Ministry of Health (MoH)  **Total number of new clients:** 379 |

|  |  |
| --- | --- |
| **Progress towards Outcomes** |  |
| **EOPO 2a:** More women and children are being assisted by comprehensive, quality, CSO and government support services in hub districts of Dili, Baucau, Bobonaro, Covalima and Oecusse. | *On track* |
| **IO 2.1:** See below section on Community-Based Approaches. |  |
| **IO 2.2:** Nabilan (and DFAT) are actively engaged with key government actors, particularly MSS, SEM, Ministry of Health and the Ministry of Finance to identify actions to enable access to quality, well-funded services for women and children who experience violence. | *Achieved* |
| **IO 2.3:** CSOs are providing increased quality and reach of services in focus areas to women and children affected by violence. | *On track* |

**Summary of progress towards achieving EOPO 2a**

Nabilanhas partially achieved EOPO 2a by the end of Phase I of the program, and is on track to achieve this outcome by the end of Phase II. A total of 556 new clients were supported by Nabilan partners in the reporting period, and a total of 3,319 were seen during Phase 1. This represents an overall increase of over 1000% over three years on the baseline of 2014; and exceeded the total targeted increase of 5% per annum in the MEF for Phase 1. During NabilanPhase I, more women and children were assisted by individual services provided by Nabilan partners (a total of 3,941 during this reporting period, and more than 21,000 individual services provided during Phase I). The number of new female clients with a disability identified and assisted by Nabilan partners increased by 400% over Phase I, although there was a decrease in the number of clients with a disability identified and assisted over this reporting period. While the number of new clients each reporting period has largely held steady, the total number of services provided have increased.

While the numbers of follow-up visits declined slightly during the reporting period, the total number of follow up visits for 2017 represents an increase of 23% on the total for the previous year, exceeding the MEF target of an annual increase of 10%. Services provided included referrals, legal services, medical treatment, temporary accommodation, shelter, counselling, life skills training, and re-integration support. Consolidated beneficiary data can be found at Annex 1.1.

There have been challenges in 2017 in assessing improvements in the quality of services provided to clients as a result of Nabilan interventions. The departure of the international Services Coordinator in 2017 meant that the Case Management Assessments to evaluate improved quality of services against the MEF targets were not completed to a comprehensive standard (see below IO2.3). Nabilan will review the Case Management Assessments process and tools used in Phase II to ensure continuing relevance. However, earlier data (2016) has demonstrated good results, with 96% (MEF target 90%) of case files assessed containing a completed client intake form which responded to Nabilan reporting format (i.e. good or average quality), 27% (MEF target 30%) of case files had a reintegration follow up form, 100% (MEF Target 50%) of case files assessed included a Client Outcome tool of at least ‘average’ quality (UMS only); and 62% (MEF Target 50%) of case files assessed included an Action Plan for reintegration of at least ‘average’ quality. During 2017 partners reported using the reintegration checklist (a key indicator of quality service delivery) in at least 660 cases.

Improvements in service delivery have been supported through a range of interventions, including technical assistance on complex cases, case management support, introduction of new tools, case audits and training. The training provided to CSO staff and government through the Certificate III in Social Services increased individual knowledge and skills, which will continue to contribute to improvements in service delivery. Nineteen students (17 women and 2 men) from nine organisations graduated from the first round of Certificate III in Social Services. Twenty-four students from twelve organization completed the second round. The new MSS SOPs on Case Management and Referral, which was launched by MSS during this reporting period, will also contribute to continued increase in the quality of services across CSOs and government. Nabilan also continued to integrate disability-sensitive services, including by working with ADTL and RHTO on physical adaptations to facilities, as well as providing specific training to partners on working with clients with disabilities.

A main challenge has been the limited resource capacity of partner service providers to reach an ever- increasing number of new clients, while improving the quality of their services. The Nabilan Baseline data and international experience also shows that only a small percentage of women will reach out to formal services, therefore Nabilan’s CBA work in Manufahi is key to expanding help for women and children. EOPO 2a also emphasises service quality, which is an important aspect of service delivery. Nabilan also continues to face challenges working with MSS as the key government partner, particularly on the provision of adequate government funding for services. During this reporting period, the use of the Psycho-Social Assessment and Reintegration Tools (Services M&E Tools) by services partners also decreased (579 times during this reporting period, compared with 745 times in the last reporting period). A review of the Services M&E Tools will be undertaken in the next reporting period to determine the reason for their decreasing use, and how best to balance service delivery needs with M&E requirements.

**IO 2.2: Nabilan (and DFAT) is actively engaged with key government actors, particularly MSS, SEM, Ministry of Health and the Ministry of Finance to identify actions to enable access to quality, well- funded services for women and children who experience violence.**

IO 2.2 has been **achieved** within existing constraints. The targets of the MEF have largely been achieved. Two policies/SOPs were revised by the end of 2016, meeting the MEF target. The consolidated SOPs on Case Management and Referral were launched on 11 December by MSS. Completion of the Certificate III in Social Services by MSS staff was according to targets. While there have been challenges in engaging with MSS at the policy level, a meeting was held with MoH on a possible MoU regarding transition of PRADET services.

Nabilan supported the achievement of this IO through extensive support to the development of the SOPs. They drafted the SOPs, convened consultation meetings with referral network members, printed the SOPs, and provided socialisation training for MSS staff and referral network members in Bobonaro and Liquica. Nabilan continued to meet with MSS to discuss collaboration in supporting services providers, and future technical support on socialisation of the SOPs. Nabilan also attended national level referral network meetings led by MSS. It is expected that the SOPs will help improve quality of service delivery by all referral network members, including MSS. At the policy level, Nabilan has faced challenges in effectively engaging MSS in planning and budgeting processes to fund essential service delivery. Nabilancontinued to take a flexible approach to engaging on these issues.

Other support for achievement of this IO included Services staff teaching a number of sessions at a Training of Trainers program run by the Foundation’s Community Policing Support Program for the PNTL, including the VPU, Community Police and Gender Department, regarding the need of clients and the referral network. This work further increases Nabilan’s engagement with government, and promotes access to services through the PNTL, who are often the first responders in cases of VAWC.

During this reporting period, Nabilan increased its engagement with the MoH, particularly regarding the possibility of future funding for PRADET through the MoH, and also on the involvement of health sector CSOs in the Certificate III Social Services Course (MSI, HAI, Bairo Pite Clinic – now Maluk Timor, and PRADET). Nabilan is now working towards a MoU with the MoH, and the development of this MoU will be ongoing in 2018. As with MSS, there have been challenges at the budgeting level, specifically for PRADET’s FHs, despite funding having been allocated from the Prime Minister’s Civil Society Fund to the MoH for this purpose. Nabilan also met with the new Secretary of State for SEIGIS, and received positive feedback on the Certificate III Social Services Course and the involvement of SEIGIS staff in the next round of training.

