



# DEPARTMENT OF WESTERN HIGHLANDS OFFICE OF THE PROVINCIAL ADMINISTRATOR



Date: 24<sup>th</sup> of November, 2021

Our Reference:

Action Officer: Robin Yakumb

Designation: Provincial GBV Focal Point

The Honorable Charles Able  
Member for Alotau  
Chairman of the Special Parliamentary Committee on GBV  
National Parliament of Papua New Guinea  
Port Moresby, NCD

Dear Honorable Member,

**REF: SPOT LIGHT ON WORK DONE ON GBV AT THE PROVINCIAL LEVEL TO PROGRESS THE GBV STRATEGY.**

First of all on behalf of the Western Highlands Provincial Government and the Provincial Administration I would like to take this opportunity to acknowledge and thank you and your team of vibrant members of parliament who have shown concern as the national leaders to take this initiative to address the most pressing issue in this country.

Secondly, on behalf of our faithful civil society organizations and the government institutions that are in the forefront to address GBV in the province, I would like to provide some response to the request you have made to us. Unfortunately, I am not able to provide a comprehensive report on the work done by the government agencies as well as the civil society organizations but just high light of few programs carried out in the province.

However, I cannot deny the fact that GBV is not only an issue that affects family units but a cross cutting issue that affects and impedes development in a border sense and government intervention is required to address the issue forthwith.

As such any interventions that government wish to take to address GBV should be mainstreamed so that it's not only left to Law and Justice, Health and Community development alone to address it.

Therefore, we as a province would like to give our undertaking that we are stand united with you and your team representing the whole government to commit this province to address this cross cutting issue.

We have formally appointed Robin Yakumb as the Provincial Focal Point for GBV who will take a leading role for the mean time to set up the Provincial GBV Secretariat and formulate the Provincial Strategy to address GBV in the province.

Furthermore, we will include the establishment of GBV and its operations in our Budget for next year 2022 and beyond but we will also require assistance from the national government and other development partners in terms of financial assistance as well capacity building and logistics support for our operations of the Provincial GBV secretariat.

Once again thank you and your team for the foresight and leadership you have provided to commit to this most pressing and cross cutting issue in this country

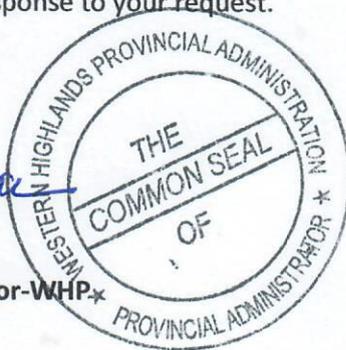
Please find attached is the Response to your request.

Yours truly



**Mr. Stanley Maip**

**Acting Provincial Administrator-WHP\***



Spot light on the work done on GBV at the provincial level to progress the GBV Strategy and gaps/ weaknesses and priority that needs Budget allocation by the National Government or Provincial Government in support of the Establishment of the Provincial GBV Secretariat in the Western Highlands

- The Impact of GBV on the people of your province, including data on the incidence of violence against women and children and information about the current system in place to collect data  
Currently there is no data collection and management in place at the provincial level so at this time we cannot really tell accurately the number GBV being perpetrated and the response provided to victims. there is also not much clarity on how is doing what in terms of response, prevention and awareness as there was not proper coordination between lead government agencies and the civil society organizations .It is very big challenge for the province and this gap needs to be filled soon if we seriously want to invest in GBV and reduce the impacts it has on the people of Western Highlands. Some serious considerations must be given, resources must be committed and budgets be allocated to have an effective and efficient data collection and management system in the province. Under the Response Programs of FHI360 a non-government organization in the western highlands has done some work on Data collection. A project called ERegisytry which was piloted in the GBV referral network such, FSVU at the Police station, Family Support Center in the Hospital and the Community Development division at the Western Highlands Provincial Administration. However, the others have not fully supported and resourced while the hospital has supported the initiative well and it's up and running integrating with the hospital's information management system. Needs to revive and roll it out to other service providers and support it well with resources and logistics as well as funding
- Progress developing a Provincial GBV Strategy, whether as a stand-alone strategy or as part of provincial sectorial strategies (law and justice/ health.) Please attached copy of any relevant document if possible  
A provincial GBV is currently being formulated and it's in draft form. First Consultation meeting with stakeholders and partners will be held on the 25<sup>th</sup> of November. It is expected that the Strategy will be complete before the end of the year. An annual work plan will also be formulated to capture the main activities under three main Strategies  
-Prevention  
-Response and  
-Awareness and Empowerment
- The budget allocated to address GBV by your provincial government and through any other government or non-government sources  
Previously there was limited budget allocated to address GBV in the province which indicates that GBV was not the priority of the government and less attention was given, even though GBV is a cross cutting issue which hinders progress and development, affects communities and families. However, the Strategy that is currently being formulated will push for a budget that will support the strategy to achieve the annual activities that will be carried out or implemented to address GBV in the province. Since we don't have a provincial GBV secretariat and a strategy we will require sufficient budget and resources allocation to make the proposed secretariat and

