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# SUBMISSION TO THE UNITED NATIONS SPECIAL RAPPORTEUR ON VIOLENCE AGAINST WOMEN

30 JUNE 2020

COVID-19 DOMESTIC VIOLENCE AGAINST WOMEN  
IN PAPUA NEW GUINEA

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**FemiliPNG**

**IWDA** INTERNATIONAL  
WOMEN'S  
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## INTRODUCTION

This joint submission is made by the following organisations working to promote women's leadership and safety across Papua New Guinea: Eastern Highlands Family Voice, Wide Bay Conservation Association, Voice for Change, and Femili PNG. We have provided the following information to the International Women's Development Agency, who are playing a coordinating role in writing and submitting this report.

### Organisations contributing to this Submission

**Eastern Highlands Family Voice (EHFV)** is recognised as a leading organisation in Eastern Highlands Province working on Family and Sexual Violence. Based in Goroka, they provide critical counselling, referral and case management services to women and families experiencing violence. They also work with local communities to promote gender equality and human rights, advocate against abuse and violence, and create social behaviour change.

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**Wide Bay Conservation Association (WBCA)** works to strengthen recognition of women as traditional custodians and as equal leaders in their communities. WBCA works to empower local communities, especially women, to have control over decisions about their land and resources in the Wide Bay area of East New Britain. WBCA's Head Office is based in Kokopo Town in East New Britain Province.

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**Voice for Change (VfC)** is a women's human rights organisation working in Jiwaka Province to empower and mobilise rural women to take leadership in addressing gender-based violence and increasing women's economic empowerment. They coordinate the Jiwaka Women Human Rights Defenders Network, building capacity to lead responses to and prevent violence against women at the community level.

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**Femili PNG** is a local NGO based in Lae, Morobe Province and Port Moresby that runs Case Management Centres (CMC) and a Safe House to assist survivors of family and sexual violence to access the services they need. Femili PNG works with women, men or children who are survivors of intimate partner violence, sexual violence, sorcery accusation related violence and/or child abuse.

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**International Women's Development Agency (IWDA)** is the leading Australian agency entirely focussed on women's rights and gender equality in the Asia Pacific region. We are international, feminist and independent. Our vision is gender equality for all and our purpose is to advance and protect the rights of diverse women and girls.

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## COUNTRY INFORMATION

Papua New Guinea (PNG) is the largest and most populated Pacific nation. Over 800 languages are spoken across 600 islands, making this one of the most diverse countries in the world.

PNG is resource rich; mining, logging and palm oil have generated billions in revenue for foreign multinationals, local groups and the government. Weak governance in the country means that despite the enormous financial potential of these industries, 39% of people in PNG live below the income poverty line of US \$1.90 per day.<sup>1</sup> While the PNG Constitution outlines equal protection under the law, in practice, socio-cultural barriers continue to prevent this from being realised. In particular, customary law, which frequently discriminates against women, is commonly applied, leading to violence against women, their exclusion from decision-making and denial of property and land rights. Given the majority of the population (approximately 89%) live in rural areas and traditional communities, many rely on markets for income, and have limited access to basic health services, education and economic opportunities.<sup>2</sup>

Poor infrastructure coupled with the above concerns have led CARE Australia to rank PNG as the most at-risk country from COVID-19 in South East Asia and the Pacific.<sup>3</sup>

### a) Violence Against Women and Girls in PNG

The absence of a nationwide systemic way to collect data on gender-based violence means it is difficult to present a comprehensive picture of violence against women in PNG. However, prior to COVID-19, the magnitude of gender-based violence incidences in PNG was considered its own pandemic. According to the Demographic Health Survey 2016-2018, 56% of women aged 15-49 have experienced physical violence since age 15, while 28 percent have experienced sexual violence.<sup>4</sup> 41% of men in PNG admit to having committed rape, over two-thirds of women are estimated to have suffered some form of physical or sexual violence in their lifetime, and it is reported that 7.7% of men admit to having perpetrated male rape<sup>5</sup>. Only 73% of survivors of gender-based violence in PNG seek assistance and the vast majority (88%) do so through informal support structures, such as familial, kinship or collegiate networks or village courts and community leaders rather than through official channels.<sup>6</sup> Accounting for informal support structures, it is understood that gender-based violence in PNG is underreported and these numbers could be much higher. This submission focuses on the experiences of grassroots civil society organisations and our observations of informal support structures to provide further data on the rates of women seeking this kind of support in response to gender-based violence.

Research in PNG shows that triggers for violence include financial disagreements and disharmony in marriage.<sup>7</sup> Therefore, we can expect that a serious outbreak of COVID-19 or extended lockdown periods in PNG will raise gender-based violence rates given the increased security, health and income stress put on households. Addressing the gender dimensions of COVID-19 in PNG will be necessary to stop violence during this time.