**IO 2.3: CSOs are providing increased quality and reach of services in focus areas to women and children affected by violence.**

As detailed above, CSO partners (ALFeLa, Casa Vida, PRADET and Uma Mahon Salele) provided increased reach and services in focus areas to women and children affected by violence, and despite issues with case management assessment data to evaluate quality, it is Nabilan’s assessment that this IO is **on track**. During Phase II, additional attention will be given to competing Case Management Assessments to the required standard.

By the end of 2017 the MEF target for reintegration checklists (800) over 2016-17 completed by partners was exceeded (total 1,450). The reintegration checklist focuses on objective and observable indicators of safety, such as extended family support, contact with the police and service providers, and freedom of movement. Of all new clients (556), 530 (95%) were female and 26 (5%) were male. One hundred and eighty-six clients (33%) were children under 18 years of age and a significant percentage of new female clients were vulnerable: 14% have no formal education; 3% have a disability; 14% are female head of households; and 8% do not speak Tetum. The MEF targeted an annual increase of 15% percentage of new female clients with one or more vulnerability characteristics. Across each six-month period from mid-2015 to the end of 2016, marginalised or at-risk traits identified by Services partners upon intake of new female clients increased by an average of 37%. In 2017, a total of 449 new female marginalized clients were identified, a decrease of 10% from 2016 (includes ALFeLa clients). No data is available on clients’ feeling of safety on reintegration visits because this was not included as a specific indicator in the reintegration checklist.

Nabilan staff continued to support progress towards this IO through the provision of technical support to partners on complicated cases, case management, and relevant tools. Quality is monitored through the annual Case Management Assessments. The assessments for the five PRADET FHs and UMS were conducted in July-August, with Casa Vida assessed in June. A total of 80 cases were assessed (representing approximately 20% of all new cases). The assessments found general improvements in file management, completeness of information, recording of referrals and confidentiality protections. Improvements are still needed in developing an appropriate security plan for clients, detailing a complete case history (beyond the immediate crisis), providing a follow-up plan and proper consent forms.

Before Nabilan started, most partners did not close cases, and did not have a clear strategy for determining how to interact with and support reintegrated clients. A significant achievement of the Nabilan program has been supporting partners to work out how to close cases. In this reporting period, 340 cases were closed. The closure of a case can mean that the client’s situation has stabilised, she is living well independently, and no longer requires support from the service provider. Nabilan has also promoted timely referrals by partners, and documentation of all referrals, to ensure continuity of services for clients. During this reporting period, partners made a total of 420 documented referrals, compared with 400 referrals in the last reporting period. Making properly documented referrals is a key focus of the SOPs on Case Management and Referral.

The Certificate III in Social Services is an important part of improving the overall quality of service provision, as well as the professionalism of service provider staff. Nineteen students from nine organisations (PRADET, Casa Vida, FOKUPERS, ALFeLa, ACbit, Bairo Pite Clinic, RHTO, Marie Stopes International, and DNDS – MSS) who attended the first round of Certificate III Social Services Course (conducted in the previous reporting period) graduated on 6 December 2017.

The second round of the Certificate III Social Services Course was attended by 24 students from 12 organisations, comprising CSOs who work with adults and children in shelters, sexual assault centres, reproductive health clinics, mental health programs and a DPO. This course runs over 132 hours, and involves 88 teaching sessions and 10 assessments. The training team visited all students in their workplaces to conduct workplace-based assignments, which is a core assessment component for completion of the course. Thirteen students passed the assessment requirements and 11 students need to attend some sessions in the third round of the course (to be conducted in July-December 2018) so they can complete the requirements and obtain their Certificate III. In addition to increasing their professional skills, the training is a good opportunity for students from different organisations to build a network and share their experiences.

The Director of FOKUPERS was very appreciative of the course, and stated that: *“…four staff who attended the first round have significantly changed their work to provide better services to the clients. It is very important to continue this course to increase the skill and knowledge for the people who are working in this area”* (Marilia da Silva Alves, 6 December 2017).

The Coordinator of Marie Stopes said that her staff shared a lot of useful and interesting ideas from the course back to the office. For example, the students have discussed with other colleagues the difference between empathy and sympathy, and guided team members through complex conversations on sexuality and gender. They have also made improvements in their management and communication skills, from which others can learn. Nabilan will undertake an independent review of the first two rounds of the Certificate III course in the next reporting period. A particular challenge has been students’ ability to pass written assessments without significant help from the facilitators.

**Feedback from students during the second round of the Certificate III Social Services Course:**

* *Through this course we learnt how to listen and not to be judgmental of our clients, and how to support them really well.*
* *I learned how to listen and analyse the risks to my clients. This course helps me a lot to do my work as a counsellor.*
* *Through this course, our network become broader and it’s become very easy to make referrals for clients to the partners.*
* *I understand better about client-centred approaches and how to prioritise the client in my work.*
* *Now I know how to give professional and ethical services to clients, with confidentiality, and know it is very important not to blame the clients.*
* *Through this training, I know how to manage my emotions, respect diversity and respect other people’s rights.*

Nabilan staff continued to support partners to resolve complicated cases, including one case where the Ministry of Social Solidarity (MSS) attempted to return an adult woman to a family situation where her life and that of her child would have been placed at significant risk. Nabilan staff worked with staff of two service providers to support the client.

Community-Based Approaches (CBA)



Community Mobilisers Xmas Party

|  |  |
| --- | --- |
| **Progress towards Outcomes** |  |
| **EOPO 2b:** Women and children affected by violence in selected non-hub districts are accessing community-based support. | *On track* |
| **IO 1.2:** Community members in selected focus areas are involved in primary prevention initiatives and demonstrate reduced tolerance of violence against women and children. | *Achieved* |
| **IO 2.1**: Local leaders and women’s groups in focus areas are actively protecting the rights of women and children and assisting them to access and benefit from the services they need. | *On track* |

**Summary of progress towards achieving EOPO 2b**

EOPO 2b is a new initiative based on the implementation of the SASA! (Start, Awareness, Support, Action) model of primary prevention developed by Raising Voices Uganda. Despite initial delays, Nabilanis now **on track** to achieve this EOPO by July 2020 (see below indicative timeline for completion). SASA! is a community mobilisation approach to preventing violence against women and HIV, and has been proven to be highly effective in preventing intimate partner violence. The Nabilan Program is adapting the SASA! approach by integrating prevention and services, to reduce the incidence of violence by working with people in the community to change their behavior and increase women’s access to help from both formal and informal sources.

All 14 Community Mobilisers (CMs) continued to be supported through the first phase (Start) and are on track to commence the second phase (Awareness) by July 2018. There have been some delays in this work, due to challenges in motivating the CMs and remotely monitoring the work of the Nabilan’s Municipal Officer (MO) in Manufahi. Despite these challenges, the CMs completed 24 activities with 133 community members during this reporting period, and CMs themselves are displaying attitude and behaviour change. At the community level, community leaders in suku Letefoho have demonstrated an increased understanding of the referral network, their role in supporting women and children who experience violence, and continue to support the CBA work. As the CBA work is at the first stage of building awareness in the community, it is not yet possible to demonstrate an increase in referrals to formal services as a result of the CMs’ activities. However, Nabilan partners received twenty new clients from Manufahi in 2017; and in one case, the Xefe Suku referred a victim to the hospital and helped to register a case with the police. Tracking tools developed in the next reporting period will start to systematically capture this data.