fully functional achieve its main objective which is to reduce the and eventually eliminate GBV in the province.

- Progress establishing a Provincial GBV Secretariat and/ or GBV, Family and Sexual Violence or Child Welfare Action Committee including the members of those bodies and their contact details

Western Highlands Province has neither had a Provincial GBV Secretariat nor, a Family Sexual Violence or Child Welfare Action Committee. However, some work has been done together with the Provincial GBV strategy. Four Positions have been created, One Manager GBV Secretariat (Grade 14), a data manager (Grade 12), Case management Officer (Grade 10) and front desk officer (Grade 8) in consultation with the Executive Manager, Human Resource. However, the structure for Western Highlands Provincial Administration is in the implementation stage, which means the positions have all been advertised and have been preselected waiting section proper and it will take another five years to do a restructure and recruit officers. Unfortunately we cannot wait for that to happen but we need to have these position be filled and the GBV Secretariat be operationalized soon. **However, we are unsure who will fund the positions for qualified people to fill and start working to address GBV in the province.**

- Information regarding GBV crisis support services that available in your province including safe houses, health family support centers and other health services , police services and any counseling services

Mt Hagen General Hospital or the Western Highlands Provincial Health Authority has established a family support centre which is managed and run by a very active and vibrant team of health professionals especially nurses. They have also maintained a good network and referral pathway with other service providers such the counseling services, police, courts and welfare.

Currently, there are no safe houses for victims of GBV but, there are two orphanage care centres in Western Highlands Province, one is run by the catholic sisters in Ulga Parish in Nebilyer while the other is run by mother Rose Kepo in her property in Dobel village outside of Hagen City.

Since there is increase of Gender Base Violence, Violence against and Children, there is definitely a need for few safe houses both in town and in the districts.

- Information regarding GBV support provided by civil society or development partners

**Services provided by civil Society Organizations in WHP**

| No | Civil Society Organizations in WHP | Main focus | Remarks |
|----|------------------------------------|------------|---------|
|    |                                    |            |         |

|   |         |   |   |
|---|---------|---|---|
| 1 | FHI 360 | <p>FHI360 focused on three main areas</p> <p>Empowerment</p> <ul style="list-style-type: none"> <li>• They targeted schools –started safe school projects. Trained 21 teachers</li> <li>• Economic empowerment – Provided training in collaboration with MiBank. Promoted savings culture, Provided Float of k2000.00 for targeted seven communities which were proven successful- violence in the families and communities reduced when people engaged in economic activities.</li> </ul> <p>Prevention</p> <ul style="list-style-type: none"> <li>• they have targeted 7 communities/ doing outreach using volunteers</li> <li>• they have trained volunteers to do awareness</li> <li>• Produced IEC materials</li> <li>•</li> </ul> <p>Response</p> <ul style="list-style-type: none"> <li>• coordination meetings quarterly with stakeholders /service providers</li> <li>• Produced the GBV Contact Directory and strengthen referral pathways</li> <li>• conducted gender sensitization training for health workers/police</li> <li>• Conducted eRegistry training and install computers and software for registry of all GBV cases at the police station and family support centre</li> <li>• sign language training for care givers (Callan service for disable people)</li> <li>• GBV partners training</li> <li>• GBV care management training for all health workers</li> <li>• conducted child protection training</li> <li>• conducted training for new Pikinini</li> </ul> | <p>These activities and programs have been conducted in selected sites in the province which does not cover the entire district or the province. In order for the province to reduce violence or to eliminate it these activities and programs have to be rolled out all the districts to achieve maximum results</p> |
|---|---------|---|---|