### b) COVID-19 in PNG

At the time of writing, there have been only 11 confirmed cases of COVID-19 in PNG with 8 recoveries and 0 deaths. However, as noted above, poor infrastructure has led to lack of testing capability and extended testing times. With only 10,000 people tested in a country of an

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<sup>1</sup> UNDP (2020), *Human Development Reports: PNG* <http://hdr.undp.org/en/countries/profiles/PNG>

<sup>2</sup> Ibid.

<sup>3</sup> CARE Australia (2020), *COVID-19 Crisis: Analysis of Risk in Australia's Neighbourhood*, <https://www.care.org.au/wp-content/uploads/2020/04/COVID-19-Crisis-Analysis-of-Risk-in-Australia%E2%80%99s-Neighborhood.pdf>

<sup>4</sup> PNG National Statistical Office (2019)

<sup>5</sup> Darko, E., Smith, W., and Walker, D. (2015), *Gender Violence in Papua New Guinea*, <https://www.odi.org/publications/9887-gender-violence-papua-new-guinea>

<sup>6</sup> Tomas, V., Kauli, J., and Rawstorne, P. (2017) *Understanding Gender Based Violence and Sorcery Accusation Related Violence in Papua New Guinea — An Analysis of Data Collected from Oxfam Partners 2013–2016*. Goroka: Oxfam.

<sup>7</sup> Ibid.

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estimated 8.95 million, and reports that at least 300 people nationwide have been found to have coronavirus anti-bodies, concern for COVID-19 remains high.<sup>8</sup>

The PNG government has enacted various containment measures since late January 2020, when it imposed a ban on travellers from Asian countries, reduced international flights, mandatory health declaration forms for incoming travellers and enhanced screening at designated ports of entry. The National Emergency Operations Centre (NEOC), which was set up during the 2018 polio outbreak, was reactivated to coordinate the national pandemic response. Following the confirmation of the first imported case the government declared a State of Emergency effective from 24 March as a precautionary measure. Initially imposed for two weeks, but later extended, the State of Emergency included the grounding of domestic flights, shutting of schools and universities, a nightly curfew between 8pm and 6am, a ban on all public gatherings, cessation of public transport, a total ban on alcohol sales and roadblocks at key routes in and out of the capital city Port Moresby. In March, the Department of Health released the *Emergency Preparedness and Response Plan for Coronavirus Disease 2019 (COVID-19)* to lay out probable scenarios of the outbreak, identify triggers and alerts to scale up the response and outline recommendations by the NEOC. In May, the curfew and alcohol restrictions were lifted and schools reopened, although various social distancing measures, including a ban on gatherings, remain in place. The State of Emergency ended in June with the NEOC continuing to lead the ongoing response.

While restrictions are in line with international recommendations, the measures implemented by the *Emergency Preparedness and Response Plan* do not integrate gender considerations or make mention of gender. This is concerning given the above restrictions have limited both women's freedom of movement and disrupted their livelihoods, making it more difficult for them to seek assistance in cases of gender-based violence. Police and women's rights organisations have set up various helplines; however, serious cases of gender-based violence continue to occur.

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<sup>8</sup> ABC Pacific Beat, *Antibody test results in PNG raise concerns about true COVID-19 case numbers*, 23 June 2020, <https://www.abc.net.au/radio-australia/programs/pacificbeat/png-coronavirus/12382994>

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## RELEVANT INFORMATION

The following information was gathered by the above civil society organisations to provide Ms. Dubravka Šimonović, the United Nations Special Rapporteur on violence against women, relevant information on the increase of gender-based violence against women in PNG. This data was collected by our organisations during the course of our day-to-day work, as well as from observed responses from interviews with our staff and clients. All names and other identifying characteristics of individuals have been changed in order to safeguard their privacy.

### 1. Increases of violence against women, especially domestic violence in the context of the COVID-19 pandemic lockdowns

#### Domestic Violence

- Domestic violence has increased as stressors exacerbated by the pandemic lockdowns are blamed on women.

*The State of Emergency has exacerbated existing stressors on households. For N.D in Jiwaka, this stressor was income for her daughter's school tuition. The current government no longer provides free education and being from a rural area she relies on her farm for income. The lockdown has prevented N.D from being able to sell her produce at markets because they are closed and difficult to get to because of public transportation closures. With these restrictions in place, N.D has become more cautious with her finances because she is uncertain about the duration of the COVID-19 crisis, worried about potential family emergencies and concerned about her daughter's tuition for the upcoming school year. N.D has continuously refused to give money to her husband for gambling, and in response, N.D's husband has physically abused her since April and has accused her of sorcery. Their neighbours have expressed concern because N.D's husband had never displayed physical violence before- they wonder if this could have been avoided without the stressors of COVID-19.*

- Stay at home orders have increased the consumption of alcohol or other substances at home, which leads to domestic violence.