**IO 1.2: Community members in selected focus areas (Manufahi) are involved in primary prevention initiatives and demonstrate reduced tolerance of violence against women and children.**

This IO has been **achieved** with significant numbers of community members involved in primary prevention activities and demonstrating reduced tolerance of violence against women and children. The MEF target (five people) for the number of community mobilisers signing MoU’s with Nabilan for participation in SASA! has been exceeded, with 14 CMs signed up and continuing to actively participate during 2017. All 14 CMs who participated in the launch in March 2017 continued to be actively involved in reducing violence against women and children in Suku Letefoho: the CMs completed 24 activities with 133 community members between July to December. Two-thirds of these activities were monitored by Nabilan’s Municipal Officer (MO) in Manufahi. A redesigned Activity Outcome will be utilised to measure tolerance of violence towards women and children during 2018.

Nabilan provided three trainings for CMs to support their work. The first of these trainings was conducted in collaboration with the Services Pillar and focused on informal ways that CMs can help people experiencing violence in their community. In addition to the aforementioned refresher training, at the request of the CMs, Nabilan invited Marie Stopes International Timor-Leste to provide training on sexual and reproductive health, to build CMs’ confidence and capacity to respond to questions on this topic from community members. The MO also coordinated two group meetings with the CMs to share lessons and strategise on problem-solving. There have been some delays, due to challenges in motivating the CMs and remotely monitoring the work of the Nabilan’s Municipal Officer (MO) in Manufahi. Nabilan staff from Dili will travel more frequently to Manufahi to support the CMs and the MO in the next reporting period.

During this period, with guidance from Raising Voices, the CBA team adapted the Activity Outcome Tracking Tool and completed 10 of these forms. The Activity Outcome Tracking Tool measures the understanding and attitudes expressed by participants of CBA activities (such as their understanding of what is ‘violence’, a man’s ‘right’ to control women, and acceptability of some forms of violence). The results from this tool illustrate that almost all community members participating in CMs’ activities believe that violence is physical only, that men should have power over women in relationships, and that men and women should not share their responsibility or roles in the family. A smaller majority of the participants also believe that violence against women has no negative consequences. The team will continue to track changes in participants’ knowledge and attitudes in the next reporting period.

In late September and early October, Nabilan coordinated the visit of Katy Chadwick, Senior Program Officer from Raising Voices in Uganda. The Prevention and CBA teams participated in three days of reflection and training on the Awareness Phase of SASA! and received guidance on how to transition from the Start to the Awareness Phase. Katy Chadwick also accompanied the team to Manufahi, where she supported the CBA team to facilitate a two-day refresher training for the CMs on using the Start power poster and the comic book with communities, and provided practical feedback on the CMs’ activities with community members. An outcome of this visit was the development of a six-point guidance list of key tasks for the CMs to do in each engagement with the community. This list, and other resources, are being compiled into a laminated handbook that Nabilan will distribute to CMs in the next reporting period.

Katy Chadwick also helped the Nabilan team plan a realistic implementation timeline for the CBA work, given staffing and funding restrictions in early 2018. An indicative timeline is below:[[6]](#footnote-6)

1. Jan–Dec 2017: Start

During the first phase, community members are encouraged to begin thinking about violence against women and foster power within themselves to address these issues.

1. Jul 2018–June 2019: Awareness

The second phase aims to raise awareness about how communities accept men’s use of power over women, fueling violence against women.

1. Jul–Dec 2019: Support

The third phase focuses on how community members can support women experiencing violence, men committed to change, and activists speaking out on these issues by joining their power with others.

1. Jan–Jul 2020: Action

During the final phase, men and women take action using their power to prevent violence against women.

1. 2020-2021: Supporting partner organisations to begin SASA! in other sites, adding to the CBA Toolkit, creating a local community of practice on SASA!, and strengthening a regional community of practice with PNG and Kiribati.

This visit greatly helped to deepen the team’s understanding of how best to adapt SASA! to the Timor-Leste context, and provides a framework for reviewing and refining appropriate monitoring tools specific measuring progress towards EOPO2b.

Nabilan translated into Tetun and dubbed two SASA! films of CMs from other countries talking about the impact of SASA! on their lives and their communities. Watching these films, and seeing that others around the world are also trying to make change in their own communities, greatly helped to motivate the CMs, whose participation in activities had dropped slightly at the end of the previous reporting period.

In September 2017, Nabilan published its research report “Community-based Approaches: ending violence against women and children through community action – a reflection on research, ethics and practice.” The Community Based Approaches Toolkit was also finalized and will be released in the next reporting period.

To celebrate the achievements of the CMs, Nabilan hosted a Christmas party in December for CMs, their families, key stakeholders, and community members. This was a good opportunity not only to thank the CMs for their voluntary work but, also, to further increase the community’s awareness of the CBA work.

**IO 2.1 Local leaders and women’s groups in focus areas are actively protecting the rights of women and children and assisting them to access and benefit from the services they need.**

Despite initial delays, Nabilanis now **on track** to achieve this EOPO by July 2020.

During this period, Nabilan supported progress towards achievement of this outcome through organising two further study tours to Covalima. In July, the program accompanied seven CMs and two Suku Letefoho Council members to visit the Referral Network partners in Suai (PRADET, Uma Mahon Salele, ALFeLa, and FOKUPERS) as well as the Covalima District Court. In December, four more CMs and two Suku Council members participated in the final study tour of the year, also to Covalima. All 14 CMs and six Suku Council members have now attended a study tour. These trips have proven to be very effective in both developing the CMs’ awareness of the referral network, so they can more accurately provide guidance to community members who approach them for help, as well as strengthening the Suku Council members’ understanding of their role in supporting women and children who experience violence. For example, the Xefe Aldeia of Ladique said: *“Previously, I didn’t clearly understand about how to refer people who had problems, I had only heard that you should go to the police. But with this study tour, we were able to understand a lot more and, from now on, thanks to this study tour, I’ll be able to help those who need it in my aldeia.”* The positive feedback that the groups received from Referral Network partners during these study tours has also helped to motivate CMs and Suku Council members to continue working on this important issue, and to be proud that Suku Letefoho is becoming a positive example for other villages.

Both CMs and local leadership reported that community members approached them for help on situations of domestic violence. CMs provided advice to the community members on their options, which they had learned about on the study tour, while the Xefe Suku referred one person to the hospital and helped to register a case with the police.

The MO met with the Xefe Suku and interim Xefe Suku six times during this period and Nabilan’s relationship with local leadership continues to be strong. Representatives of the Suku Council, SEIGIS, and the police spoke at the CBA Christmas party, reiterating their support for the CBA work and their commitment to working with the CMs to prevent violence against women and children in Suku Letefoho.

