

*Families and Children Affected by HIV and AIDS and Other Vulnerable Children in Papua New Guinea and Other Vulnerable Children** identifies sixteen (16) recommendations for action to respond to the needs of Papua New Guinea's most vulnerable children. From these recommendations, work has already begun to strengthen the protective environment for vulnerable children. This work is listed below.

Policy level and government action

- A **National Coordinating Mechanism** for policies and actions impacting on orphans and other vulnerable children has been established by the Department for Community Development and the National AIDS Council.
- The National Coordinating Mechanism has developed a four year **National Strategy for the Protection, Care and Support of Orphans and Other Children Vulnerable to Violence, Abuse and Exploitation**.
- The Parliament has approved a stronger, rights based legislation for child protection. **The Lukautim Pikinini Act (2007)** prohibits the growth of institutional care and creates a mechanism for the **regulation, monitoring and certification of existing institutions**.
- **Adoption and fostering practices through the wantok system will be examined, monitored and improved** through the Department for Community Development's Child and Family Welfare Policy, which will be developed in 2008 and 2009.
- **Families and communities are being mobilised by Government and civil society** to develop their own responses and to strengthen the national and provincial programs for families and children affected by HIV and AIDS. Western Highlands Province is leading the country in mobilising Faith Based Organisations to protect vulnerable children. This program is being rolled out to 6 priority provinces in 2008.

Health care

- The National Department of Health is **continuing to expand and integrate Prevention of Parent-To-Child Transmission Interventions** to protect babies from exposure to HIV infection.

Research and resources

- The Department for Community Development is implementing a **national database and monitoring system** to ensure access to comprehensive data on orphans and other vulnerable children to guide effective, evidence-based strategies. The National Department of Health has planned for an integrated Bio-Behavioural Survey to be introduced during 2008 and 2009 to **provide data on infection rates among children and young people by different age groups**. In 2008, the Child Welfare Council will conduct research into social protection interventions to **improve access to basic services for vulnerable families and children through direct assistance**. A second study will specifically look at ways to protect the inheritance rights of children and women.
- The Government acknowledges the need to conduct studies on **health, education and agriculture sectors**, so that the impact of HIV on families and children is better understood and anticipated.

Rights of women and children

- The National Department of Planning's 2008 evaluation of the Family and Sexual Violence Action Committee, which is the national strategy to prevent gender-based violence, will not only **strengthen national capacity to prevent violence against women**, but will also develop specific strategies to **prevent violence against children, and in particular the girl-child**.
- The Government has procured **assistance from the United Nations Women's Fund (UNIFEM) to support programs aimed at reducing gender-based violence**, and will continue to work in partnership with UN agencies.
- On International Children's Day in 2007, the **Government, with support from Save the Children in PNG and UNICEF**, launched a national campaign on the Prevention of Violence Against Children.
- The Village Court Secretariat of the Department of Justice and Attorney General is training village court leaders and women community leaders to ensure that community courts provide increased protection to orphans and other children vulnerable to violence, abuse and exploitation.

Participation

- **Children and young people are provided increased opportunity to participate in the country's HIV response** through participatory theatre, community mapping and AIDS competency processes. Children are the country's future, and Government recognises that it is time they play an active role in the decisions that affect their lives.

The Government of Papua New Guinea and its agencies are taking action to address the alarming trend of escalating child protection issues. Much work remains.

This study was published in 2006. The principal researcher was Susan Hunter, Esther Lawu and Jennifer Mondia were the researchers. This summary is based on that study, with the addition of some newly available data. Importantly, this summary includes information on key activities that have taken place in response to the recommendations of the study.

*Wendy's name has been changed to protect her confidentiality. Wendy was one of over 100 children who generously told their stories to the researchers of this study.

ⁱⁱHunter, S. (2006) Families and Children Affected by HIV and AIDS and Other Vulnerable Children in Papua New Guinea. Port Moresby: UNICEF and Department for Community Development, p26-27.

ⁱⁱⁱNational Department of Health, National AIDS Council Secretariat. (2007). The 2007 Estimation Report on the HIV Epidemic in Papua New Guinea. Port Moresby: NACS.