*In East Pomio, a woman named K.M has reported continuous physical abuse and marital rape from her husband due to his consumption of homebrew. WBCA has supported K.M by speaking to her husband and removing brewing equipment from their home so he can no longer make or drink the substance that triggers his violent tendencies.*

- Lack of savings and dependency on food markets for income has forced more women to move in with their husbands and the cessation of fly in fly out (FIFO) work has kept men at home, increasing the time women spend with abusive family members.
- The State of Emergency lockdowns have made it difficult for women to travel to escape abusive situations at home.

*In Jiwaka, A.G's husband B.G became extremely ill after testing positive for HIV and Tuberculosis at the beginning of 2020. Despite B.G being a valuable community member, no one supported A.G in his care and they began to discriminate against A.G for her suspected HIV status. After B.G's death in April, A.G's family demanded that her husband be buried away from their community. A.G was psychologically abused for not doing what they asked, but she was unable to take her husband's body anywhere because of the lockdown. Helpless, she sought support from VfC, was able to prepare B.G's body for transport to another location, and was able to bury him in his hometown. A.G is still vulnerable to abuse due to her own HIV status and requires counselling and treatment to prevent further discrimination; however, the lockdown prevents VfC from providing these services.*

*In East Pomio, a young woman named R.T. is married to a man 20 years older than her, who expects that R.T continues to have children. R.T has had a child by force every year since they have been*

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together and she is tired without his support around the home. She has attempted to escape her abusive situation, however, during the COVID-19 crisis, there is nowhere to go and the local health centre has provided little support.

- Women have been evicted from their homes for a variety of reasons, limiting their ability to provide for their children or protect themselves from violence.

*E.K, a mother of two children from the Highlands, was accused of sorcery by her husband's family. One evening, the nephew of E.K's husband came home drunk at 1am, verbally abused E.K and threatened her life with a bush knife, demanding that she leave her own house with her children. He refused to give E.K time to gather her belongings and woke the children up to force them out of the house. E.K and her children now live with a woman in the neighbouring community but struggle to eat for fear of being monitored. E.K is unable to go to the police or the courts because of the lockdown and fears that she will be unable to find help during this time.*

*In East Pomio, D.S, a grade 12 student was evicted from her parents' home because she attributed her pregnancy to rape. Her father threatened to murder her and she was sent to a local safe house to give birth. During the COVID-19 crisis, the safe house was unable to host D.S and her child and they had to return home with little support to protect themselves from D.S's father. At the time of writing D.S's case has yet to progress through the justice system.*

- The case management centres operated by Femili PNG have seen reduced numbers of survivors presenting for services in April and May. In Lae, new client intake was 29 in April and 31 in May, compared to 42 and 46 respectively in April and May 2019. In Port Moresby, there was 17 new clients in April and 19 in May, compared to 37 and 24 respectively in April and May 2019. However, this reduction in numbers may be attributed to lack of public transportation given that client numbers have returned to normal at the time of writing. In fact, Port Moresby has experienced a substantial increase in new clients in June, already reaching 28 cases by mid-month.
- In East Pomio, WBCA reports an increase in the number of women visiting the local Health Centre with injuries potentially caused by domestic violence. Many women are not candid about the source of their injuries but WBCA reports seeing bruises on women's bodies and faces in line with domestic violence cases.

### Violence Against Women in Public Spaces

- VfC and EHFV have observed increased sorcery-accusation related public violence in the Highlands.
- Lack of work has increased the number of men who gamble in public places such as the river or at roadblocks where women face harassment daily.

*In Jiwaka, Banz is one of the only central business hubs for both formal and informal economies. When lockdown began, men and women around the area lost their main source of income and resorted to taxing pedestrians on their way through town. Women and girls pass through the area and face increased harassment. However, due to their need for food they are unable to avoid the road. Police have done nothing to prevent this harassment and allow gambling for community members to pass the times. A young woman from Banz town says "people do not care for each other anymore and it is sad."*

- Stay at home orders have escalated tensions in communities as more people have time to gossip.

*In Jiwaka, a fight broke out between two groups of women on 23 March due to the increase of gossip between family members. Women who have married into the same family gathered to weave bilums and share stories. However, the gossip between two in-laws on the home life of another woman started a fight with harmful accusations and could potentially lead to physical violence in the home.*

### Police Violence

- Women have experienced increased police harassment due to unpredictable enforcement of curfew times because police do not own wristwatches and rely on the location of the sun to predict time.
- Police have enforced social distancing requirements with violence. There have been accounts of police cars driving into markets, destroying women's goods, verbally and physically assaulting women.

