



CONGRESS OF THE FEDERATED STATES OF MICRONESIA

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COMMITTEE ON HEALTH
AND SOCIAL AFFAIRS

STANDING COMMITTEE REPORT NO. 24-08

RE: C.R. NO. 24-14/H&SA

SUBJECT: A GRANT FROM THE INDIA-UN DEVELOPMENT PARTNERSHIP FUND FOR PROJECT "TAKING UNIVERSAL HEALTH COVERAGE TO EVERY PERSON IN THE FEDERATED STATES OF MICRONESIA" IN THE AMOUNT OF \$990,000.

MAY 29, 2025

The Honorable Esmond B. Moses
Speaker, Twenty-Fourth Congress
Federated States of Micronesia
First Regular Session, 2025

Dear Mr. Speaker:

Your Committee on Health and Social Affairs to which was referred C.R. No. 24-14, entitled:

"A RESOLUTION TO APPROVE AND ACCEPT A GRANT IN THE AMOUNT OF \$990,000 FROM THE INDIA-UN DEVELOPMENT PARTNERSHIP FUND THROUGH THE UNITED NATIONS OFFICE FOR SOUTH-SOUTH COOPERATION, FOR THE IMPLEMENTATION OF THE PROJECT ENTITLED "TAKING UNIVERSAL HEALTH COVERAGE, TO EVERY PERSON IN THE FEDERATED STATES OF MICRONESIA, INCLUDING ALL THE TERMS AND CONDITIONS OF THE ASSISTANCE.",

begs leave to report as follows:

The intent and purpose of this resolution are expressed in the title.

Your Committee held a hearing on the above captioned resolution on May 27, 2025. In attendance at the hearing were witnesses from the Department of Health and Social Affairs. It was

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explained to the Committee that this grant while from a new funding source continues work that had been started with UNDP. This work is to help extend healthcare services and raise standards in our remote areas. Specifically, it will assist the outer islands and remote clinics on the main islands by providing salaries for healthcare professionals and additional equipment. This grant will cover a two-year period and implementation will begin in September.

The Committee inquired regarding the budget breakdown for this funding and was provided additional documents regarding activities and budgets which is attached for review of the members. This grant would be used for personnel, travel, supplies and equipment.

The Committee is encouraged that more resources and healthcare professionals will be available for our underserved communities through this grant.

The Committee on Health and Social Affairs has reviewed C.R. No. 24-06 and considered all the testimony and documents received at the May 27, 2025, hearing. Your Committee on Health and Social Affairs is in accord with the intent and purpose of C.R. No. 24-14 and recommends its adoption by Congress.

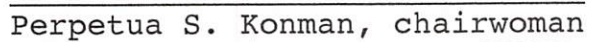
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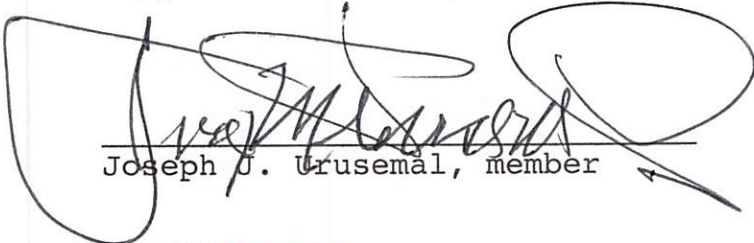
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Respectfully submitted,


Perpetua S. Konman, chairwoman

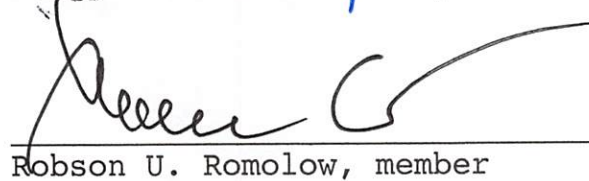

Jeremy W. Mudong, member


Joseph J. Urusemal, member


Tiwiter Aritos, member


Merlynn Abello-Alfonso, member


Yoslyn G. Sigrah, member


Robson U. Romolow, member



TAKING UNIVERSAL HEALTH COVERAGE TO EVERY PERSON IN THE FEDERATED STATES OF MICRONEISA (FSM)