|   |                                   |  |   |
|---|-----------------------------------|--|---|
|   |                                   | Act for village court magistrates in collaboration with the senior magistrate  |   |
| 2 | MERCY WORKS                       | focuses on youth, their families and communities by raising awareness through life and skills training in areas including Human Rights, Reproductive Health (including STI's and HIV/AIDS), Addictions and Anger Management, Domestic Violence Prevention, Budgeting, Positive Parenting, Gender | Need support to also expand the services they provide |
| 3 | ANGLICARE STOP AIDS               | Church response to the growing concern of the rising HIV and AIDS and Sexually Transmitted Infections in Papua New Guinea.   | Need support to also expand the services they provide |
| 4 | Mother Rose Kepo Orphanage Care   | Provides care and rehabilitation of orphanage children and children deserted by families due to violence   | Needs support expend the services she provides        |
| 4 | Ulga Parish Orphanage Care Centre | Provides care and rehabilitation of orphanage children and children deserted by families due to violence   | Needs support expend the services she provides        |

#### Established Committees in WHP

| No | Types of Committees                                | Status                | Remarks  |
|----|--|-----------------------|--|
| 1  | FSVAC<br>(Family Sexual Violence Action Committee) | Not fully functioning |  |
| 2  | GBVAC<br>(Gender Base Violence Action Committee)   | None for the Province | One for Hagen city Authority newly established |

- Information regarding any GBV prevention activities being implemented in your province , whether by government officials or civil society organizations, including in relation to awareness-raising , education, media, outreach or otherwise .

#### SERVICES PROVIDED IN WHP

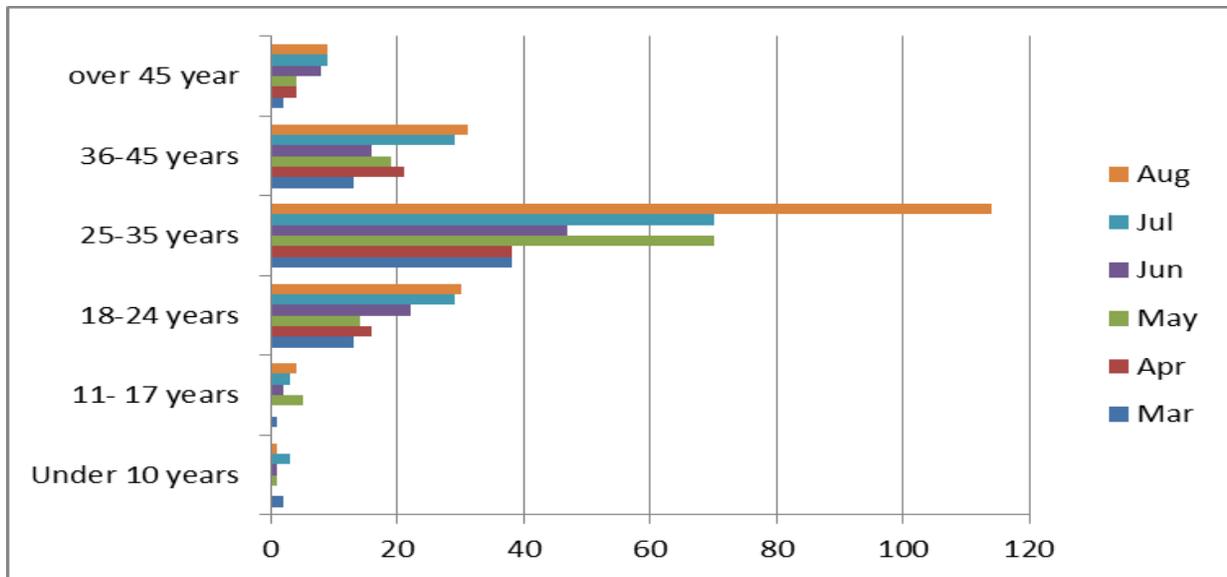
### Police sexual offense Squad (SOS)

There is police sexual offense squad at the provincial station in Mt Hagen but unfortunately the reports are all raw data which need to be analyzed. Due to shifting of officers from one section to another the records are not consistent but those that are engaged in the section try their best to keep some records. On average they are seeing least 3-4 cases of rape in a day but at times it exceeds the average of four cases a day.