Nabilan continues to coordinate well with other organisations working in Manufahi. During this period, the MO attended three Hamutuk meetings with other local partner organisations and supported the filming of a video for Hamutuk. Staff from several local organisations also attended the CBA Christmas party. In August, the CBA team coordinated a visit to Suku Letefoho for UNFPA on teenage pregnancy and early marriage, setting up meetings between UNFPA and key stakeholders, including the local leadership, the police, the MSS Child Protection Officer, and the Sub-District Administrator. UNFPA also ran a focus group discussion with the CMs to gather their insights on teenage pregnancy in Suku Letefoho.

Access to Justice

**

2nd group of CLE for judges

|  |  |
| --- | --- |
| **Grants disbursed during this reporting period:** US $182,309.64 | |
| **Partners:** | **Key government stakeholders:** |
| Asisténsia Legál ba Feto no Labarik (ALFeLa)  Judicial System Monitoring Programme (JSMP)  PRADET (medical forensic protocol) | Court of Appeal  District Courts (Dili, Baucau, Suai and Oecusse)  Timorese Judge’s Association |
| **Total number of new clients (ALFeLa):** 177 | **Total number of cases monitored:** 294 |

|  |  |
| --- | --- |
| **Progress towards Outcomes** |  |
| EOPO 3: More women and children affected by violence have satisfactory outcomes and processes of resolving their cases, including support received, legal decisions, and an increased feeling of safety. | *Achieved* |
| IO 3.1: Specialist legal assistance services and other institutions in focus areas are providing quality legal assistance to an increased number of women and children affected by violence. | *Achieved* |
| IO 3.2: Monitoring programs and specialist legal assistance services in focus areas are effectively advocating for improved outcomes in cases of women and children affected by violence. | *Achieved* |

**Summary of progress towards achieving EOPO 3**

It is Nabilan’s assessment thatEOPO 3 was **achieved** by the end of this reporting period (the new end date for Phase I of the program). However, the MEF target of 50% for the percentage of domestic violence cases (as monitored by JSMP) which resulted in suspended sentences with conditions attached was not met, and no cases of DV monitored by JSMP attracted compensation orders (MEF target 10%). It should be recognized that Nabilan has no direct influence on case outcomes, and the suitability of these indicators will be reviewed in Phase II. Nonetheless, there have been many positive developments at the broader case outcome level, which can be linked to JSMP advocacy and continuing legal education support for the judiciary. The courts are continuing to impose additional monitoring obligations on domestic violence offenders and more cases of domestic violence are being charged as serious assault. During this period, JSMP monitored five domestic violence cases which resulted in an obligation to periodically report to the court or police. Since JSMP first began advocating on this issue in 2014, there has been increasing recognition of the importance of offender monitoring. Courts are revoking suspended sentences in cases where the offender is continuing to commit domestic violence. Both Baucau and Oecusse district courts revoked suspended sentences during this reporting period. During Nabilan Phase II, there has also been increasing use of medical forensic evidence from PRADET. This contributes to better case outcomes for women, as indictments are supported by independent medical evidence.

At the individual level, ALFeLa continued to provide independent legal advice and support for women and children clients. With Nabilan technical assistance in Phase I, ALFeLa has made improvements in their identification of and support for clients with disabilities. During this reporting period, ALFeLa also successfully advocated with MSS to provide social assistance for 47 clients. This directly contributes to women and children’s overall well-being and social security. The independent case file audit of ALFeLa shows that since 2015, ALFeLa has made some improvements in areas such as: case opening and closure processes; client file organisation; recording of domestic violence histories; and legal analysis of the relevant offence. These improvements all contribute to more clients having better legal support and satisfactory outcomes in their cases. However, further work is required in Phase II.

During this reporting period, Nabilan was unable to continue the client satisfaction surveys with ALFeLa. This was partly due to the judicial recess period over August and September, and challenges coordinating with ALFeLa legal staff on facilitating the interviews. The client satisfaction surveys from previous periods uniformly reported client satisfaction with ALFeLa’s services.

**IO 3.1: Specialist legal assistance services and other institutions in focus areas are providing quality legal assistance to an increased number of women and children affected by violence.**

This IO has been **achieved,** and MEF targets for 2017 relating to both numbers and quality have been met. In 2017 ALFeLa had 358 new cases involving women and children affected by violence a year, which exceeds the MEF target of 250. In 2017 32.9% (MEF target 20%) of cases audited had evidence of legal analysis, 30.5% (MEF target 20%) of audited cases had evidence of follow-up, and 60% (MEF target 50%) of cases had clear and complete chronologies.

During this reporting period, ALFeLa provided legal assistance to 177 new women and children clients, compared with 178 new clients in the previous reporting period. ALFeLa also continued to work on 1,188 open cases. The large number of open cases reflect the limited number of legal staff working at ALFeLa (currently 10 legal officers and one legal coordinator), and back-log of open cases from prior to Nabilan intervention which need to be reviewed and closed. Most new cases involved domestic violence – both physical and sexual domestic violence (51%), and sexual violence (28%). ALFeLa also supported 13 female clients with civil matters such as alimony and child custody. A significant number of ALFeLa’s clients were children under the age of 18 (35%).

ALFeLa assisted five new female clients with disabilities, including successfully advocating for the preventative detention of an offender who had sexually assaulted his 14-year-old deaf daughter. ALFeLa also assisted an adult client with a disability who had been mistreated by her parents. ALFeLa ensured that the client and her six children were referred to a safe shelter. ALFeLa also wrote to MSS requesting social assistance for its clients, resulting in 47 clients receiving some type of social assistance from MSS. ALFeLa’s advocacy in long-pending cases also resulted in renewed investigation and processing of four alimony cases, and two criminal cases.

The second independent audit of ALFeLa conducted in July 2017 found some key improvements in the quality of ALFeLa’s case work. Compared with the 2015 audit, there were improvements in areas such as: case opening and closure processes; client file organisation; recording of domestic violence histories; and legal analysis of the relevant offence. The auditor recommended further ongoing support for legal staff, particularly in consistently implementing the Practice Manual, which was developed with Nabilan support. Nabilan will continue to work with ALFeLa in Phase II to address the audit recommendations.

Nabilan continued to support the achievement of this IO through assisting PRADET with refresher training for medical forensic examiners, and training for medical and other professionals on recognising and responding to non-accidental injuries (4R training). Dr Margaret Gibbons and PRADET ran six 4R training sessions with a total of 110 medical professionals in Gleno (14 participants), Manatuto (16 participants), Atauro (17 participants), Maubisse (16 participants), Liquica (16 participants) and the National Hospital in Dili (15 participants). PRADET also ran two 3-day refresher training sessions with 13 medical forensic examiners. The refresher training was supported by JSMP, who ran a mock trial session for examiners to better prepare them for giving evidence in court. Marie Stopes and the Coalition for Diversity and Action also presented on gender, sexual diversity and modern contraceptive options. These sessions were highly useful for the examiners, who often treat patients with diverse needs. Dr Gibbons continued her audit of medical forensic protocols, auditing 106 protocols in the last reporting period. She found improvements in recording of essential information such as consent, and documentation of injuries. Further work is required with some examiners, including on accurately drawing the hymen and describing injuries to the court.