Strengthening the Primary Health Care System by
Implementing the UN Volunteer (UNV) Program
Model of Train the Trainer Approach

A Proposal Submitted to the United Nations
Office for South-South Cooperation
304 East 45 Street, FF-1108
New York, NY 10017

BY THE FSM DEPARTMENT OF HEALTH AND SOCIAL AFFAIRS
PALIKIR, FM 96941

EMAIL: HEALTH@FSMHEALTH.FM

JANUARY 5, 2024

1. PROJECT NARRATIVE

Description of the Applicant:

The Federated States of Micronesia (FSM) is a small developing sovereign nation (Figures 1 and 2). FSM is comprised of 600 islands situated across the archipelago of the Caroline Islands, located between the Philippines and Hawaii across one million square miles of the North Pacific Ocean. Sixty of the FSM islands are inhabited with a total FSM population is 116,900 (2008 estimate FSM Statistics Office) living in four states: Chuuk, Yap, Pohnpei, and Kosrae). The total distance across FSM, from east to west, is 1,800 miles and encompasses two time zones. The four states that comprise the FSM are geographically, politically, culturally, and linguistically distinct and indicates that the distance and population dispersion across so many islands present a formidable challenge to data collection and to the provision of preventive and treatment services (<https://www.gov.fm/>).

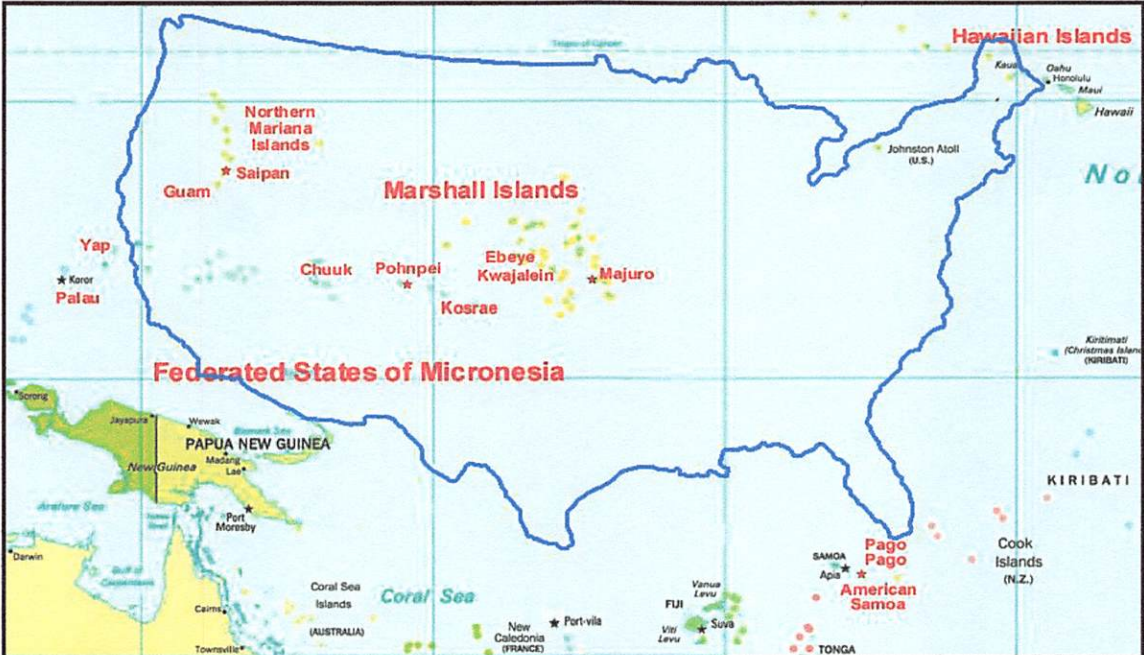


Figure 1. Map of the FSM in the Micronesian Region as compared to the US Continent



Figure 2. Map of the FSM with its four States (Yap, Chuuk, Pohnpei, and Kosrae) scattered across a huge body of water

Problem Statement:

Thirty percent of the total FSM population lives in remote outlying islands and rural areas. To realize Universal Health Coverage¹ (UHC), the 92 dispensaries scattered across the FSM in outlying islands and rural areas needs to be upgraded through proper staffing, structurally sound facilities, stable power sources, fully stocked medical inventory, electronic health record access, and tele-health capability². Current staffing in all these dispensaries needed additional capacity building training to expand the primary health care services they provide. Upgrading all these dispensaries through the key priority areas listed will greatly impact the livelihood of the population in these underserved coverage areas.