^{iv}Cited in Cox, E. (2006) A Situational Analysis of Child Sexual Abuse and the Commercial Sexual Exploitation of Children in Papua New Guinea, Port Moresby: HELP Resources, Inc./UNICEF (draft).

^vWorld Health Organization and National AIDS Council. 2000. Consensus Report on STI, HIV and AIDS Epidemiology. Papua New Guinea. National Department of Health, National AIDS Council Secretariat, op. cit. The 2007 Estimation Report on the HIV Epidemic in Papua New Guinea. Port Moresby: NACS.

^{vi}Hammer, L. (2003). Cited in Hunter, S. op. cit.

^{vii}Hunter, S. op. cit.

^{viii}UNICEF. (2001). Speaking Out – Voices of Children and Adolescents in East Asia and Pacific. UNICEF/EAPRO.

^{ix}Hunter, S. op. cit.



Enabling a better future

This study summary is published by the Department for Community Development, with support from UNICEF, as part of its commitment to share the findings of key research on vulnerable children in Papua New Guinea. Other papers available in this series are: Child Sex Abuse and Commercial Sexual Exploitation of Children in Papua New Guinea and Development Programming and the Wellbeing of Girls in Papua New Guinea. Many thanks to UNICEF for providing technical and financial support for this initiative. Further copies are available from the Director of Lukautim Pikinini, PO Box 7345, Boroko, NCD, Papua New Guinea. Phone: 325 9893.

All photos are the property of G. Pirozzi / UNICEF PNG / 2004. To the best of our knowledge, the children and women identified in these photos are not living with or otherwise affected by HIV and AIDS.

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Families and Children Affected by HIV and AIDS and Other Vulnerable Children in Papua New Guinea

Introduction by Mr Joseph Klapat, Secretary of the Department for Community Development

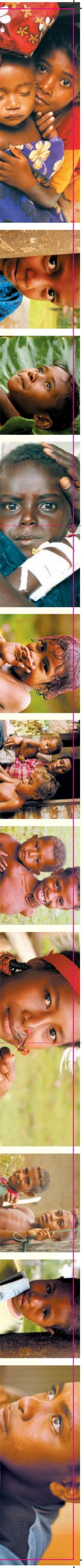
It is with great pleasure that I introduce this summary of *Family and Children Affected by HIV and AIDS and Other Vulnerable Children in Papua New Guinea: A National Situation Analysis*. This Study was commissioned by the Department for Community Development with the support of the National AIDS Council and UNICEF. The Study was launched in 2007 by Dame Carol Kidu, Minister for Community Development, at the first National Leadership Forum for Children, convened by the Child Welfare Council. In reading this document, please ask yourself how, in a land as great as ours, can we allow our children to remain so vulnerable to violence, abuse and exploitation? Take for example the story of Wendy. When she was 13 years old, Wendy Johnⁱⁱ lost both her parents to AIDS. Like most orphans in Papua New Guinea, she was sent to live with a relative—an uncle. Already upset by her parents' deaths, Wendy soon faced the trauma of her uncle sexually abusing her. "From that time on, I felt like I was nobody's child," she says. Wendy later began selling sex to pay for her school fees. "Even my uncle knows what I am doing but he never does anything to help me."ⁱⁱⁱ

The situation for children such as Wendy is critical. I ask you to remember that Papua New Guinea is a country blessed on many levels. Our people are intelligent, kind and compassionate. Our skills and commitment are enriching our country through trade and commerce. Most of us have adapted to modernisation in less than a generation. Ask your mother or father about their life as a child and their stories will be of a world far removed from the one we live in today. The rapid social change we are experiencing places many stresses on our traditional care and support mechanisms. Our land, seas and rivers are teeming with life. We are blessed indeed. Yet children like Wendy are forgotten, neglected, and denied the basic protection and care that our wantok system is there to provide. This is not right. We must fix the problem. When the wantok system fails, Government services must step in and protect children such as Wendy. In reading this report I ask you to make the same commitment that I make – to protect all children in Papua New Guinea from violence, abuse and exploitation.