*A woman named S.V in Jiwaka shared her experience with police: "One of the policemen approached us and I could see the anger written all over his face. I turned away wanting to walk away when I felt something hit me on my side. The stone landed on my side rib and I could hardly stand. After hitting me with a stone, [the policeman] swore at me then turned to my husband and said 'boss, it's a time of crisis, can you take your wife and go home?'"*

## 2. Availability and accessibility of helplines run by government and/or civil society

### Available Helplines and Information Portals

- The Government has established a toll free COVID-19 hotline to assist people with health questions and other issues during the State of Emergency.
- The Government sends text updates to all mobile owners on COVID-19 prevention measures, and resources to report police abuse and businesses increasing prices during the pandemic- there are no updates for gender-based violence resources.
- ChildFund has partnered with UNICEF to rapidly expand its free, national helpline 1-Tok Kauselin Helpim Lain (715-08000).
- EHFV has created counselling cards for clients to call for support during the State of Emergency.
- Femili PNG's case management centre in Lae, and the case management centre and safe house it operates under the Bel isi PNG Initiative in Port Moresby have remained open during the lockdown and State of Emergency for calls and walk-in clients.
- In East Pomio, there is no help service operated by the local government and community members do not have information about available services at local, district or provincial level.

### Hotline Barriers

- Despite hotlines being available and toll-free, many women are unable to access these lines. A large proportion of PNG's population, especially women, remain unconnected to the mobile network, mainly due to the complexity of extending mobile networks in remote and mountainous areas with low population density.
- Other barriers to mobile phone ownership and usage faced by women include affordability, accessibility (including limited access to identification documents required to purchase sim cards, electricity and mobility to access network coverage), safety concerns, men controlling women's access to technology, usability and skills.<sup>9</sup>
- During COVID-19 the price of pre-paid phone credit in Jiwaka has increased from 3.50 kina to 4.50 kina for 3 kina credit, increasing the barrier for women to access information and support from service providers.

<sup>9</sup> GSMA (2014), *Connected Women – Striving and Surviving in Papua New Guinea: Exploring the Lives of Women at the Base of the Pyramid*, [https://www.gsma.com/mobilefordevelopment/wp-content/uploads/2014/11/mWomen\\_PNG\\_v3.pdf](https://www.gsma.com/mobilefordevelopment/wp-content/uploads/2014/11/mWomen_PNG_v3.pdf)

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### 3. Ability of women victims of domestic violence to be exempted from restrictive measures to stay at home in isolation on the grounds of domestic violence

As civil society organisations focused on ending violence against women in our communities, we have heard conflicting advice and have observed varying responses to women survivors not adhering to stay at home mandates. The variance in the information received below demonstrates the lack of clear guidance from the government on the rights of women during this time:

- EHFV observed that despite reporting domestic violence to police, women are still required to adhere to restriction measures.
- Femili PNG are not clear if survivors in their areas of work are exempted in cases of violence, but have observed that despite police assisting high-risk survivors during lockdown they still face great difficulty in accessing services due to public transport closures and social distancing enforcement.
- WBCA have observed that in the event women face violence in their homes they have been permitted to continue their work and move about freely at the discretion of individual communities.

*In Bain, East Pomio, a woman travelling back home from Kokopo was barred from entering her village due to fear of COVID-19. At the time of writing she still lives in isolation far away from the main village.*

### 4. Availability and accessibility of shelters

Similar to the mixed messaging on survivors' rights to movement during this time, safe houses and shelters for women and children face conflicting classifications. In some areas they are deemed as an essential service, while in others they have been closed due to failure to meet health requirements or deemed nonessential. During this time we have observed the following in our communities:

- Family Support Centre (FSC) at Angau Hospital in Lae has been closed because the location is now being used by female nursing staff to attend to COVID-19 patients.
- The only safe house in the Highlands has been closed due to lack of PPE and other resources needed to cater to victims of gender-based violence.
- The Bel isi PNG safe house, operated by Femili PNG, continues to accept new arrivals during the State of Emergency. However, there is growing concern that limited space will require alternative accommodation if lockdowns continue and demands increase.
- In Lae, safe houses have remained open and are considered an essential service. Two safe houses were closed to new referrals but continue to accommodate clients admitted before the State of Emergency.
- In Port Moresby all safe houses but one were closed in March. Four more have opened since May, however they have reduced capacity, and limited PPE, space to adhere to social distancing and staff resources.
- In East Pomio, there are no safe houses. Clients must be taken to Kokopo, the location of the only safe house on the island East New Britain, However, that safe house was no longer allowed to accept new cases during the State of Emergency.
- Many safe houses and other organisations providing GBV response services are experiencing reduced hours due to government curfews, and work from home mandates have made shelter work impossible as staff homes are in rural areas without electricity.
- VfC plan to lobby the government and police to allow GBV services and shelters to remain open as an essential service during this time and during potential future lockdowns.

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- Given the scarcity of safe houses and police services in East Pomio, WBCA have been advocating to ward members, the church, schools, local health services and the village courts that they must work together to combat gender-based violence.

## 5. Availability and accessibility of protection orders

The availability of protection orders varies across PNG. In our areas we have observed the following:

- The government COVID-19 response team has the ability to circulate protection orders.
- In the Highlands, protection orders are still available but have been abused by citizens seeking personal security. In other cases, lack of public transport and stay at home orders have prevented women from accessing support services.
- In Lae and Port Moresby, court officials were able to issue interim protection orders from home during lockdown. At the time of writing, the courts in Lae and Port Moresby are open again.
- In East Pomio, protection orders are not available as lockdown has limited government services.