Two piloted super-dispensaries were strategically placed in two outer island regions with Chuuk State and Yap State where neighboring islands can benefit from. These two super dispensaries require one physician, one nurse, one health assistant, one community health work, and one dentist to staff. Regular trips will be required to keep these two super dispensaries fully stocked and operational. Source of power for these two sites are not stable at the moment and will need additional sources to ensure these dispensaries are fully operational. Internet connectivity and computer systems are needed at these sites to keep access to the electronic health record systems used within the States and enable remote consultations from specialized physicians utilizing tele-health technology.

2. IMPLEMENTATION PLAN

Proposed Intervention:

Request for funding assistance will strengthen the rural health development in these outer island communities throughout the FSM by (1) refurbishing certain health dispensaries and clinics, (2) implementing tele-health technology at strategic locations and (3) greening the health facilities with alternative or renewable source of energy to help mitigate and adapt to the health impacts of climate change. The department is seeking technical and financial support from partners to augment its objective to meet the health needs of the people in the FSM.

It is envisaged that this project can benefit greatly from the United Nations Volunteer (UNV) Program where skilled workforce (doctors, midwives, dentists, public health specialists, etc.) are deployed for certain period of times to directly provide healthcare, health promotion and training (capacity building), and or remotely provide consultation care and training through tele-health technology.

Implementation Plan with Timeline:

This project will be implemented by the Office of the Secretary as a special capital improvement project. The department in collaboration with the States' health services and local to municipal government with available resource will continue to strategize to upgrade key dispensaries to broaden their primary healthcare delivery systems. With limited resources neighboring islands may decide on which island dispensaries are more accessible to the rest of the neighboring islands to seek care at and upgrade accordingly. With connectivity, other dispensaries may remotely receive consultations from the super dispensaries, main hospitals within the four States to outside specialized consultants. The

plan going forward now calls for the following: **1.** Secure staff to support activities for this project. **2.** Assess the current dispensaries and prioritize dispensaries to upgrade amongst neighboring islands with wider access and coverage. **3.** Upgrade super dispensaries to their full potential staffing, primary healthcare services, and tele-health capacity. **4.** Conduct capacity building training and refreshers for all health workforce in a train of trainer approach across the entire primary health services. **5.** Strengthen partnership and States' capacity in hosting volunteer health workforce to compliment and strengthen existing workforce needs.

Goals	Start Date:	Achieve By:
Secure Staff to support activities for this project	May 1, 2024	September 31, 2024
Assess the current dispensaries and prioritize dispensaries to upgrade amongst neighboring islands with wider access and coverage	June 1, 2024	August 31, 2024
Upgrade super dispensaries to their full potential staffing, primary healthcare services, and tele-health capacity	Ongoing	April 30,2025
Conduct capacity building training and refreshers for all health workforce in a train of trainer approach across the entire primary health services	Ongoing	April 30, 2025
Strengthen partnership and States' capacity in hosting volunteer health workforce to compliment and strengthen existing workforce needs	June 1, 2024	April 30, 2025

Goals, Objectives and Monitoring:

Goal 1: Secure staff to support activities for this project.

Monitoring and Evaluation Plan: Quarterly reporting to reflect progress of staff assigned for the project.

Sustainability Plan: The department will align scope of services with other funding sources to retain needed staff and or incorporate into department's budget to utilize compact funding.

Objective: Project to have the required staffing needed to implement all the proposed activities.

Activities: 1. FSM DHSA will secure a team lead for this project either through designation or a contract in services. 2. Team lead will get oriented on the project needs and planned activities.

Goal 2: Assess the current dispensaries and prioritize dispensaries to upgrade amongst neighboring islands with wider access and coverage.

Monitoring and Evaluation Plan: Quarterly reporting to reflect progress of the list to be provided.

Sustainability Plan: The department will continue to work with the States to reassess next priorities to support.

Objective: Maximize limited resources to benefit islands that are in close proximity with one another to share healthcare resources.