Further support for achieving this IO was provided by Nabilan running two 4-day CLE sessions with Timorese judges, which were highly successful. The CLE was facilitated by the Hon. Judge Phillip Rapoza (Past Chief Justice of the Massachusetts Appeal Court), and two Portuguese judges, Judge Helena Bolieiro and Judge José Francisco Moreira das Neves. All district court judges attended the sessions, and were able to improve their understanding of civil and family law, and cases involving minors and parental authority. They also acquired technical skills on interviewing children based on their stage of development. The judge mentors who facilitated these sessions worked pro bono, and continue to provide advice to the Nabilan team. This activity directly contributes to improved access to justice for women and children who have been affected by violence.

**IO 3.2: Monitoring programs and specialist legal assistance services in focus areas are effectively advocating for improved outcomes in cases of women and children affected by violence.**

This IO has been **achieved**. During 2017 JSMP monitored 91% of cases to completion, exceeding the MEF target of 85% by July 2017. Table 1 illustrates the numbers of cases monitored to completion by JSMP between 2013 and September 2017.

During this period, JSMP monitored a total of 294 cases in the four district courts, of which 54% involved domestic violence or sexual violence. JSMP also monitored 35 cases in which the prosecutor introduced PRADET’s medical forensic protocol as evidence, and 9 cases in which the victim was represented by ALFeLa. JSMP produced 17 case summaries and 30 press releases based on their court monitoring.

**Table 1: Decisions in criminal cases monitored to final decision, 2013 – 2017 (source: JSMP)**

| Decision | 2013 | 2014 | 2015 | 2016 | 2017  (to Sep) |
| --- | --- | --- | --- | --- | --- |
| Suspended prison sentence | 132 | 230 | 297 | 351 | 286 |
| Mediated | 30 | 83 | 162 | 114 | 139 |
| Fine | 61 | 149 | 170 | 94 | 64 |
| Acquitted | 40 | 52 | 64 | 161 | 36 |
| Prison sentence | 45 | 32 | 65 | 61 | 27 |
| Suspended prison sentence with additional conditions | 1 | 2 | 12 | 48 | 22 |
| Admonishment | 8 | 20 | 9 | 17 | 11 |
| Suspended prison sentence and civil compensation | 4 | 3 | 10 | 22 | 3 |
| Prison sentence and civil compensation | 8 | 4 | 8 | 6 | 3 |
| Fine and civil compensation | 4 | 4 |  | 1 |  |
| Total cases monitored to decision | **333** | **579** | **797** | **875** | **591** |

JSMP continues to advocates strongly for improved justice outcomes for women and children. On 21 December 2017, JSMP published the report ‘Sentencing and Domestic Violence: Suspended prison sentences with conditions’, which made important recommendations to improve monitoring of offenders and reduce recidivism. Key recommendations, such as requiring offenders to appear before community leaders for monitoring, and improved communication between the courts and local police, will inform the strategy for Nabilan Phase II. The report also highlighted the trend towards improved sentencing by the courts in domestic violence cases since JSMP first began advocacy on this issue.

*“On 14 December 2017 the Oecusse District Court applied Article 73 of the Penal Code on revocation of a suspension, and decided to revoke a suspended prison sentence that had previously been applied against the defendant MB and imposed an effective prison sentence of 2 years 6 months against the defendant. This penalty combined the penalty determined by the court on 23 May 2017 with an additional penalty of 1 year 6 months in prison in the new case.”* (JSMP press release, 17 January 2018.)

JSMP also produced a submission on the draft Child Protection Law, which is pending before parliament. The submission recommended improved consultation with CSO service providers and alignment with existing laws, such as the Law Against Domestic Violence and the Civil Code.

ALFeLa actively advocated for just outcomes and processes in nine complex cases, including four alimony cases. ALFeLa also continued to raise concerns regarding the action of the VPU officer in Lautem, who is referring domestic violence cases to the community for informal mediation. To date, no action has been taken against the police officer. ALFeLa is working directly with the Prosecutor in Baucau to address this issue. The independent case audit identified impressive examples of successful advocacy by ALFeLa.

**Other relevant Nabilan activities**

* Provided child protection training to Timorese doctors in the RACS program.
* Partnered with the Office of the United Nations High Commissioner for Human Rights, ALFeLa and JSMP to provide training to DPOs and LGBT groups on monitoring and documenting human rights violations.
* Finalised the Guidance Note on Community-Based Dispute Resolution in Timor-Leste, and coordinated with the Foundation’s Community Policing Support Program on consistent messaging on community mediation.
* Supported Certificate III in Social Services on topics related to child protection, legal framework and community dispute resolution.
* Finalised the manual on working with at-risk children, and continuing work on the sentencing guidelines.
* Updated full child protection risk assessments for all Services partners.

1. Monitoring, Evaluation, and Learning

The M&E system continues to produce rich data, which informs program learning, implementation, and decision-making. As a result of funding restrictions, Nabilan did not have specialist M&E support during this reporting period. The Pillar teams and Team Leader took on all responsibility for M&E during the reporting period. Nabilan program staff regularly attended M&E House Community of Practice sessions. As part of Nabilan Phase II, a draft MELF was developed and will be finalised in 2018. There will also be a revision of monitoring tools, including the Case Management Assessment tools for services partners, and CBA tracking tools.

After the elevated level of monitoring in the previous period, partners were on-track in this period and required less regular monitoring. The Prevention Pillar conducted eight monitoring and technical assistance visits in this period. The Prevention Pillar continued to use the standardised monitoring form and to hold face-to-face meetings with partners after each visit to discuss findings, given partner preference for this approach.

Nabilan delivered two presentations of the Nabilan Baseline Study findings, including to an international audience at the Sexual Violence Research Initiative Forum in Brazil and to local government and CSO stakeholders at the NAP-GBV workshop coordinated by SEIGIS and UNFPA in Timor-Leste. The Prevention Coordinator drafted a paper on the Nabilan Baseline Study findings on mental health and violence, which is expected to be published during the next reporting period in a compendium on the 2017 Timor-Leste Studies Association Conference. Nabilan collaborated with UNFPA on the disability findings and on a briefing paper comparing and contrasting the Nabilan Baseline Study and the DHS 2009-2010, which will also be released in the next period.

The team reached a greater number of people through gender equity and violence prevention trainings, increasing from 152 people in the last period to 227 in this period. Feedback forms from these trainings illustrate a high level of participant satisfaction with the trainings and a desire for more trainings of longer duration.

In this reporting period, the CBA research report, “A Reflection on Practice, Ethics and Research”, was finalised and is now available online. The first version of the CBA Step-by-Step Guide was further developed and will be released in the next period. The Step-by-Step Guide is designed to be a living document with new steps and learnings updated as the CBA work progresses. With support from Raising Voices, the Community Mobiliser Activity Record form and the Activity Outcome Tracking Tool were both updated and continue to be used by the CBA team in Suku Letefoho.

