

FemiliPNG

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Submission
by Femili PNG
to the Parliamentary Inquiry into
Violence Against Women and Children
in Papua New Guinea

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Contents

About Femili PNG

Introduction

Recommendations

Comments on TOR 1: Violence against women and children in PNG

Comments on TOR 2: Causes and impacts

Comments on TOR 3: Role of NGOs

Comments on TOR 4 and TOR 5: Challenges and strategies

References

Femili PNG is very grateful to Peter Lindenmeyer for his assistance in preparing this submission. For more information contact Femili PNG CEO Daisy Plana at ceo@femilipng.org.pg.

About Femili PNG

Femili PNG is a new PNG NGO which was registered in PNG in 2013 and which commenced operations in Lae in 2014. Its objective is to: **“improve access to and the effectiveness of services for family and sexual violence survivors”**.

We are working to achieve this goal by:

- Providing case-management services for survivors of family and sexual violence
- Supporting other relevant services by providing training, other resources, and improved coordination
- Undertaking advocacy based on our operational experience and research

In just over a year of operations, we have:

- Obtained funding from the Australian Government’s aid program and other sources
- Established a Management Committee, with a broad range of experienced members, which has met regularly
- Finalised an agreement with our implementing partner, Oxfam
- Set up a Case Management Centre (CMC) in Lae and hired and trained a team of 15 staff
- Assisted more than 450 clients and their families through over 2050 individual consultations, assisting them to effectively access services and assistance.
- Mapped services available, developed referral pathways, and signed MOUs with partner agencies in Morobe.
- Helped women and children find refuge in safe houses and providing them with emergency food and other basic needs.
- Enabled women and their children to start life over through family tracing and assisted relocations.
- Provided safe houses with assistance to upgrade their premises including a new security fence, a new bathroom, kitchen plus kitchen equipment, and new beds for clients.
- Provided the district court and provincial police with computers and printers.
- Run training programs for government, international and local NGOs and others working with survivors of family and sexual violence.

In the next few years we plan to continue to develop these services, extend our coordination with other service providers, and expand our advocacy work based on operational experience and research.

Further information about Femili PNG can be found at <http://www.femilipng.org/>

Introduction

Although the Parliament and Government of Papua New Guinea (GoPNG) have taken some legislative and policy actions to reduce and outlaw Violence Against Women and Children (VAWC), this has been a slow process, and has often not been followed up by adequate action.

As a result, and with the tremendous changes that PNG society is undergoing, evidence suggests that the already high levels of VAWC in this country are increasing. This violence seriously harms hundreds of thousands of individuals, damages the fabric of PNG society, and drags down the nation's economic growth and social progress.

However, some important actions are being taken to protect those suffering the direct effects of VAWC, and to address the problem of VAWC more generally. Femili PNG is a new but important part of that response. This submission draws on our operations to date, and the extensive experience of Femili PNG's Management Committee and staff. It does not attempt to cover all issues associated with the complex problems of violence, but rather focuses on those most relevant to the work of Femili PNG.

Recommendations

1. Violence against women and children must be recognised as a cause of serious physical and psychological harm to all Papua New Guineans, and as an impediment to improved economic growth and social development. Better prevention of VAWC and support for survivors of violence should be seen as a key investment in the country's future prosperity and well-being. We recommend that the Prime Minister invite all Parliamentarians to make a joint statement condemning VAWC and committing to address this as a major social and development problem.
2. As intimate partner violence is the most common form of violence that affects women in PNG, and due to the burden it imposes on those women and their children, the response to such violence should be prioritised across government and take a whole of family approach.
3. In view of the particular vulnerabilities of children to the effects of violence, and the benefits to be obtained by interrupting the intergenerational transmission of violence, we recommend that the Government invest in a detailed implementation plan to ensure that the training and resources required to implement the Lukatim Pikinini (Child Welfare) Act are available at the level of service delivery.
4. This inquiry should recognise the key role played by NGOs in providing services to survivors of VAWC, and support the coordinating role of FSVAC.
5. The Government should develop a targeted plan to systematically address VAWC, including consideration of:
 - The provision of additional support services for survivors.
 - More effective responses by the police and court system.
 - Increased provision of skills-based training to all service providers who come in contact with survivors and perpetrators of VAWC.
 - Further research to assess programs and services likely to be effective in the PNG context for preventing VAWC and addressing barriers to the provision of services for survivors.
 - Cultural leadership that promotes action against VAWC, including within service agencies.