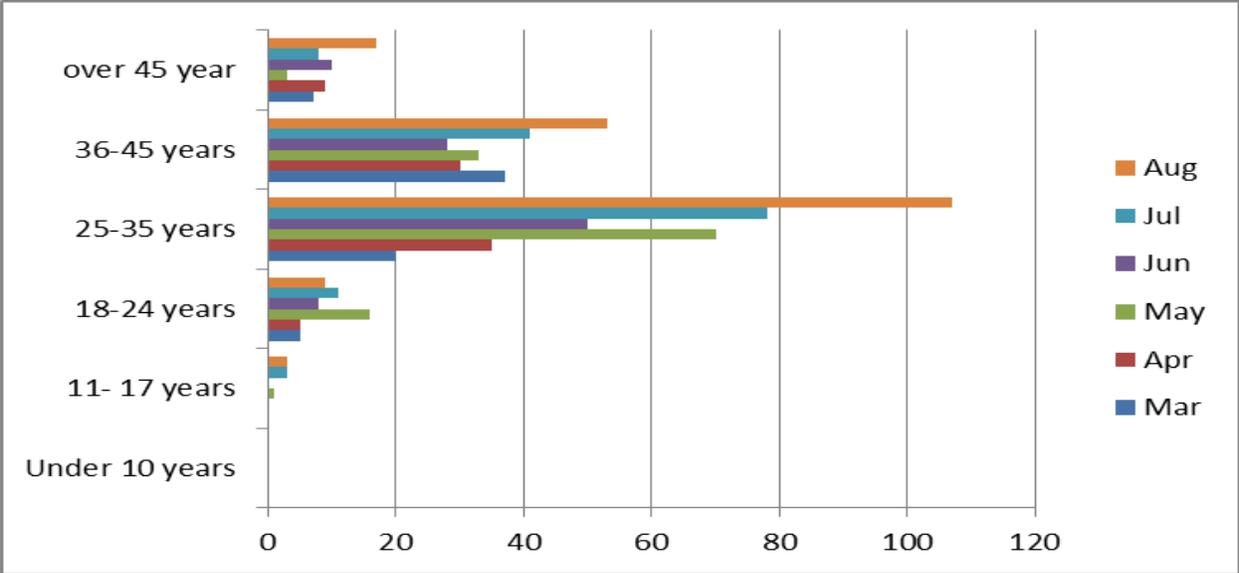
### Family Sexual Violence Unit (FSVU)

There is a family sexual violence unit at the Mt Hagen Provincial Police Station and there are officers who are engaged to attend to cases of violence perpetrated by both males and females. They have been trained by the FHI360 on gender sensitization especially to attend to GBV cases. They also keep the records of what they do daily at the FSVU desk. However, data management is an issue faced by the officers. Due to also shifting of officers around their records are not consistent. On average they are attending to more than 200 cases of different forms of violence at the station and are referred to seek appropriate care and attention through the referral pathways. They have this referral pathway that needs to be strengthened and supported so the victims get the maximum support to seek the services that are available

Graphical presentation of Age group of people, who are victims of GBV that were presented to the FSVU at the Mt Hagen Police Station from the month of March to August, 2021.



Graphical presentation of Age group of people, who are perpetrators of GBV that were presented to the FSVU at the Mt Hagen Police Station from the month of March to August, 2021.