In June 2017, Nabilan funded a second independent audit assessing changes in the quality of ALFeLa’s case work since the 2015 audit. The audit found some improvements in case opening and closure processes; client file organisation; recording of domestic violence histories; and legal analysis of the relevant offence. These improvements show the impact of Nabilan’s continuing technical assistance to ALFeLa. The auditor recommended further ongoing support for legal staff, particularly in consistently implementing the Practice Manual, which was developed with Nabilan support.

Dr Gibbons continued her audit of medical forensic protocols completed by each examiner, auditing 106 protocols in the last reporting period. The audit found improvements in the recording of essential information such as consent, and documentation of injuries. The audit findings formed the basis for continued refresher training for examiners, and a new performance review format to provide technical feedback to each examiner.

During the reporting period, the Services Teamprocessed reviews of case management documents of all services partners (Uma Mahon Salele, Casa Vida, and the five PRADET FHs) using the Case Management Assessment tools developed by Nabilan*.* These tools will be revised in 2018.

Nabilan continued to work with CSO partners to ensure full compliance with the Foundation’s Child Protection Policy, including updating the full risk assessments to align with the updated DFAT policy and standards.

Work on the Organisational Strengthening Milestone Matrix (OSMM) continued during this reporting period. The OSMM measures and tracks organisational capacity of each of the grantees and the challenges that they face. The OIS Deputy Coordinator and OIS/Access to Justice Program Officer conducted visits to each of the Access to Justice and Services partners to complete the OSMM for the second half of the year. Using the results of the two OSMM assessments during 2017, as well as recommendations in the 2016 external financial audits, the OIS team continued to work with each partner to decide on the most useful training areas. Trainings on Human Resource management, IT, administration and logistics, gender, disability, and children’s rights were conducted by Foundation staff in this reporting period. The Foundation’s Human Resources Manager provided Human Resources training to Uma Mahon Salele, JSMP, ALFeLa, Casa Vida and PRADET. The Foundation’s Operations Manager provided training on assets management and fleet management to JSMP and Uma Mahon Salele. The Foundation’s Human Resources Manager also assisted Uma Mahon Salele with drafting their Operations Manual. The Foundation’s OIS team, together with ADTL and a consultant (Lizzie Adams) provided training on gender, disability and children’s rights to Uma Mahon Salele, Casa Vida, and Fatin Hakmateks Oecusse, Suai, Maliana and Baucau. The OSMM assessments since the beginning of Nabilan has shown marked improvement in key areas, most notably financial management (following proper processes and record-keeping), HR management and IT management.

Annex 1.1: Consolidated Beneficiary Data - PRADET, Casa Vida, Uma Mahon Salele & ALFeLa

During this reporting period, a total of 556 new clients were supported by Nabilan partners, comprising 530 (95%) new female clients and 26 (5%) new male clients. Of all new clients, 186 clients (33%) were children under 18 years of age.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1. All new clients** | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Female | 548 | 538 | 583 | 445 | 512 | 530 | 3156 |
| Male | 31 | 20 | 35 | 27 | 24 | 26 | 163 |
| **Total** | **579** | **558** | **618** | **472** | **536** | **556** | **3319** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2. All new clients by age group** | | | | | | | | | | | | | | |
|  | **Jan-Jun 15** | | **Jul-Dec 15** | | **Jan-Jun 16** | | **Jul-Dec 16** | | **Jan-Jun 17** | | **Jul-Dec 17** | |  | |
|  | **Female** | **Male** | **Female** | **Male** | **Female** | **Male** | **Female** | **Male** | **Female** | **Male** | **Female** | **Male** | **Total** |
| Under 5 | 11 | 7 | 7 | 3 | 3 | 3 | 3 | 0 | 6 | 1 | 2 | 3 | **49** |
| 5 - 10 | 21 | 6 | 19 | 7 | 22 | 7 | 17 | 10 | 13 | 3 | 13 | 5 | **143** |
| 11 - 15 | 44 | 8 | 86 | 1 | 69 | 7 | 62 | 5 | 48 | 10 | 78 | 9 | **427** |
| 16 - 18 | 47 | 1 | 56 | 1 | 64 | 0 | 18 | 0 | 65 | 1 | 72 | 4 | **329** |
| Over 18 | 424 | 8 | 370 | 8 | 425 | 18 | 345 | 12 | 380 | 9 | 365 | 5 | **2369** |
| Unknown | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **2** |
| **Total** | **548** | **31** | **538** | **20** | **583** | **35** | **445** | **27** | **512** | **24** | **530** | **26** | **3319** |

**3. All new clients by municipality**

The highest coverage was in Dili (39%), followed by Baucau (13%) and Oecusse (11%). Client numbers in Baucau have increased since the opening of the FH service in Baucau.

**4. All new clients by vulnerability characteristics**

As in the last reporting period, a significant percentage of new female clients had one or more vulnerability characteristics – 14% had received no formal education (15% in the last reporting period); 3% had a disability (2% in the last reporting period); 14% were female head of households (decrease from 21% in the last reporting period); and 8% did not speak Tetum (10% in the last reporting period).

**4.1 Education level 4.2 Disability status**

**4.3 Adult Female Head of Household 4.4 Language spoken**

**5. New clients by referral source**

A significant portion of new clients, 22%, were referred to ALFeLa from one or more of Nabilan’s partners. Most new clients were referred to the partners from the police (55%).

**6. All new clients by case type**

The majority of new clients were victims of physical violence DV (48%), followed by non-familial sexual violence (23%, compared with 16% in the last reporting period). There continued to be a large number cases involving sexual violence perpetrated by a family member (7%). Many of these clients stay in shelters for extended periods of time, until the legal case is concluded and it is safe for the client to return home.

Nabilan partners provided a wide range of support services to over 3,900 new and existing clients. Clients continued to access services important to their well-being, such as counselling (11%), referrals (11%), and financial/material support (6%).

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **8. Types of services provided to all clients** - *one client may be provided more than one type of service* | | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Referrals made | 299 | 401 | 453 | 462 | 400 | 420 | 2,435 |
| Legal Assistance | 1,081 | 1,064 | 1,296 | 1,225 | 1,342 | 1,517 | 7,525 |
| Medical treatment | 142 | 237 | 277 | 204 | 216 | 260 | 1,336 |
| MFP | 186 | 267 | 225 | 307 | 296 | 335 | 1,616 |
| Temporary accommodation (FH) | 93 | 112 | 114 | 93 | 75 | 81 | 568 |
| Shelter | 92 | 94 | 101 | 89 | 71 | 87 | 534 |
| Counselling | 236 | 406 | 466 | 426 | 406 | 436 | 2,376 |
| Life-skills training | 115 | 102 | 91 | 179 | 115 | 87 | 689 |
| Access to formal education | 60 | 38 | 58 | 54 | 49 | 57 | 316 |
| Family visits | 21 | 50 | 48 | 27 | 30 | 32 | 208 |
| Reintegration support | 164 | 264 | 60 | 7 | 12 | 8 | 515 |
| Financial / material support | 297 | 297 | 345 | 293 | 229 | 241 | 1,702 |
| Follow-up visits | 292 | 237 | 400 | 273 | 413 | 384 | 1,999 |
| **Total** | **3,078** | **3,569** | **3,934** | **3,639** | **3,654** | **3,945** | **21,819** |