Abundant evidence has been provided over many years and from many sources that violence against women and children (VAWC) in PNG is widespread and highly damaging, and may have increased in recent decades.

A widely-cited study by the PNG Law Reform Commission carried out between 1982 and 1986 across 16 provinces, showed that, on average, two thirds of women had been hit by their partners (LRC 1992). More recent sub-national studies have verified that this violence persists at very high levels. Research across four provinces in 2009 once again showed that two-thirds of women reported being hit by their partners, with two thirds also reporting sexual violence (Ganster-Breidler 2010).

A recent study on gender-based violence (GBV) from the United Nations compared six study sites across the Asia-Pacific, including Bougainville in PNG. Although the data is not nationally representative, it found that GBV prevalence in Bougainville was the highest of all the sites studied, with the highest lifetime rate of men perpetrating rape (59%) against a partner, the highest lifetime rate of men perpetrating physical violence (62%) against a partner, and the highest rates of men perpetrating emotionally and economically abusive acts against a partner. Of the six study sites, Bougainville also had the highest rate of men reporting perpetration of gang rape (14%) and perpetration of non-partner rape (41%) (Fulu et al 2013).

While comparisons with past levels of violence are often difficult in the absence of solid data, (Jolly, in Jolly, Steward & Brewer, 2012) there is considerable anecdotal evidence that VAWC has increased. The Law Reform Commission's Dr Eric Kwa, who worked on the early drafts of the Family Protection Act more than 20 years ago, believes that levels of violence have significantly increased. He recalled recently that on Siassi Island, where he grew up there was very little family violence, but on recent visits he is aware that it is now much more common. (quoted in Chandler, 2013). It is often pointed out that while domestic violence may be embedded in tradition, previous *kastam* provided limits. Femili PNG's Vice Chair, Ume Wainetti, has recalled that in Daru "if a woman got beaten by her husband, her brother would retaliate." However, changing social structures have drastically reduced these protections. Sarah Garap, who grew up in volatile Chimbu, has recalled that traditions once provided protection from rape and violence. As a teenager in the 1970s she and her friends would walk three hours to Kundiawa from their village without fear or interference, but such a journey would be dangerous today. (Chanlder, 2014)

Recommendation 1

Violence against women and children must be recognised as a cause of serious physical and psychological harm to all Papua New Guineans, and as an impediment to improved economic growth and social development. Better prevention of VAWC and support for survivors of violence should be seen as a key investment in the country's future prosperity and well-being. We recommend that the Prime Minister invite all Parliamentarians to make a joint statement condemning VAWC and committing to address this as a major social and development problem.

Forms of violence

The target group for Femili PNG services are survivors of family and sexual violence. Intimate partner violence (physical or sexual violence perpetrated by one's partner) is the most common form of violence against women in PNG and other settings. Survivors of this form of violence are the majority of our clients. Of those clients who seek our services for non-partner sexual violence, many are children abused by family or friends.

While often not considered "violence", it should also be recognised that other forms of abuse, particularly **economic abuse** (restricting access to adequate financial resources, food or other items) and **emotional abuse** (threats and insults, imposing isolation and controlling behaviour) can be as damaging as physical violence, and are often associated with physical harm, especially within families. Our clients also commonly raise such abuse as reasons for seeking our services.

Causes

Femili PNG routinely provides support to the children of women experiencing family violence. Doing so enables women to make decisions that are in the best interests of both themselves and their children, but is also an investment in addressing future VAWC.

These multi-country studies indicate that witnessing parental violence is the strongest risk factor for VAWC, reinforcing previous research on the intergenerational transmission of violence (Fleming et al, 2015). Men and women who experience violence or abuse as children are at much greater risk of both perpetrating violence on their partners and children, and (for women) becoming victims of violence. Reducing violence in one generation can therefore be expected to reduce levels in future generations.

Other risk factors include a history of previous violence, mental health problems, the use of alcohol and other drugs, absence of wives' supportive male relatives, and low levels of respect for women. On the last point, it is worth noting that the relatively low status of women in PNG (ranked 134th out of 148 countries in the UN's Gender Inequality Index in 2012) contributes to high levels of violence.

