

HER HEALTH AND DIGNITY, OUR PRIORITY



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GOAL

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

FUNDING: US\$750,000 to UNFPA

WHO WILL BENEFIT



SPECIFIC OBJECTIVES

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

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. These acts can occur in public or in private.

Despite growing awareness of GBV and extensive work done by governments, women's organizations and other partners, many women and girls who are subjected to violence still lack access to essential services that support their safety, health and access to justice. Lack of a survivor-centered approach to GBV service provision is a key challenge in the delivery of GBV response services in the Asia-Pacific region, including in Papua New Guinea and Timor-Leste.

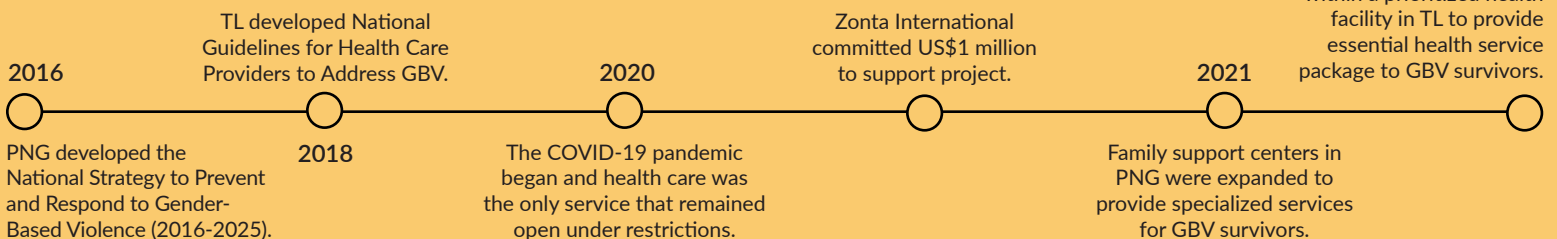
For many women, a visit to a health facility may be her first effort to seek help and the only chance to receive support and care, as

well as to escape a situation of abuse. It is crucial, therefore, that all health-care providers are equipped with adequate knowledge and skills to effectively identify and treat survivors of violence, including through clinical interventions, provision of emotional and psycho-social support and referral to other specific services that the survivor may wish to access.

Building on Phase I of the initiative, Phase II will expand the strengthening of skills, knowledge and capacities of GBV responders, including health care providers in additional geographic areas in Papua New Guinea (PNG) and Timor-Leste (TL). Phase II will both expand the geographic coverage of the interventions and institutionalize the interventions within government systems for sustainability.

There will be an estimated 578,000 beneficiaries in PNG and an estimated 74,000 in TL.

PROJECT HISTORY AND TIMELINE



FAST FACTS

- Gender-based violence has detrimental and long-lasting consequences to the well-being, health and safety of women and girls, along with economic consequences, effects on educational outcomes, and impact on the productivity and development of societies and countries.
- 56% of Papua New Guinean women (15 to 49) women have experienced physical violence with an intimate partner, while 28% experienced sexual violence in their lifetime.
- 63% of Papua New Guinean women who are or have been married have experienced physical, sexual or emotional violence from their spouse.
- Almost two out of every three Timorese women (15 to 49) have experienced intimate partner violence.
- In TL, more than three out of four women and men believe a man is justified in physically beating his wife.



STRATEGIES FOR SUCCESS

- Develop capacity of GBV response services providers on international guidelines on essential services packages for women and girls subjected to violence.
- Provide technical guidance for development of guidelines on multi-sectoral coordination and referral for timely and quality response to GBV survivors.
- Deliver technical guidance for the institutionalization of GBV case management.
- Generate evidence on locally adapted interventions that prove to be effective in strengthening GBV multi-sectoral response
- Support policy advocacy to assist governments in institutionalizing international standards on GBV service provision.

Gendered norms, structures and practices both underpin GBV and create substantive barriers to effective implementation of prevention and response interventions.



EXPECTED OUTCOMES



Health Ministries in PNG and TL adopt and institutionalize international standards and guidelines for survivor-centered GBV services through health sector.



National and sub-national governments develop and adopt GBV referral systems and GBV Standard Operating Guidelines.



Relevant government authorities and service providers have the knowledge, skills and resources to provide quality GBV case management.



All project sites have functional referral pathways 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.