**PRADET Dili, Baucau, Oecusse, Bobonaro, Covalima**

PRADET received a total of 369 new clients during this reporting period. Of these new clients, PRADET provided medical forensic examination to 335 clients, medical treatment to 260 clients, financial/material support to 241 clients, and temporary accommodation to 81 clients. Most clients sought help from PRADET in relation to physical domestic violence (51%), and a further 19% of new clients had been victims of non-familial sexual violence. The majority of new clients were referred to PRADET by the police (77%). PRADET closed 335 cases during this reporting period.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1. All new clients** | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Female | 290 | 319 | 351 | 325 | 329 | 346 | 1,960 |
| Male | 20 | 16 | 28 | 23 | 19 | 23 | 129 |
| **Total** | **310** | **335** | **379** | **348** | **348** | **369** | **2,089** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2. Types of services provided to all clients** - *one client may be provided more than one type of service* | | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Referrals made | 254 | 336 | 389 | 438 | 342 | 370 | 2,129 |
| Medical treatment | 142 | 237 | 277 | 204 | 216 | 260 | 1,336 |
| MFP | 186 | 267 | 225 | 307 | 296 | 335 | 1,616 |
| Temporary accommodation (FH) | 93 | 112 | 114 | 93 | 75 | 81 | 568 |
| Counselling | 174 | 331 | 379 | 349 | 347 | 366 | 1,946 |
| Reintegration support | 146 | 255 | 47 | 0 | 0 | 0 | 448 |
| Financial / material support | 297 | 297 | 345 | 293 | 229 | 241 | 1,702 |
| Follow-up visits | 282 | 215 | 385 | 254 | 406 | 378 | 1,920 |
| **Total** | **1,574** | **2,050** | **2,161** | **1,938** | **1,911** | **2,031** | **11,665** |

**3. All new clients by case type**

**Casa Vida**

Casa Vida received 4 new clients, and continued to shelter 62 clients from previous reporting periods. Casa Vida also provided access to formal education for 47 clients, and 62 clients received life-skills training. Three clients were reintegrated during this reporting period, and Casa Vida facilitated 26 family visits.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1. All new clients** | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Female | 13 | 8 | 10 | 3 | 3 | 4 | 41 |
| Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| **Total** | **13** | **8** | **10** | **3** | **3** | **4** | **41** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2. All existing clients** | | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Female | 58 | 52 | 57 | 55 | 50 | 50 | 322 |
| Male | 7 | 4 | 9 | 8 | 10 | 12 | 50 |
| **Total** | **65** | **56** | **66** | **63** | **60** | **62** | **372** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **3. Types of services provided to all clients** - *one client may be provided more than one type of service* | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Referrals made | 0 | 0 | 1 | 0 | 0 | 4 | 5 |
| Shelter | 70 | 70 | 73 | 66 | 60 | 62 | 401 |
| Counselling | 44 | 50 | 59 | 54 | 36 | 45 | 288 |
| Life-skills training | 84 | 77 | 63 | 156 | 92 | 62 | 534 |
| Access to formal education | 46 | 26 | 45 | 41 | 36 | 47 | 241 |
| Family visits | 21 | 45 | 44 | 27 | 21 | 26 | 184 |
| Reintegration support | 9 | 4 | 10 | 4 | 8 | 3 | 38 |
| Follow-up visits | 5 | 3 | 12 | 0 | 0 | 0 | 20 |
| **Total** | **279** | **275** | **307** | **348** | **253** | **249** | **1,711** |

**Uma Mahon Salele**

Uma Mahon Salele received 6 new clients and 2 dependent children during this reporting period, and continued to shelter 25 existing clients and dependent children. In addition, they supported 10 students to attend school, and provided life-skills training to 25 clients.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1. All new clients** | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Female | 13 | 8 | 10 | 3 | 3 | 6 | 43 |
| *Dependents* | *0* | *0* | *6* | *1* | *2* | *2* | *11* |
| **Total** | **13** | **8** | **16** | **4** | **5** | **8** | **54** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **2. All existing clients** | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Female | 9 | 16 | 18 | 20 | 23 | 25 | 111 |
| *Dependents* | *0* | *0* | *4* | *5* | *6* | *4* | *19* |
| **Total** | **9** | **16** | **22** | **25** | **29** | **29** | **130** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **3. Types of services provided to all clients** - *one client may be provided more than one type of service* | | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Referrals made | 1 | 3 | 1 | 0 | 1 | 0 | 6 |
| Shelter | 22 | 24 | 28 | 23 | 11 | 25 | 133 |
| Counselling | 18 | 25 | 28 | 23 | 23 | 25 | 142 |
| Life-skills training | 31 | 25 | 28 | 23 | 23 | 25 | 155 |
| Access to formal education | 14 | 12 | 13 | 13 | 13 | 10 | 75 |
| Family visits | 0 | 5 | 3 | 0 | 9 | 6 | 23 |
| Reintegration support | 9 | 5 | 3 | 3 | 4 | 5 | 29 |
| Follow-up visits | 5 | 19 | 3 | 19 | 7 | 6 | 59 |
| **Total** | **100** | **118** | **107** | **104** | **91** | **102** | **622** |

**ALFeLa**

ALFeLa provided legal assistance to 177 new clients and closed 63 cases during this reporting period. Domestic violence involving physical assault remained the most common case-type handled by ALFeLa (51%), followed by sexual violence cases (28%). Civil cases comprised 7% of all new cases. ALFeLa also continued to follow-up on 1,206 existing cases.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1. All new clients** | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Female | 241 | 199 | 216 | 144 | 178 | 174 | 1,152 |
| Male | 10 | 2 | 7 | 4 | 3 | 3 | 29 |
| **Total** | **251** | **201** | **223** | **148** | **181** | **177** | **1,181** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **2. All existing clients** | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Female | 821 | 1,038 | 1,161 | 1,090 | 1,144 | 1,188 | 6,442 |
| Male | 12 | 18 | 18 | 17 | 17 | 18 | 100 |
| **Total** | **833** | **1,056** | **1,179** | **1,107** | **1,161** | **1,206** | **6,542** |

**3. All new clients by case type**

**JSMP**

JSMP monitored a total of 294 cases in the four district courts, compared with 542 cases in the last reporting period. August and September are judicial holidays, therefore fewer are heard during the second half of the year. Of all cases monitored, 54% involved GBV (DV and sexual assault). JSMP also recorded 35 cases in which the prosecutor introduced PRADET’s medical forensic protocol as evidence, and 9 cases in which the victim was represented by ALFeLa. JSMP produced 17 cases summaries and 30 press.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1. All cases monitored by jurisdiction** | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Dili | 363 | 82 | 308 | 104 | 194 | 84 | 1,135 |
| Baucau | 180 | 133 | 128 | 83 | 157 | 74 | 755 |
| Suai | 123 | 72 | 101 | 92 | 89 | 45 | 522 |
| Oecusse | 98 | 39 | 102 | 68 | 102 | 91 | 500 |
| Court of Appeal | 0 | 0 | 1 | 0 | 0 | 0 | 1 |
| **Total** | **764** | **326** | **640** | **347** | **542** | **294** | **2,913** |