Joseph Klapat
Secretary for Community Development

Key issues

- **Orphan crisis:** Increasingly high rates of HIV signal a looming orphan crisis that could continue well past 2020, with even more children living without parents.
- **Escalating HIV transmission:** Without adequate prevention, treatment and care, HIV transmission will continue because vulnerable children will remain at heightened risk of infection.
- **Development undermined:** While protecting vulnerable children requires a financial commitment, the price of not protecting them would be devastating. Broader development outcomes will be undermined if Papua New Guinea's children are not protected.
- **Gender inequality:** The low status of women and children places them at increased risk of HIV and AIDS.
- **Children affected by HIV and AIDS face many challenges:** Children affected by HIV and AIDS share several challenges – heightened risk of violence, abuse and exploitation, stigma, poverty, neglect, exclusion from education, malnutrition and isolation.



Many children are affected by HIV and AIDS

HIV is affecting children like Wendy in numerous and wide-reaching ways. Children and adolescents are infected with HIV through parent-to-child transmission, sexual abuse and sexual exploitation. An overwhelming majority of children and adolescents living with HIV and AIDS live in households with a relative who has HIV, and many other children and adolescents are themselves vulnerable to HIV infection.

Nearly 780,000 children in Papua New Guinea or 30 per cent of the country's 2.6 million children are potentially at risk of HIV. Without action their numbers will increase—to 982,000, or nearly 40 per cent of the country's children by 2010, according to some estimates¹¹.

Table 1: Estimates of children affected by HIV and AIDS¹⁶

Category	2005	2010
Children living with HIV and AIDS	10,946	22,000
Children orphaned because of HIV and AIDS	9,400	77,000
Children living in AIDS-affected families	138,108	270,000
Children at risk of infection	620,585	620,000
Total	779,039	982,000

International guidelines recommend that HIV-related responses be integrated into programs for all vulnerable children, not just those affected by HIV.

The epidemic in Papua New Guinea is on the rise

The first case of HIV was reported in 1987. In 2002, Papua New Guinea became the fourth country in the Asia-Pacific region to record a generalised HIV epidemic of more than 1 per cent of the adult population. In 2007, the national prevalence was estimated to be 1.6 per cent with an estimated 59,537 people living with HIV¹⁷.

Many factors combine to increase vulnerability to HIV infection

Conditions such as low levels of knowledge about HIV and AIDS, low levels of condom use, gender inequality, high levels of violence against children and women, and an informal sex trade increase the risk of an explosive HIV epidemic. These conditions arise from poverty, weak infrastructure, HIV-related stigma and discrimination, the low status of women and children, and subsequent violence against them. Because of these factors, HIV and sexually transmitted infections are not being diagnosed and treated. Stigma, discrimination and violence against HIV positive people and their families prevent them and others from seeking out services. As a result, less than 10 per cent of people with HIV in Papua New Guinea know they have the virus.

Gender inequality places women and girls at increased risk

Gender inequality is a big problem in Papua New Guinea, originating from traditions, poverty and recent distortions of customs such as bride price. Gender inequality means it is harder for women to join the workforce, turning many to sex work for survival. A recent small survey showed that two out of three women between the ages of 15 and 24 said that they accepted cash or gifts in exchange for sex¹⁸.

Women and girls do not always learn about HIV prevention methods because they do not have equal access to schools or clinics. Women have little control over sex, leading to low rates of condom use and thus high levels of sexually transmitted infections. Marriage and monogamy do not protect a woman from HIV if her partner has multiple partners. Widespread sexual violence including gang rape is common.

"Although both my parents are alive, I will not be able to visit them... When they knew I was HIV positive, they told me to leave home. These days, when my family members see me, they pretend that they have never seen me before."

-17-year-old HIV positive woman.

Women are the main protectors and providers for children, and when they suffer, their children also suffer. Like their mothers, children are often viewed as possessions and their rights - like their mothers' - are frequently violated.

Nearly half of reported rape victims are under the age of 15, while 13 per cent are under the age of seven, according to the World Health Organization¹⁹. Twice as many women between the ages of 15 and 24 are infected with HIV than men of the same age, according to an analysis of over 18,000 documented cases of HIV and AIDS²⁰. This may indicate that older men are seeking sex with younger girls.

With women dying or responsible for sick relatives, food security has become uncertain in some rural areas, where subsistence farming depends heavily on women and children. Campaigns to reduce stigma and discrimination have not reached these areas, leading to numerous reports of HIV positive people left underneath houses without food or water²¹.

