

Delivering Survivor-Centered Response to Gender-Based Violence Survivors in Papua New Guinea and Timor-Leste



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Goal:

All women and girls in Papua New Guinea (PNG) and Timor-Leste live life free from violence.

Objective:

Women and girls who experience violence use quality essential services for long-term recovery from violence in Papua New Guinea and Timor-Leste.

Background:

Gender-based violence (GBV) is an umbrella term for any harmful act

that is perpetrated against a person's will and that is based on socially ascribed differences between males and females. It includes acts that inflict physical, sexual and mental harm or suffering, threats of such acts, coercion, and other deprivation of liberty.

Despite growing awareness of GBV as a life-threatening violation of human rights, poor quality of services and lack of coordination among multiple response sectors have been a major impediment for effective response to GBV in Asia and the Pacific region.

Strengthening National Capacities of Health Sector in Papua New Guinea and Timor-Leste to Deliver Survivor-Centered Response to Gender-Based Violence Survivors will focus on two countries in the region with the highest level of lifetime prevalence of intimate partner violence—PNG (68%) and Timor-Leste (59%). This initiative will build on the strong global and regional evidence base on what works for effective response to GBV.

The project will serve approximately 418,067 beneficiaries in PNG and 100,350 beneficiaries in Timor-Leste.

GBV in Papua New Guinea and Timor-Leste

- The magnitude of GBV in PNG is considered to be of epidemic proportions. In a recent study, 68% of women reported having experienced some form of physical and/or sexual violence in their lifetime.
- A 2012 study of male perpetration of violence conducted in the
- Autonomous Region of Bougainville, PNG, found that **87.6% of men** admitted to physical, emotional and/or economic abuse against their intimate partner.
- GBV remains one of the most pervasive human rights concerns in Timor-Leste, with almost two out
- of every three women (15-49 years) reporting having experienced intimate partner violence in their lifetime.
- In Timor-Leste, tolerance for GBV is high with more than three of four women and men believing a man is justified in physically beating his wife.



Strategies

- Conduct assessment of health sector's capacity to respond to GBV cases in select sites.
- Develop an in-service training package for health service providers on health sector response to GBV based on World Health Organization (WHO) curriculum for health workers to respond to GBV.
- Conduct cascade training to build capacities of health staff, including related to confidentiality and delivering targeted services for distinct groups of women and girls.
- Establish, within prioritized health facilities in Timor-Leste, spaces to provide LIVES (Listen, Inquire, Validate, Enhance Safety and Support) and other components of essential health service package as required ensuring confidentiality and privacy.
- Provide technical assistance through development of teaching aid materials to integrate content about the identification of, response to and referral of GBV in preservice curriculum building on WHO guidelines and tools.
- Strengthen health care providers' participation in GBV referral pathways and case management system to ensure a strong multi-sectoral response to GBV in all project sites.
- Expand Family Support Centers for provision of comprehensive GBV response services in three provinces of PNG.
- Conduct research on the implementation of health sector guidelines to address GBV in PNG and Timor-Leste.
- Organize joint trainings of multi-sectoral GBV response teams in project sites on survivor centered case management and referral.
- Plan community awareness activities on the health impact of GBV and the availability of services, including health services.
- Develop informational brochures on GBV referral pathway with contact information of GBV response service providers per project site.
- Conduct action research on implementation of the survivorcentered health sector response and its impact.



Expected Outcomes



Health service providers at national and sub-national levels in selected sites in Papua New Guinea and Timor-Leste will have the knowledge and capacity to deliver quality essential health services to GBV survivors in line with global quidelines.



Relevant government authorities at national and sub-national levels in Papua New Guinea and Timor-Leste will have the capacity to establish a multi-sectoral GBV coordination mechanism.

All project sites have functional referral paths established in line with global guidelines.



At least 70% of project-trained health practitioners demonstrate an 80% increase in knowledge on survivor-centered principles for GBV response.