*In April 2020, before the COVID-19 State of Emergency in PNG, an East Pomio woman named J.H took her husband to court for domestic violence. At the time of writing, she has yet to receive her interim protection order from the court and has had to return home to care for her family. WBCA is assisting J.H in collecting her interim protection order. However, after three attempts to collect this paperwork they were notified that there was no ink in the printer to complete the protection order. The last ink shortage slowed protection order processing for 8 months and WBCA is concerned that J.H and other women like her waiting for protection orders will have to wait much longer due to COVID-19.*

## 6. Impacts on women's access to justice

As a policy measure implemented during the State of Emergency all courts were closed and cases deferred until the end of June 2020. These closures have had the following impacts on women's access to justice in our areas:

- Family Sexual Violence Police Units only give verbal orders and victims are unable to seek further action until the end of June.

*On 19 April, a 13 year-old girl named R.K. was raped by a man 30 years older than her in Jiwaka. The perpetrator was an extended family member who lured her into a false sense of security on a daily errand collecting food from their garden. Due to the COVID-19 lockdown the police were unable to arrest the perpetrator and, at the time of writing, he is still at large. R.K has lodged a report and complaint to her local police station. In the meantime she is receiving support from her local women's rights organisation and medical centre.*

- The National and Supreme Court reopened to hear urgent cases on 11 May however it is unclear if any of these are related to gender-based violence.
- Courts have implemented additional protocols to prevent the spread of coronavirus; it is unclear if these will pose barriers to women's access to these spaces.
- A number of Femili PNG clients who were assisted with emergency accommodation prior to 23 March are still in safe houses awaiting their revised court dates in June. In Lae, five clients (3 female adults, 1 female child, and 1 male child) have been in emergency accommodation since the lockdown began with another 16 clients provided safe accommodation during the State of Emergency.
- In East Pomio and the Highlands, court closures have prevented mothers and their children from accessing justice.

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*A high school aged student who was raped prior to the COVID-19 State of Emergency has given birth in a safe house while waiting for the police and the court to progress her case. Witnesses to the young woman's rape have been unable to provide evidence to the police due to the cost of travel from rural areas to Kokopo and other barriers created by the State of Emergency. At the time of writing, her case has not been completed and the Kokopo court house remains closed. She has returned to her village without justice for her or her child and continues to face threats to her life from her father and lacks support from her family.*

*H.G, a disabled woman who was conceived by force and born to a disabled mother, was left in the hands of her aunt in 2018 following the death of her mother and grandparents. In this new village, H.G was raped by a man and gave birth to her first child in 2018. During the COVID-19 crisis she has reported another pregnancy resulting from rape to the authorities. At the time of writing, both cases have yet to progress and H.G has not seen justice.*

*During the State of Emergency, J.L, a school-aged girl went missing for three days. On the fourth day she returned home and told a women's rights organisation that she was kidnapped by a boy from her school and sexually abused in the bush for three days. Due to the lockdown there has been no formal case lodged against the boy at the time of writing.*

- In the Highlands, VfC observed that police have been busy managing COVID-19 responses and have therefore been less responsive to reports of violence against women, delaying victims' access to justice.

*A middle-aged woman named C.K was in her house when a minor boy tried to rape her during the COVID-19 lockdown. Being able to escape, C.K reported her experience to the village leaders and they convened on 16 April 2020 to discuss the situation. Instead of disciplining the perpetrator, they allowed him and his family, including his brothers, mother and aunt, to physically assault C.K in front of the community. C.K's community laughed as she was assaulted and labelled her a prostitute. Following this event C.K has been continuously discriminated against in her community and is unable to seek justice because the police station's services are on hold.*

- In cases where women are able to access justice mechanisms the lockdown has delayed their compensation or medical care.

*In Jiwaka, a woman named F.B was discussing the duty of men to provide women with a kitchen with her daughter-in-law. F.B's ex-husband heard this conversation from outside and forced his way into the house to attack her with a large piece of timber. He shattered F.Bs elbow and left her to seek treatment on her own. F.B sought justice through the ward councillor and the village court magistrates and she is due compensation from her ex-husband to the amount of K500.00 and a pig. Despite this court order, F.B is still waiting on payment from her ex-husband due to COVID-19 and has had to pay her own medical fees for her broken bone. Her injuries have made it difficult for her to collect food or go about her normal living.*

- In the Autonomous Region of Bougainville courts remained opened only for women applying for Interim Protection Orders; all other cases have been deferred.

## **7. Impacts on women's access to health services**

Current restrictions have limited women's access to vital health services across PNG. We have observed the following in our communities:

- In the Highlands, most evening medical emergency cases cannot be attended due to lockdown or curfew hours.