**2. All cases monitored by case type**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **3. New cases monitored by special feature** | | | | | | | | |
|  | **Jan-Jun 15** | **Jul-Dec 15** | **Jan-Jun 16** | **Jul-Dec 16** | **Jan-Jun 17** | **Jul-Dec 17** | **Total** |
| Victim has a disability | 5 | 3 | 6 | 2 | 4 | 0 | 20 |
| Defendant has a disability | 1 | 4 | 5 | 2 | 0 | 0 | 12 |
| Any other witness has a disability | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Victim does not speak Tetum | 14 | 52 | 99 | 55 | 85 | 68 | 373 |
| Prosecutor introduced PRADET MFP | 15 | 22 | 45 | 34 | 28 | 35 | 179 |
| Prosecutor introduced other medical evidence | 36 | 67 | 80 | 29 | 80 | 24 | 316 |
| Expert witness testimony was introduced (e.g. doctor, PRADET staff) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Victim was represented by ALFeLa | 7 | 49 | 75 | 58 | 21 | 9 | 219 |
| Prosecutor applied for restrictive measures under the Criminal Procedure Code (e.g. Article 186 – proof of identity and residence; Article 194 – pre-trial detention) or Law Against Domestic Violence (Article 37) | 0 | 5 | 5 | 29 | 33 | 33 | 105 |
| Judge took measures to protect the victim or witness \* | - | - | 20 | 7 | 4 | 1 | 32 |
| **Total** | **78** | **202** | **335** | **216** | **255** | **170** | **1256** |

\* (e.g. removed the defendant from the room, removed his/her robe, used a screen to hide the witness)

Annex 1.2: Prevention activity participant data - FUNDEF, Ba Futuru, TLMDC, PRADET

The following tables provide an overview of participant data from prevention activities run by partners FUNDEF, Ba Futuru, TLMDC and PRADET. Detailed information from pre/post training tests are available on request.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1. Participants by sex** | | | | | |
|  | **FUNDEF** | **Ba Futuru** | **TLMDC** | **PRADET** | **Total** |
| Female | 16 | 98 | 107 | 41 | **262** |
| Male | 14 | 65 | 128 | 43 | **250** |
| **Total** | **30** | **163** | **235** | **84** | **512** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2. Participants by age** | | | | | |
|  | **FUNDEF** | **Ba Futuru** | **TLMDC** | **PRADET** | **Total** |
| 10 and under | 0 | 0 | 0 | 0 | **0** |
| 11 – 17 | 0 | 51 | 16 | 0 | **67** |
| 18 – 24 | 13 | 12 | 65 | 13 | **103** |
| 25 – 49 | 17 | 48 | 17 | 59 | **141** |
| 50 and over | 0 | 11 | 0 | 12 | **23** |
| Don’t know | 0 | 41 | 137 | 0 | **178** |
| **Total** | **30** | **163** | **235** | **84** | **512** |

Annex 2: Grant Summary Table (all calendar years, actual amounts disbursed)

|  |  |  |  |
| --- | --- | --- | --- |
| **Partner** | **Actual Grant Disbursed** | | |
| **2015** | **2016** | **2017** |
| Uma Mahon Salele | $ 101,962.96 | $ 97,484.60 | $ 97,535.41 |
| ALFeLa | $ 211,346.51 | $ 196,374.13 | $ 220,572.62 |
| Casa Vida | $ 207,821.09 | $ 186,969.78 | $ 187,958.83 |
| JSMP | $ 219,368.51 | $ 248,235.08 | $ 198,742.02 |
| PRADET (Fatin Hakmatek x 5) | $ 451,067.15 | $ 413,162.52 | $ 438,725.28 |
| PRADET (Medical Forensic Protocols) | $ 10,349.65 | $ 18,845.74 | $ 20,724.42 |
| PRADET (Personal Development Course) | $ 12,856.90 | $ 53,698.94 | $ 53,114.15 |
| Ba Futuru | $ 14,720.29 | $ 57,167.40 | $ 56,230.87 |
| SJPC-L through CRS | $ - | $ 14,512.59 | $ 13,046.48 |
| FUNDEF | $ 11,142.35 | $ 26,868.01 | $ 29,691.18 |
| TLMDC | $ 9,127.72 | $ 28,665.00 | $ 27,740.67 |
| RHTO |  | $ 16,357.35 | $ - |
| Mane Ho Visaun Foun | $ 12,729.90 | $ - | $ - |
| **Total** | **$ 1,262,493.03** | **$ 1,358,341.14** | **$ 1,344,081.93** |

1. Baseline of 302 new clients in 2014; 1137 new clients in 2015; 1090 new clients in 2016; 1092 new clients in 2017. [↑](#footnote-ref-1)
2. See UNFPA, ‘kNOwVAWdata violence against women prevalence map in Asia-Pacific 2017: <http://asiapacific.unfpa.org/en/publications/violence-against-women-regional-snapshot-2017> [↑](#footnote-ref-2)
3. There are key differences in the findings between the Nabilan Baseline Study and Timor-Leste Demographic and Health Survey, which are explained in a Nabilan briefing paper, “Intimate Partner Violence Against Women in Timor-Leste: Understanding the differences between the *Nabilan* Baseline Study and the Demographic and Health Survey”. [↑](#footnote-ref-3)
4. In Phase II, the Foundation will continue to ground the program in fundamental principles of gender equality and women and children's rights, however, with an increased focus on the development and normalisation of positive social norms for both women and men, boys and girls. This is in keeping with global best practice and to ensure that the program is seeking to address root causes of violence against women and children, rather than only symptoms or aggravating factors. Phase II of Nabilan Program will have a number of key differences with Phase 1. A reduced budget will necessitate a leaner staffing structure, with reduced full-time staffing overall, and a reduction in full-time international positions. The leaner staffing structure will necessitate a rationalisation of the previous four-pillar structure (Prevention, Support Services, Access to Justice, Research and M&E) to a two-pillar structure comprising a) Social Norms Change and b) Services, with access to justice work located with the services pillar. Community-based approaches (CBA), while maintaining linkages with the services aspect of the Program will be based within the Social Norms Change pillar. [↑](#footnote-ref-4)
5. See Nabilan Prevention Toolkit Fact Sheet 7. The Nabilan prevention effectiveness tool is adapted from the Lancet effectiveness scale, available at: http://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736(14)61797-9.pdf [↑](#footnote-ref-5)
6. See: http://raisingvoices.org/wp-content/uploads/2013/03/downloads/resources/Unpacking\_Sasa!.pdf [↑](#footnote-ref-6)