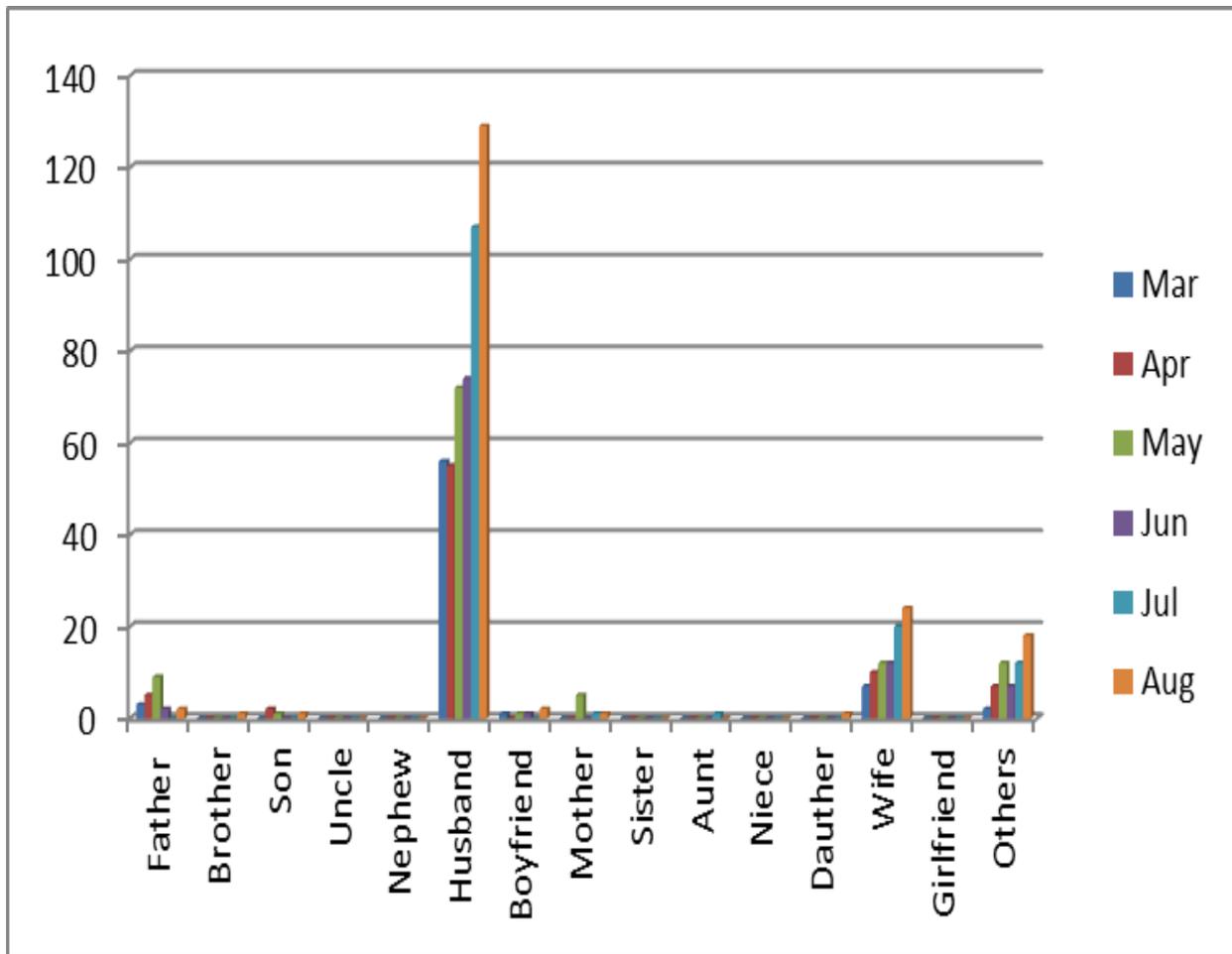


**Analysis of the age group that causes violence versus age group that falls victims of violence**

Most perpetrators and victims of GBV are aged between 25-35 years followed by 36-45 years and 18-24 years of age and its increasing steadily . These are potential people who can actively contribute to the development of this country

These graphic indication is very scary, it represents only a fraction of the total population of western highlands who experience some form of violence but the majority of violence are not reported. Some take it as part of life and they are used to, some don't report because of fear repercussions, negligence, break up relationships and more. If it is left unattended to or addressed then it will affect the province and the country in a big way.

Graphical presentation of the perpetrators, of GBV that were presented to the FSFU at the Mt Hagen Police Station from the month of March to August, 2021.



#### Analysis of the graphical Presentation from the Month of March to August 2021

1. Most the Petpetrators for the last 6months are Husbands but interestingly it is increasing steadily if you look at the bars for each month on the graph.
2. Next highest pepetrartors are wives and increasing steadily as well
3. In general most of the pepetrators are males
4. Violence caused by the wives in the houses is also increasing for each month steadily

Note: Innervations should be targeted towards these perpetrators to reduce the increasing rate of violence