*In March, a woman in the Highlands was stabbed in the ribs by her husband during a fight at home. She was rushed to the hospital but it was closed due to the State of Emergency and she had to seek medical care in the home of a nearby nursing aid. She has recovered and community leaders have ordered the husband to pay compensation for her injuries; however, he has threatened to kill his wife*

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*instead. The community is concerned because there is no medical centre available to treat more serious injuries and the police stations are closed.*

- The FSC in Lae was closed during the 2-week lockdown as hospital staff underwent COVID-19 training. Following the lockdown the FSC reopened but can only accept new sexual violence cases.
- The FSC in Port Moresby remained open but only for sexual violence cases; no other health services are provided.
- Restrictions to movement have impacted women's ability to seek medical care when in need. WBCA has observed women suffering from their health issues in silence.

*In East Pomio, 5% of women attending the Antenatal clinic have reported that their pregnancies were the result of force. In addition 3% of Antenatal clinic patients are school-aged girls who became pregnant during their 7th or 8th grade years. Given the local health centre abides by the teachings of the Catholic Church, they are unable to perform abortions or provide alternative family planning methods apart from the ovulation method. At the time of writing there are many women with unwanted babies as a result of force that are unable to seek care or advice outside the local health centre due to COVID-19.*

- The cost for transportation has not only been a barrier for women and children to escape violent situations, but has led to the death of a baby in the Highlands because the parents could not get transport to medical attention.

*During lockdown a woman named G.M. gave birth to a baby girl in her home without the assistance of basic maternal care at the local hospital. The home birth resulted in the mother becoming ill and losing her ability to stand, walk or breastfeed her child. G.M, being unable to leave the spot of her delivery was limited to using her bed and bedroom as her restroom. The baby became ill with vomiting, diarrhea and fever due to the proximity to human waste and inability of the father to provide appropriate amounts of food. Without public transportation and the restrictions of lockdown, the father had to walk one hour up a hill to buy the baby food, care for G.M and cater to household chores alone. As the baby's condition worsened the father took the girl to the nearest health centre, a two hour walk from home, but only received medication and was advised that his child needed to go to the hospital. The hospital was too far to access without public transportation, and the father returned home. The child died the next day, and at the time of writing G.M has yet to recover from her illness.*

- Lockdown has limited access for women to access money to pay for medicine or medical care.

*In the Highlands, a 10-year-old girl passed away because her family was no longer able to afford her medication or hospital fees. As market vendors, the parents were able to afford her care prior to the COVID-19 lockdowns, but in April, when their daughter experienced stomach pains they were unable to go to the hospital due to lack of market income. The family went to a local health centre and were prescribed painkillers that did little to remedy the daughter's pain. The family sought financial help from their community to send their daughter to the hospital for proper care, but when she was able to attend it was too late and she passed away on 17 April.*

## **8. Examples of obstacles encountered to prevent and combat domestic violence during the COVID-19 lockdowns.**

Throughout the COVID-19 lockdowns there have been multiple barriers to prevent and combat domestic violence that can be attributed to the lack of government planning and preparation for an emergency of this kind. Access concerns, curfew limitations and social distancing measures have not been accompanied by policies that would support victims and women's rights organisations at this time, leading to lack of collaboration and empowerment for women and children experiencing violence. In our work we have observed and experienced the following:

- Curfew has limited our time with women in rural communities as travel times require that we leave early.

- As non-for-profit organisations we lack access to PPE for the protection of our staff and volunteers, meaning we have been unable to provide support to as many people as we would like.
- The lack of public transport remains an obstacle that prevents survivors from accessing safety and security services. Even when public transit is open, social distancing measures have increased fare prices making it difficult to access for rural women.
- Social distancing measures have hindered our ability to do our job including assessing victims and providing them shelter because our safe houses cannot be filled to capacity.
- Travel restrictions have delayed the repatriation of survivors and extends periods for further abuse for those unable to leave violent circumstances.
- Femili PNG training and outreach programs have had to be amended or delayed due to social distancing requirements. For example, family and sexual violence and child safety training has been conducted with school teachers only to maintain social distancing.
- Despite providing partners and service providers, such as police, courts, welfare and safe houses with PPE, many are afraid to assist survivors without having adequate protection.
- The ability of women's rights organisations' staff members to work from home is varied. Some do not have access to electricity or internet and therefore need to go to the office. Without public transport this is difficult. Femili PNG, VFC and EHFV have their own vehicles but WBCA does not.
- WBCA staff, who work in Kokopo town as well as remote communities, have been trapped in various field locations due to a COVID-19 case discovered in local level government. Staff have been unable to travel without private vehicle and public transportation or communicate with one another due to credit and electricity shortages.
- Inflation is putting increasing stress on already diminishing livelihoods: the price of pre-paid phone credit has increased, making communication with family members more difficult and increasing the barrier for women to access information and support from service providers.
- Public transport costs have doubled due to social distancing requirements, presenting a barrier for women to escape violent situations and access services. The cost of fuel (needed for transport to respond to cases of gender-based violence, and to run VFC's generator) has also significantly increased.