Activities: 1. Team lead for the project conduct consultation meeting with the States health services on identifying dispensaries to upgrade. 2. Team lead will circulate a draft list of prioritized dispensaries to get endorsed by all the States. 3. Team lead will produce a final consolidated list of prioritized dispensaries. 4. Team lead will bid out rehabilitation work identified for dispensaries and monitor upgrade process and report.

Goal 3: Upgrade super dispensaries to their full potential staffing, primary healthcare services, and tele-health capacity.

Monitoring and Evaluation Plan: Quarterly reporting to reflect progress of prioritized dispensary upgrades.

Sustainability Plan: The department will align other funding sources including compact funding to compliment this work.

Objective: Super dispensaries and prioritized dispensaries to be accessible and providing quality primary healthcare services.

Activities: 1. Team lead in collaboration with the States will assess staffing, healthcare services, and tele-health capacity at the super dispensaries and prioritized dispensaries. 2. The team will conduct hiring, training, and upscaling / installation of tele-health systems to needed dispensaries.

Goal 4: Conduct capacity building training and refreshers for health workforce in a train of trainers approach across the entire primary health services.

Monitoring and Evaluation Plan: Quarterly reporting to reflect progress of training across the States.

Sustainability Plan: Candidates trained during the train of trainers training will continue to update and refresh the health workforce; the department may also send these individuals to get updated when new opportunities arise.

Objective: Health assistant capable of providing quality primary healthcare services in remote settings.

Activities: 1. Team lead will work with partners to develop training curriculum and schedule for all health assistants. 2. Training team will go from State to State to conduct training for health assistants.

Goal 5: Strengthen partnership and States' capacity in hosting volunteer health workforce to compliment and strengthen existing workforce needs.

Monitoring and Evaluation Plan: Quarterly progress report to reflect activities implemented to support this partnership effort.

Sustainability Plan: The department will work with the States to continue and maintain their capacity to host volunteer health workforce and will continue to solicit partners for other volunteer opportunities.

Objective: Receive partnership support through technical healthcare workforce volunteer within country across all primary healthcare services.

Activities: 1. Team lead in collaboration with the States will work with partners to identify workforce gaps. 2. Team lead will request through partners for technical assistant either on site or remote assistance.

3. FINANCIAL COST

Budget:

I. Personnel **Total: 0**

II. Equipment: **Total: 0**

III. Supplies: **Total: \$117,500**

a. Office supplies: \$10,000

\$833 x 12 months

b. Desktops: \$37,500

\$2,500 x 15

Desktops will be setup at select dispensaries and with staff that will be monitoring and evaluating the progress of the project along with implementors.

c. Laptops: \$60,000

Laptops will be distributed to select dispensaries that will be identified to forgo the upgrade during this project period.

\$2,000 x 30

d. Printers/scanners: \$6,000

\$400 x 15

e. Cellular smartphone: \$4,500

Cellular smartphone will be given to health assistants without communication methods to be able to call into main island public health offices and hospital.

\$300 x 15

f. Software: \$9,000

Windows Professional, Microsoft Office, Adobe Professional= \$600 x 15

IV. Travel **Total: \$182,600**

A. Inter-State Travel **Total \$55,700**

a. Health Leadership Meeting: The 4-States health leadership along with national health leadership will bring together priority areas that are to be implemented across the four States. Total: \$6,805

i. Airfare: \$2,625

Chuuk to Pohnpei roundtrip airfare: \$650 x 1 = \$650

Kosrae to Pohnpei roundtrip airfare: \$475 x 1 = \$475

Yap to Pohnpei roundtrip airfare: \$1,500 x 1 = \$1,500

ii. Per diem: \$2,850

Chuuk/Pohnpei/Chuuk: \$150 x 5 days = \$750

Kosrae/Pohnpei/Kosrae: \$150 x 6 days = \$900

Yap/Pohnpei/Yap: \$150 x 8 days = \$1,200

iii. Ground Transportation: \$1,330

Chuuk/Pohnpei/Chuuk: \$70 x 5 days = \$350

Kosrae/Pohnpei/Kosrae: $\$70 \times 6 \text{ days} = \420

Yap/Pohnpei/Yap: $\$70 \times 8 \text{ days} = \560

b. State visits: The Project lead and 1 staff to travel to states to meet with stakeholders in each of the states for project consultation. Total: \$18,860

i. Airfare: \$10,500

Pohnpei/Chuuk/Pohnpei : $\$650 \times 2\text{pax} \times 2 \text{ trips} = \$,2600$