#### Family support centre in Mt Hagen General Hospital

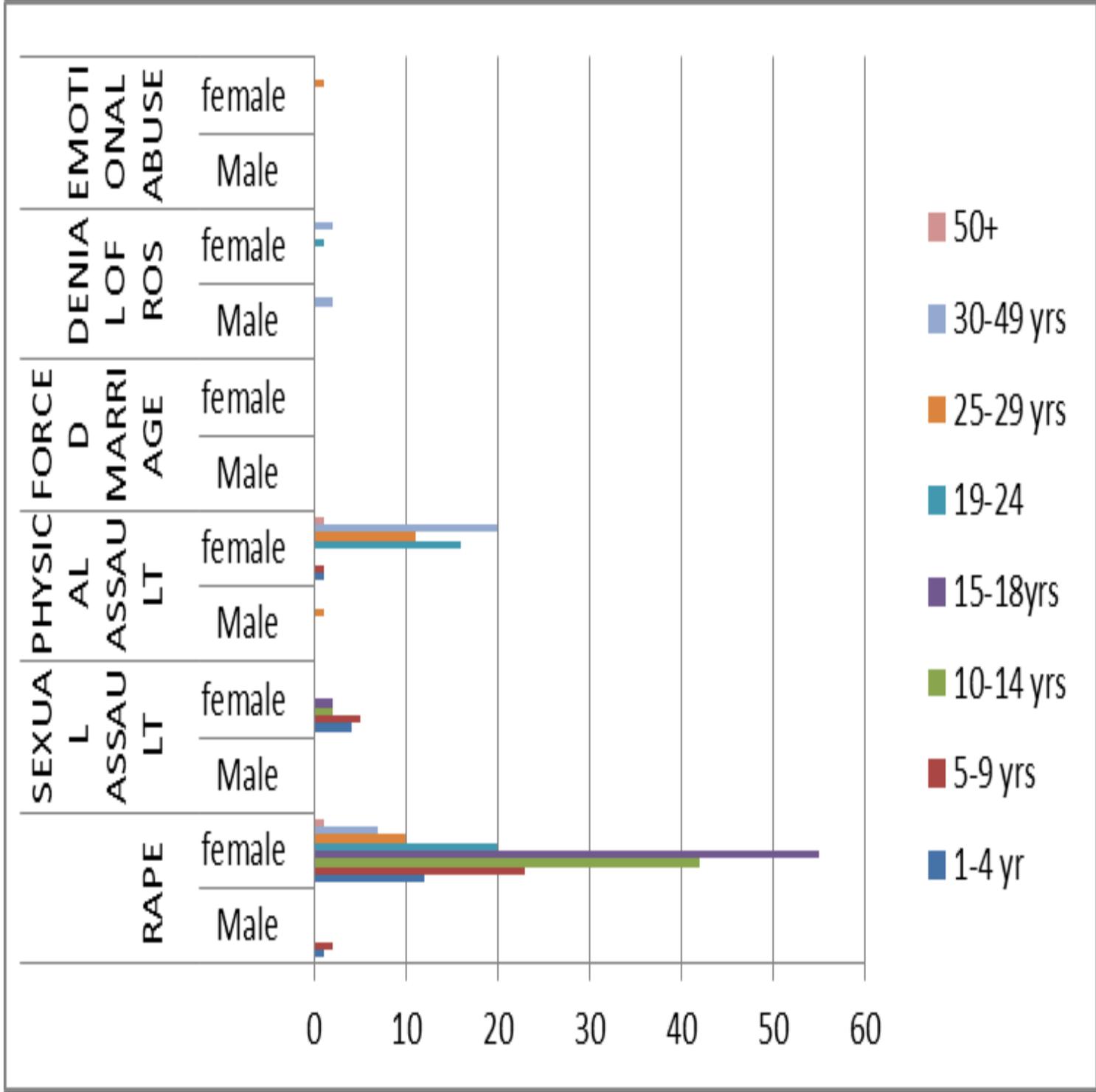
The family support center which operates under the Well Women's Clinic is up and running and providing necessary care and support sought by the victims of all forms of violence and are referred to the seek other services through the referral pathway that exists within the partners and services providers in the province.

The Western Highlands Provincial Health Authority is currently rolling out the Family Support Centre to the selected health facilities that are strategically located in each district. Current setups in the districts

are Togoba Health Centre in the Hagen Central District, Tinsley in the Mul Baiyer Lumusa District, Kotna in the Dei District and Tambul in the Tambul Nebilyer District.