## **9. Examples of good practices to prevent and combat violence against women and domestic violence and to combat other gendered impacts of the COVID-19 pandemic by governments**

Despite the barriers mentioned above, there have been some examples of good practice in the prevention of violence against women during this time. These include:

- In Port Moresby and Lae, where court officials are able to work from home, the ability to provide protection orders without a court appearance and via emailed documents has been a new and efficient way to provide women with protection during this time.
- In the Highlands, elected leaders have been donating food to rural communities to assist small income earners and prevent violence in the home.
- In East Pomio, villages have set up their own laws to control community borders and promote public health. Many have ensured that anyone approaching a community must stay at sea until permission is given by island leaders and they wash themselves upon arrival.

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- Police have set up an internal affairs phone referral hotline: 320 2634 for services providers to report any harassment or attempts to shut them down.

## **10. Examples of good practices to prevent and combat violence against women and domestic violence and to combat other gendered impacts of the COVID-19 pandemic by NGOs and NHRIs or equality bodies.**

As women's rights organisations in PNG we have been engaging in the following practices to combat violence against women and domestic violence in addition to other gendered impacts of COVID-19:

- COVID-19 awareness initiatives led by women's rights organisations in rural communities have highlighted the issue of domestic violence as a potential impact of the virus.
- EHFV and VfC are distributing information, education and communication materials on COVID-19 prevention and response to linguistically diverse, rural communities. These materials have been translated into Tok Pisin and other local languages, to make them more accessible for communities who may not be reached by government communications.
- EHFV are hosting radio programs to share information available from the World Health Organisation (WHO) to protect individuals against COVID-19.
- Femili PNG's case management centre's and Bel isi Safe House have remained open to support survivors during the pandemic.
- Femili PNG's Training Coordinator has been redeployed as Femili PNG's Emergency Coordinator and is working with partners to reach out to people living with a disability or HIV. This has allowed Femili PNG to identify and support individuals at risk of family and sexual violence.
- Femili PNG has supported partners and other service providers with donations of PPE and informational material on COVID-19 and Family and Sexual Violence for distribution.
- Femili PNG has conducted Family and Sexual Violence training with teachers adhering to social distancing requirements.
- Prior to the State of Emergency, WBCA worked with Volunteer Service Abroad to develop the first awareness posters on COVID-19 for Kokopo leaders, including ward members, church representatives and health centres. Together, WBCA worked with these leaders to discuss how the community could best support women affected by violence during and collecting gendered data on the effects of COVID-19.
- Nazareth Centre for Rehabilitation (NCfR) in Bougainville has created a community education program to raise awareness on COVID-19 preventative measures and addressing gender-based violence in a 'house to house' approach.
- NCfR staff are members of the police-led COVID-19 response team and are able to raise gender-based violence issues in crisis response plans.
- NCfR works with various departments in the Autonomous Bougainville Government to develop awareness materials for the community and school programs, advocate for women's needs and contribute to response plans.
- NCfR has supported women and children from their community to access safe houses, health clinics and food by providing transportation and accommodation.

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## 11. Additional information on the impacts of the COVID-19 crisis on domestic violence against women

### Food and Water Insecurity

It is important to note that in PNG access to food and water is an important aspect of women's safety and security. Women are often responsible for not only feeding their family, but also selling their produce to contribute to family income, bride prices or medical fees they owe. The inability to do either due to market closures, stolen food from personal gardens or high demands on women's time not only risks women's personal health but their safety and security as food insecurity is a trigger for domestic violence. Throughout the COVID-19 crisis we have observed the following:

- There has been increased reports of married couples fighting because there is no food in the house because markets are closed and their food gardens are being stolen from at night.

*A 56-year-old woman has been the victim of several thefts from her food garden throughout the State of Emergency. Young people who do not have their own gardens continue to steal from her and she has stated that this has put a significant psychological stress on her as she worries about providing food for her own family.*

- The lockdown has increased the amount of people gambling on riverbeds throughout the day, which is polluting the only clean water source for drinking and cooking in certain areas.

*In Jiwaka, a Vfc employee has noted that gamblers have contaminated the river water with their waste disposal upstream. Given this employee's village is at the end of the river many women are unable to fetch clean water for drinking or cooking. They have to wait until 6 or 7 pm to collect the water they need, thus delaying the time household responsibilities are completed and increasing the chance of tension in the household.*

*In East Pomio, households have run short of soap to wash clothes and cooking utensils, items to meet the basic needs for family health are difficult to purchase and once acquired difficult to use in crowded areas.*

- Loss of income from market closure is increasing the financial anxiety of women across PNG.

