

PRADET TIMOR-LESTE

Organizational Overview and Approach to Gender

PRADET Timor-Leste (Psychosocial Recovery and Development East Timor, or Recuperação no Desenvolvimento ba Trauma no Psisosocial iha Timor-Leste) works to deliver services to community members experiencing mental illness and trauma, often arising from violence. The organization embraces the term ‘psychosocial’ as a comprehensive way to describe its approach to service delivery. PRADET recognises that its clients’ needs are multifaceted and cannot be considered in isolation from their daily social circumstances. Consequently PRADET’s support practices extend beyond the organization’s core healthcare activities of counselling and medical services. Other forms of support offered include: resource distribution; engagement and follow-up with the client, family and local community; and actively liaising with a range of relevant organizations, including police, legal institutions and other NGOs.

Formally established as an East Timorese NGO in 2002, PRADET has its origins in an AusAID-funded program beginning in 1999 prior to Indonesian military withdrawal. The aim of this program was for Australian psychiatric health specialists to devise a strategy to attend to trauma in Timor-Leste and to build the capacity of local workers. After the horrific events of 1999, a number of East Timorese health workers—primarily nurses and midwives—were selected to undertake counselling training in Australia, with a view to becoming PRADET staff members. Some of these health workers were taking refuge in Australia after fleeing the destruction of 1999.

There are many challenges in providing these services in East Timor. For example, new domestic violence legislation has been drafted and the country’s penal code is awaiting parliamentary ratification. Access for women victims of violence to criminal justice processes is severely limited. Victims from outside Dili face formidable barriers to service access. For example, money is often required to meet the costs of transporting the victim to Dili, as the police often lack the resources to do so. Fatin Hakmatek is working with each district to find ways to address this issue, as differing circumstances will require different solutions across districts.

Mira Martens da Silva, Luisa Marcal, Susan Kendall and Lesley Laing, ‘Fatin Hakmatek: The Safe Room Project in East Timor’, *Australian Domestic and Family Violence Clearinghouse Newsletter*, No. 23, January 2006, p. 12.

PRADET began to set up in Dili in May 2000. Staff undertook a consultation with approximately 300 community members from across Timor-Leste to ascertain what kind of psychosocial service East Timorese people regarded as a priority. The overwhelming response was a service to address serious mental illness. Designed to be an NGO to complement government services, PRADET operates within a Memorandum of Understanding with the Ministries of Health and Justice. Over time PRADET has consolidated its activities into three program areas: PAMM (Programa Asistencia ba Moras Mental, or the Mental Health Assistance Program), PDAJJ (Programa Demokrasia Asistencia Justisa Juventude or the Democratic Assistance for Juvenile Justice Program), and Fatin Hakmatek (meaning ‘Safe Place’). It is within the Fatin Hakmatek program that gender plays a central role. Fatin Hakmatek has been developed to respond to forms of violence that are typically, though not

exclusively, perpetrated by men against women and children: domestic violence, sexual assault and child abuse (usually sexual in nature). However, the organization feels reticent to expound an overt framework of gender-based violence or even simply gender. Particularly in the context of Timor-Leste, PRADET feels that such terms and their implied approaches risk being too divisive for families and communities and too alienating for men. Instead, PRADET prefers to discuss violence as a violation of the person, bringing to attention the higher incidence of violence against females, but insisting on an inclusive, whole-of-community approach to extending support to victims.

Twenty staff work across PRADET's three programs. PRADET also receives input from international mentoring staff, positions funded by UNFPA. One of these international staff members advises in clinical or technical matters and another assists with management processes and organizational development. PRADET's head office is in Taibesi, Dili, and staff travel regularly to other districts to visit clients and work with communities and other organizations. While PRADET will accept clients from across the country, in the early stages much of its outreach and promotion work was concentrated in the districts in the western area of Timor-Leste. The organization had decided to focus its limited resources on those districts it deemed had experienced the greatest concentration of trauma in the aftermath of the Indonesian occupation. As PRADET gains experience and broadens its resource base it is branching out its service delivery into other districts.