More generally, cultural and community attitudes are important determinants of levels and types of violence, as well as the ability and willingness of survivors to seek help and/or take legal action. The extremely low rate of prosecution of cases of rape and violence (Howes and Lokuge, 2013) suggests that a high proportion of men in positions of power do not recognise that rape and violence generally are crimes.

Impacts

This submission does deal comprehensively with the impacts of violence against women and children, but rather notes that they are many and far-reaching. They include:

a) Immediate physical injury to survivors, often requiring medical treatment and increasing the burden on an already stretched health system

- One study found that more than 90% of female trauma admissions to a rural hospital were due to domestic violence (Fox, 2011).

b) Immediate psychological harm to survivors, which also has impacts on their physical health, and usually on the physical and psychological health of other family members

- For example, there have been demonstrated links between both intimate partner violence and child sexual abuse and rates of HIV in PNG, leading to an increasing 'feminisation' of HIV/AIDS (Lewis et al, 2008; Lewis, 2012).
- Gender-based violence impacts on the already low levels of maternal health in PNG, as demands and restrictions imposed on women and girls, as well as the threat of violence, limit their access to even the most basic of reproductive health services (Hinton and Earnest, 2010).

c) Longer term impacts on physical and psychological health

International evidence shows (and although there is very little PNG research in this field, there is no reason to believe that this would not be true here) that there are serious long term consequences of both experiencing and witnesses violence, particularly in the home.

- There is considerable evidence that children who witness violence and abuse inflicted on their mothers or other siblings also suffer emotional trauma that can have long term impacts on their health and later behaviour (Mitchell, 2011 Fulu et al, 2013)
- A recent analysis of 41 international studies showed that women who with depression, anxiety disorders or post-traumatic stress disorder (PTSD) were up to seven times more likely to have experienced violence inflicted by a partner.
- Young people who have previously been subjected to or witnessed interpersonal violence are at significantly higher risk of a major depressive episode, to attempt suicide or to engage in drug abuse or dependence

For further details of these findings, see references to Devries et al (2013); Tsai (2013)

d) Reduction in productivity through physical and psychological health

- Fear of violence and sexual assault disproportionately keeps girls and young women out of school and other forms of education and training (UNICEF, 2008)
- Unsafe public spaces, including markets and public transport, limit women's ability to participate in the economy (Amnesty International, 2006).
- A recent study in PNG by ODI (197 participants in 3 firms) found that 68% of participants had experienced gender-based violence in the past year, and that this resulted in an average loss of 11 days work per year, costing up to 9% of the company salary costs (and other direct and indirect costs would add to this expense). (Darko et al, 2015)

e) Increased burden on police, courts and other government services

Survivors of FSV need a range of services, from emergency medical and psychosocial care to emergency shelter, police protection, legal assistance, vocational training, and case management. While existing services are far from adequate, they already add to agencies' workloads.

- In the last five years, Angau Hospital’s Family Support Centre (FSC), the busiest FSC in the country, provided care to more than 11,500 patients. In 2010, the Centre attended to 530 survivors of sexual violence. Of these, 338 were adults (above 16) and the other 192 were children. Of the 338 adult cases, 322 were cases of rape. Of the 192 child cases, 149 were of rape. This suggests that when free, accessible care is provided, survivors will present.
- Although the police in PNG only prosecute a tiny percentage of (e.g., as mentioned earlier, an analysis of reported rape cases in Lae in 2012 suggested that less than 2% even went to trial). Major improvements in provision of these services are therefore needed if we are to adequately address the needs of women and children affected by such violence.

Recommendation 2

As intimate partner violence is the most common form of violence that affects women in PNG, and due to the burden it imposes on those women and their children, the response to such violence should be prioritised across government and take a whole of family approach.

Recommendation 3

In view of the particular vulnerabilities of children to the effects of violence, and the benefits to be obtained by interrupting the intergenerational transmission of violence, we recommend that the Government invest in a detailed implementation plan to ensure that the training and resources required to implement the Lukatim Pikinini (Child Welfare) Act are available at the level of service delivery.