*In Jiwaka, a woman named K.D has lost money on a hectare of sweet potatoes she planted in October 2019. K.D had a full harvest of sweet potatoes during lockdown but was unable to sell any due to the closure of markets and is now making sweet potatoes for breakfast, lunch and dinner for her entire extended family. Despite their efforts, many potatoes have gone rotten and have had to be thrown away. K.D fears that the money lost on this harvest will leave her unable to pay those who helped her plant the field, putting her in potential danger.*

*In Kokopo, boats are only allowed to carry one person to sell copra or cocoa, making earning an income difficult for rural women who depend on their garden sales for their livelihood. There is increased frustration around this point because foreign developers are still able to come and go as they please to log forests without monitoring and collect palm oil without the consent of the people.*

- Stay at home orders have increased the burden of care on women to provide meals for their families, draining them physically and emotionally.

*N.T's story from Jiwaka highlights the high demands placed on women at this time that are difficult to meet: "When the schools were not closed and offices were open for business as usual, my husband and kids were not at home, leaving me free to do other tasks and activities. I had enough hours to do domestic and other daily chores within my home and community social activities apart from family obligations. When the government enacted the COVID-19 State of Emergency lockdown across the country, I discovered that all my spare time is taken up with the household chores of catering for my whole family the entire day. My chores have increased twofold. I am expected to prepare lunch, afternoon snacks and dinner. They are demanding and complaining every few hours for food to eat*

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*apart from the demands on my time to cater for their other needs. With cooking, there are dishes to be done and cleaning up after every meal. I find that I still need to find time to take care of the livestock and gardens and then collect food for the continuous meals. I wake up before the sunrise to ensure I complete many of the outdoor tasks before preparing breakfast. At the end of the day, I am exhausted only to repeat these same tasks the next day. I get angry, frustrated and sad that our society has placed a lot of pressure on women to be responsible for the welfare of their family.”*

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## CONCLUSION

The COVID-19 pandemic has created a global crisis unparalleled in recent history. It needs a universal response to match its size and complexity. Unfortunately, PNG's response has not specifically addressed women's issues and this is a problem for our country. The COVID-19 crisis has forced many women back to the basics in a context where accessing these basic needs was already difficult. In some areas, like East Pomio, women have been able to rely on the land to provide food for their families and avoid this trigger for violence. In others, like the Highlands, public transit restrictions have not only limited women's ability to access services but also their ability to shop for their households or retrieve water, and they are now forced to walk long distances for very basic essentials. School closures across the country have increased the burden of care women face during this time. This coupled with loss of livelihoods will only worsen women's experiences during this time.

If we are going to stop gender-based violence in PNG, we all have to do our part to slow the spread of COVID-19. This means including the needs, priorities and leadership of diverse women to address the barriers they face. The submitting organisations would like to commend former UN Special Rapporteur Ms Rashida Manjoo for her recommendations on this point following her visit to PNG in 2012, and would like to reiterate that those recommendations are still relevant to addressing women's needs in relation to COVID-19. In addition to the recommendations listed in Ms. Manjoo's report<sup>10</sup> we put forward the following to the current UN Special Rapporteur to advocate to the global community and PNG government:

## SUMMARY OF RECOMMENDATIONS

**Recommendation 1:** Ensure policy decisions, budgets and response plans are informed by gender analysis and sex, age, disability disaggregated data on the direct and indirect effects of COVID-19; This includes ensuring that containment and mitigation measures address the heightened risks of gender-based violence and take into account gendered roles, responsibilities and dynamics which serve to entrench inequalities.

**Recommendation 2:** Increase public communication efforts to raise awareness about domestic violence, sexual violence and sexual health during the outbreak, specifically targeting diverse women and marginalised groups who may not have access to mobile phones or other communications technology.

**Recommendation 3:** Establish a system that empowers communities to take ownership of the problems facing diverse women and work together to address gendered issues in PNG.

**Recommendation 4:** Promote women's full, equal and meaningful participation in leadership and decision making roles related to response and long term impact planning.

**Recommendation 5:** Make sure diverse women's healthcare needs are addressed within COVID-19 responses.

**Recommendation 6:** Increase funding for and ensure ongoing accessibility of family violence services and safe housing.

**Recommendation 7:** Ensure all essential workers related to the prevention of and response to violence against women have access to face masks and other PPE.

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<sup>10</sup> Report of the Special Rapporteur on violence against women, its causes and consequences, Rashida Manjoo (2012), *Mission to Papua New Guinea*, [https://www.ohchr.org/Documents/Issues/Women/A-HRC-23-49-Add-2\\_en.pdf](https://www.ohchr.org/Documents/Issues/Women/A-HRC-23-49-Add-2_en.pdf)

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**Recommendation 8:** Encourage collaboration across different actors related to the prevention of violence against women.

**Recommendation 9:** Ensure court systems are transparent and accountable to the people, this includes making court visits affordable and accessible to women at all levels.

**Recommendation 10:** Establish and identify clear roles that can be played by communities, NGOs and the government to address gender-based violence during and after COVID-19.

**We thank you for your urgent call for submissions during the COVID-19 pandemic and your dedication to ending violence against women globally. For more information about this submission, or to be connected with the women's rights organisations mentioned please contact [advocacy@iwda.org.au](mailto:advocacy@iwda.org.au).**

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