Programs

The Fatin Hakmatek program primarily engages with gender issues in relation to violence and trauma. A 'Safe Room' program (with the name consequently changed to the Tetun 'Fatin Hakmatek') was established in 2002 and has received funding support from UNFPA, the International Rescue Committee (IRC) and Caritas Australia. Initially operating from a hospital room, in 2006 PRADET formerly opened a small, purpose-designed building located in the grounds of the National Guido Valadares Hospital in Bidau, Dili. The Fatin Hakmatek building operates as a treatment facility for victims of domestic violence, sexual assault and child abuse, as well as an office for staff, and is available during daylight hours, seven days per week. Fatin Hakmatek has one full-time co-ordinator, three program staff and a driver. The program also receives considerable assistance from PRADET's international mentors.

In conjunction with specialist medical doctors, staff provide multiple forms of support for clients. Initial medical assessment and treatment of clients is undertaken in the Fatin Hakmatek building's dedicated medical examination room. PRADET has developed a 'forensic protocol' for recording injuries and other evidence in a systematic, consistent manner. This documentation is designed to be of use in any resultant legal prosecution. PRADET staff also undertake mental health assessments of clients and provide counselling. Support is given to clients to seek any further health care, if necessary. Staff follow up regularly with clients, both within and beyond Dili, to monitor their progress and to ensure their physical and emotional safety.

Clients' practical needs are also supported. The Fatin Hakmatek has been designed as a welcoming, functional environment, with a kitchen, waiting area and washing facilities. Where necessary the program can also offer secure, comfortable emergency accommodation to clients, usually limited to one or two nights. After this time the client decides where she or he would like to stay: with family members, or perhaps in a longer-term shelter run by

FOKUPERS or with nuns. Clients are given assistance to help with unexpected costs of transport, legal support and medical attention. A set of new clothes is also made available.

PRADET also works with other organizations in the Gender-Based Violence Referral Network to ensure that their clients are offered the full spectrum of support services available—such as legal support, which lies outside of PRADET’s mandate.

Fatin Hakmatek staff attended to 84 cases in 2006, with two months of disruption to service delivery during the 2006 crisis, and from 1 January to 23 June 2007 staff have managed 66 referrals. Currently the majority of Fatin Hakmatek’s referrals from outside of Dili derive from Liquiça district, due mainly to its proximity to Dili, and from the Suai area, as a result of a responsive police service in that location. PRADET had established a strong relationship with the Vulnerable Persons Unit (VPU) of the PNTL, to whom cases of domestic violence, sexual assault and child abuse are internally referred by other police departments. Until the crisis of 2006, which saw the dissolution of the VPU, this police unit was the key source of Fatin Hakmatek referrals. After the disruption that the crisis posed to the existing referral pathways, many referrals are now directed to PRADET through UNPOL, the United Nations police force.

The Fatin Hakmatek program activities are not limited to the activities undertaken within the Fatin Hakmatek building. Staff have travelled to each district to meet with local Ministry of Health representatives, police, district administrators and community members in order to promote the service and to reinforce the idea of ‘referral pathways’. In this context, ‘referral pathways’ means those avenues that exist within communities themselves through which victims of violence can access information and support. For example, community members may learn that certain individuals or groups can offer direct support or point them in the right direction. While the Fatin Hakmatek is promoted as one means of support for victims, PRADET’s ultimate vision is for districts beyond Dili to be self-sufficient in their ability to respond effectively to incidences of violence and trauma. The Oecusse, Baucau and Covalima districts have been particularly targeted by the Fatin Hakmatek program over the last three years. Program staff have plans to target Ainaro and Manatuto districts in their next round of promotional visits.

PRADET staff also provide targeted training services in the field of responding to violence against women and children. For example, since October 2006 Trauma Support Workshops have been facilitated with PNTL, including all senior police officers, as a result of changed conditions after the 2006 crisis.

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