The most common forms of violence present at the Family Support Centre in Mt Hagen General Hospital

| AGE                  | RAPE     |            | SEXUAL ASSAULT |           | PHYSICAL ASSAULT |           | FORCED MARRIAGE |          | DENIAL OF ROS |          | EMOTIONAL ABUSE |          |
|----------------------|----------|------------|----------------|-----------|------------------|-----------|-----------------|----------|---------------|----------|-----------------|----------|
|                      | Male     | female     | Male           | female    | Male             | female    | Male            | female   | Male          | female   | Male            | female   |
| 1-4 yr               | 1        | 12         | 0              | 4         | 0                | 1         | 0               | 0        | 0             | 0        | 0               | 0        |
| 5-9 yrs              | 2        | 23         | 0              | 5         | 0                | 1         | 0               | 0        | 0             | 0        | 0               | 0        |
| 10-14 yrs            | 0        | 42         | 0              | 2         | 0                | 0         | 0               | 0        | 0             | 0        | 0               | 0        |
| 15-18yrs             | 0        | 55         | 0              | 2         | 0                | 0         | 0               | 0        | 0             | 0        | 0               | 0        |
| 19-24                | 0        | 20         | 0              | 0         | 0                | 16        | 0               | 0        | 0             | 1        | 0               | 0        |
| 25-29 yrs            | 0        | 10         | 0              | 0         | 1                | 11        | 0               | 0        | 0             | 0        | 0               | 1        |
| 30-49 yrs            | 0        | 7          | 0              | 0         | 0                | 20        | 0               | 0        | 2             | 2        | 0               | 0        |
| 50+                  | 0        | 1          | 0              | 0         | 0                | 1         | 0               | 0        | 0             | 0        | 0               | 0        |
| <b>JAN -OCT 2021</b> | <b>3</b> | <b>173</b> | <b>0</b>       | <b>13</b> | <b>1</b>         | <b>50</b> | <b>0</b>        | <b>0</b> | <b>2</b>      | <b>3</b> | <b>0</b>        | <b>1</b> |



In this graphical presentation from the data collected starting from January to February 2021 it can be seen that almost all the rapes are perpetrated by the males and the most at risk groups are female child aged between 15-18years and next most at risk group are aged between 10-14 years followed by 5-9years and 19-24 years. **The Dangerous trend now is that female child aged ranging from as low as 5years to 14 year are already experiencing violence especially rape. This group of female child are very young and for them to be exposed to such situation or experiencing rape is something that has never been seen before and its very dangerous now. It is the same age group that is also experiencing sexual and physical assault.**

The gaps/ weaknesses and priority that you believe you need budget allocated by the National Government or Provincial Government in support of your efforts.

| No | Gap/ Weakness                         | Priority | Remarks   |
|----|---------------------------------------|----------|---|
| 1  | No GBV secretariat                    | One      | Needs both provincial and National government support /Donor Support                                |
| 2  | No GBV Strategy                       | ONE      | Needs provincial government support/Donor Support   |
| 3  | No Budget                             | One      | Needs provincial government support/Donor Support   |
| 4  | No manpower                           | One      | Needs both provincial and National government support/Donor Support. Four Positions for GBV created |
| 5  | No Annual Work Plan                   | One      | Needs provincial government support   |
| 5  | No Safe Houses                        | Two      | Needs both provincial and National government support/Donor Support                                 |
| 6  | No GBV action Committee               | Two      | Needs both provincial and National government support/Donor Support                                 |
| 7  | Lack Capacity Building for officers   | Two      | Needs both provincial and National government support/ Donor Support                                |
| 8  | No office/Office equipment            | One      | Needs both provincial and National government support/Donor Support                                 |
| 9  | Data Collection and management system | One      | Needs both provincial and National government support/Donor Support                                 |
| 10 | Media awareness and Education         | Two      | Needs both provincial and National government support/Donor Support                                 |
| 11 |                                       |          |   |

Since we don't have an established GBV are activities are limited for now but will surely increase when our GBV secretariat is fully established and operationalize.

We would like to propose the following recommendations that;

1. The government both National and Subnational Levels to take ownership of this program by resourcing it and building its capacity
2. The government should assist in establishing our Provincial GBV secretariat
3. The government should Support the Provincial GBV secretariat with equipment / logistics and finance to operationalize the GBV Secretariat
4. The government should fully support these efforts by our lead government agencies and civil society organizations in the province and expend some of the services that are being provided
5. The government should push to address GBV by for mainstreaming it in all sectors