Pohnpei/Yap/Pohnpei : $\$1,500 \times 2 \text{ pax} \times 2 \text{ trips} = \$6,000$

Pohnpei/Kosrae/Pohnpei: $\$475 \times 2 \text{ pax} \times 2 \text{ trips} = \$1,900$

ii. Per diem: \$5,700

Pohnpei/Chuuk/Pohnpei: $\$150 \times 5 \text{ days} \times 2 \text{ trips} = \$1,500$

Pohnpei/Kosrae/Pohnpei: $\$150 \times 6 \text{ days} \times 2 \text{ trips} = \$1,800$

Pohnpei/Yap/Pohnpei: $\$150 \times 8 \text{ days} \times 2 \text{ trips} = \$2,400$

iii. Ground Transportation: \$2,660

Pohnpei/Chuuk/Pohnpei: $\$70 \times 5 \text{ days} \times 2 \text{ trips} = \700

Pohnpei/Kosrae/Pohnpei: $\$70 \times 6 \text{ days} \times 2 \text{ trips} = \840

Pohnpei/Yap/Pohnpei: $\$70 \times 8 \text{ days} \times 2 \text{ trips} = \$1,120$

c. Health Assistant Train of Trainers Training: Conduct health assistants train of trainers training with 5 selected candidates from each of the 3 States to visit Pohnpei.

Total: \$30,035

i. Airfare: \$13,125

Chuuk to Pohnpei roundtrip airfare: $\$650 \times 5 = \$3,250$

Kosrae to Pohnpei roundtrip airfare: $\$475 \times 5 = \$2,375$

Yap to Pohnpei roundtrip airfare: $\$1,500 \times 5 = \$7,500$

ii. Per diem: \$14,250

Chuuk/Pohnpei/Chuuk: $\$150 \times 5 \text{ days} \times 5\text{pax} = \$3,750$

Kosrae/Pohnpei/Kosrae: $\$150 \times 6 \text{ days} \times 5 \text{ pax} = \$4,500$

Yap/Pohnpei/Yap: $\$150 \times 8 \text{ days} \times 5\text{pax} = \$6,000$

iii. Ground Transportation: \$2,660

Chuuk/Pohnpei/Chuuk: $\$70 \times 5 \text{ days} \times 2 = \700

Kosrae/Pohnpei/Kosrae: $\$70 \times 6 \text{ days} \times 2 = \840

iv. Yap/Pohnpei/Yap: $\$70 \times 8 \text{ days} \times 2 = \$1,120$

B. Out of State Travel: Total : \$158,900

a) Volunteer Travel Accommodation with anticipated cost of travel for volunteer of 5 health workforce. Estimated cost for a volunteer travel and accommodation: Total per volunteer: \$31,780

1. Airfare: \$14,000

2. Per diem: \$8,400

3. Transportation: \$ 980

4. Housing : \$8,400

V. Other Categories: Total: \$235,000

a. Workshop space rental to include lunch and refreshments: \$15,000.00

Funding requested will be used to support meeting and training venues for this project across the four States. \$500/day x 30 days

b. Fuel for project activities: \$20,000.00
Funding requested will be used to procure gasoline / diesel for smaller boats to visit inner lagoon islands which are accessible by boat; gas for cars to visit rural dispensaries, and generators to provide power to remote island and areas that are not accessible to island electrical power grids.

c. Chartering (small planes and ships): \$200,000.00
Funding requested will be used to pay for the cost of small ships and small planes to visit outlying islands of Chuuk, Pohnpei and Yap. There are no regular scheduled boats or ships for the outer islands of Chuuk. For Yap, there are schedule flights but are often full if the plane is not chartered.