TOR 3: ASCERTAIN THE ROLES OF NON-GOVERNMENT ORGANISATIONS IN ADDRESSING VIOLENCE

A comprehensive and effective response to VAWC requires a broad range of properly resourced, managed and coordinated activities delivered by government agencies, civil society organisations, and community and family members. This is a major and complex undertaking in any country, and particularly so in nations like PNG facing a range of other development challenges. While government leadership is essential, so too is awareness raising and service provision by civil society, including by NGOs, churches, and the private sector. Rashida Manjoo, UN Special Rapporteur on violence against women, reported to the UN General Assembly following her visit to PNG in 2012, noting that “the limited support and other relevant services that exist for women victims of violence were being provided largely by the civil society sector, with the assistance of development partners” (UN, 2013).

NGOs have been shown to be responsive, innovative and flexible in responding to the needs of survivors of VAWC. NGOs have shown themselves particularly appropriate as providers of small-scale local services such as safe houses, case management and general support, and have been efficient in the use of scarce resources, at times able to access additional funding and expertise, and keen to collaborate with each other and with government agencies to improve accessibility, quality and coordination of services. This has been demonstrated in the initial establishment of a network of safe houses, and more recently by the development of case management services by Femili PNG, which has addressed an identified gap, the need for coordination across government services, through provision of advocacy-based case management services to women and children affected by family and sexual violence.

The PNG Family and Sexual Violence Action Committee (FSVAC) was established in 2000. Headed by Ume Wainetti, it works across various sectors and comprises 81 member organisations, and has been successful in raising awareness of VAWC, and this has led to some positive developments in legislation, policy and national planning. FSVAC also plays leading role in coordination of services and other activities at a national level, and now increasingly at the provincial level.

Recommendation 4

This inquiry should recognise the key role played by NGOs in providing services to survivors of VAWC, and support the coordinating role of FSVAC.

TOR 4: UNDERSTAND THE BARRIERS AND CHALLENGES TO ADDRESSING VAWC
TOR 5: IDENTIFY SUCCESSFUL STRATEGIES FOR ADDRESSING VIOLENCE AGAINST WOMEN AND CHILDREN.

In working to address VAWC, we need to be both realistic about the magnitude of this problem, but also optimistic about the positive steps that have already been taken and the capacity for further improvement. Some of the challenges have been referred to in previous sections of this submission. Based on our experience, we suggest consideration of a few key areas for attention:

1. **The provision of additional support services for survivors.** Support services for survivors are thinly distributed, often inaccessible, and usually experience excessive levels of demand. There is a particular need for more safe houses, case management and support, and a recognition of the additional challenges faced by women in more remote areas face in accessing existing services.
2. **More effective responses by the police and court system.** As previously indicated, very few cases of VAWC are dealt with effectively by the police and court systems (Howes and Lokuge 2013). This encourages a “culture of impunity” where most perpetrators not only believe that their actions are legitimate, but are confident that there is almost no risk of legal punishment.
3. **Better training of all service providers who come in contact with survivors and perpetrators of VAWC.** While there are some very highly skilled service providers working with survivors, many others need additional training to enable them to meet needs more effectively, particularly in dealing with the psychological impact of violence. In addition, the police, courts and government officials more generally need to gain a better understanding of both the laws about VAWC, and the ways in which such violence harms individuals and communities.
4. **Research into effective interventions for addressing the contributors to and impacts of VAWC.** There is currently only quite limited knowledge about many dimensions of the problem of VAWC in PNG. In particular, there is almost no PNG-specific evidence on interventions for reducing levels of violence and supporting survivors to access services.
5. **Leadership.** Leadership that promotes VAWC as unacceptable is essential in every area. As a case management service, we particularly note the importance of such leadership within our partner agencies, including the police, courts, social welfare.

Such leadership is essential in supporting and resourcing the committed staff providing services to women and children within these agencies. We encourage the government to identify and implement performance-based indicators for such leadership within senior management in these agencies.

Recommendation 5

6. The Government should develop a targeted plan to systematically address VAWC, including consideration of:
 - The provision of additional support services for survivors.
 - More effective responses by the police and court system.
 - Increased provision of skills-based training to all service providers who come in contact with survivors and perpetrators of VAWC.
 - Further research to assess programs and services likely to be effective in the PNG context for preventing VAWC and addressing barriers to the provision of services for survivors.
 - Cultural leadership that promotes action against VAWC, including within service agencies.

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