Chuuk Outer Islands

MORTLOCK

(12 islands) \$18,000 x 1 small ship x 8day x 2 = \$36,000

NORTHWEST

(17 islands) \$33,000 x 1 small ship x 16days x 2 = \$66,000

YAP Outer Islands

Wole

ai roundtrip small plane = \$7,000 x 2 = \$14,000

Ulithi roundtrip small plane = \$2,400 x 2 = \$4,800

Fais roundtrip small plane = \$2,600 x 2 = \$5,200

Pohnpei Outer Islands

Sapwuwahfik, Pingilap and Mwoakiloa x 2 = \$40,000

Nukuro and Kapingamarangi = \$17,000 x 2 = \$34,000

VI. Contractual: Total: \$964,900

- a. Solar systems procurement and installation \$250,000.00
Funding requested will be used to contract out procurement and installation of solar energy systems for the prioritized dispensaries to be identified and upgraded.
- b. Starlink system procurement, subscription, and installation \$200,000
Funding requested will support contract to provide internet connection and subscription to the identified prioritized dispensaries.
- c. Short-term contract (personnel) \$350,000
Funding requested will support short term contracted health workforce / volunteers to support project activities such as data collection, healthcare provider, conduct healthcare training, etc....
- d. Dispensary rehabilitation \$164,900
Funding requested will be used to contract out the rehabilitation of select dispensaries to be able to house and safeguard telehealth systems that will be installed.

VII. Total Direct Total: \$1,500,000.00

References

- ¹ [https://www.who.int/news-room/fact-sheets/detail/universal-health-coverage-\(uhc\)](https://www.who.int/news-room/fact-sheets/detail/universal-health-coverage-(uhc))
- ² <https://hsa.gov.fm/wp-content/uploads/2024/01/Comprehensive-Assessment-of-Primary-Care-Systems.pdf>

A RESOLUTION

To accept and accept a \$990,000 grant from the India-UN Development Partnership Fund through the United Nations Office for South-South Cooperation, for the implementation of the project entitled "Taking Universal Health Coverage to Every Person in the Federated States of Micronesia", including all the terms and conditions of the assistance.

1 WHEREAS, the United Nations Office for South-South
2 Cooperation (UNOSSC), acting as fund manager and secretariat of
3 the Board of Directors of the India-UN Development Partnership
4 Fund, has informed the Federated States of Micronesia of the
5 approval of the project proposal entitled "Taking Universal Health
6 Coverage to Every Person in the Federated States of Micronesia",
7 submitted by FSM Permanent Representative to the United Nations;
8 and

9 WHEREAS, this proposed two-year project, to be implemented
10 through the United Nations Development Programme (UNDP), has been
11 awarded financial assistance in the amount of \$990,000 to support
12 the improvement of access to quality healthcare services, with a
13 particular focus on reaching remote and underserved populations
14 throughout the Federated States of Micronesia; and

15 WHEREAS, the project supports national priorities and adheres
16 to South-South Cooperation principles including national
17 ownership, sustainability, and development impact, and aligns with

1 the broader objectives of achieving the Sustainable Development
2 Goals (SDGs); and

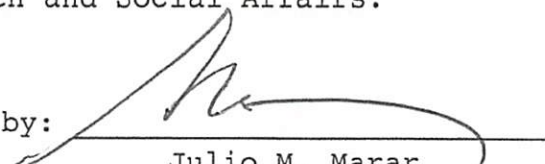
3 WHEREAS, that the Government of the Federated States of
4 Micronesia wishes to express its appreciation and gratitude to the
5 government of India for extending this grant; and

6 WHEREAS, this grant is considered foreign financial
7 assistance that requires for its validity the approval by Congress
8 through resolution pursuant to section 210(2) of title 55 of the
9 Code of the Federated States of Micronesia (Annotated), as
10 amended; now, therefore,

11 BE IT RESOLVED by the Twenty-Fourth Congress of the Federated
12 States of Micronesia, First Regular Session, 2025, that Congress
13 hereby approved and accepts the \$990,000 grant from UNOSSC,
14 including all the terms and conditions thereof; and

15 BE IT FURTHER RESOLVED that certified copies of this
16 resolution be transmitted to the President of the Federated
17 States of Micronesia, the Secretary of the Department of Justice,
18 and the Secretary of the Department of Foreign Affairs , and the
19 Secretary of the Department of Health and Social Affairs.

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21 Date: 5/22/05

Introduced by: 
Julio M. Marar
(by request)

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