None of this is good news for today's children and our future generations. HIV not only puts the lives of children, their parents and other caregivers in danger, it is also placing huge amounts of stress on communities and families, and therefore, society as a whole.

Successful HIV responses must operate on three fronts - prevention, treatment and care, and protection. Prevention cannot succeed without treatment and care of the people already infected with HIV and their families, and vice versa. Thus, providing protection, care and support to children such as Wendy is an important task in containing the epidemic. It is vital that we all listen to Wendy's plea - "Please try to help children like me to be better. So that we can become like other children in this beautiful country of ours, Papua New Guinea."

Children affected by HIV and AIDS face many challenges

Children affected by HIV and AIDS share several challenges - heightened risk of violence, abuse and exploitation, stigma, poverty, neglect, malnutrition and isolation. However, each group of HIV-affected children faces its own specific challenges.

Children have limited access to life saving treatment

Most HIV positive children and adolescents have not been tested, let alone begun life-saving antiretroviral treatment. Without treatment, young children with HIV can die quickly - up to 60 per cent will not live to see their second birthday.

Treatment is also rare for adults, so children living in AIDS-affected families deal with hardship long before their parents die. Older children, usually girls, are pulled out of school to care for sick parents or younger siblings—a move that cuts them off from opportunities for the rest of their lives. Many are forced to work, including sex work, to help feed the family. At schools and in their communities, they are shunned or bullied. Some are even driven out of school because of ignorance and prejudice.

Loss of family increases their risks

The situation worsens for these children when their parents die, as they are stripped of their parents' protection and sent to foster families or relatives. Some suffer from neglect, while far too many are abused and exploited. Many girls end up like Wendy—at risk of HIV infection themselves because of sexual abuse and sex work.

Scores of children and adolescents are exposed to HIV because of sexual abuse and exploitation, sex work, drug and alcohol use, and numerous other factors that emerge out of poverty, urbanisation and unemployment. HIV is threatening children's most basic right - their right to survival.

Many children are vulnerable to violence, abuse and exploitation

Many children in Papua New Guinea are vulnerable to violence, abuse and exploitation. These children include orphans from causes other than AIDS; adopted and fostered children; street children and those neglected and abandoned; children living in violent homes; sexually exploited children; children living with a disability; and poor children. Children in these situations have a heightened vulnerability to violence, abuse and exploitation, which also renders them more likely to be affected by HIV, a fact that only reinforces the need to ensure their protection.

"I see my own size children wearing good clothes and going to school. I get worried over this. I wish I was like them, go to school and have good clothes, but it's very difficult for me at this moment.... There are others like me. If you are the guys helping, please see us and help us."

-14-year-old street boy.

Table 2: Other vulnerable children in Papua New Guinea²²

Category	2005
Orphans from other causes than HIV and AIDS	210,600
Adopted and fostered children	110,000 to 570,900
Street children, homeless and abandoned children	10,000
Children living in violent homes	827,500 to 1,344,600
Children at risk of sexual exploitation	1,311,040
Poor children	798,624

Less than 1 per cent of children in Papua New Guinea live in institutions or on the streets. Most children live with families, either biological or adopted. When it comes to providing care for AIDS-affected and other vulnerable children, this fact is very encouraging. International guidelines stress the importance of keeping children in their families and communities. Even the best run institutions are unable to provide children with the love, attention and care they need. The worst ones harm children by setting the scene for neglect and abuse.

Not all families are safe havens for children

Poverty and the erosion of traditions that once protected women and children have damaged family relationships. Domestic violence has soared. In a region-wide survey, Papua New Guinea showed almost equally high rates of verbal and physical violence - 75 per cent of the country's children said people at home hit one another while 80 per cent said people screamed at each other. Boys might be beaten for minor infractions while girls are sexually assaulted, often by male relatives. And because domestic violence is seen as a private matter, few cases are reported or pursued by the authorities.

The wantok system is under stress

Poverty and urbanisation are placing enormous pressure on communities. This is especially evident in the breakdown of the wantok system that traditionally provided social cohesion and protected more vulnerable members of a community. Communities are struggling without access to basic services such as water, sanitation, education and health, let alone social welfare services.

With families and communities worn down by the daily struggle to survive, there is little energy left to help the increasing number of children affected by HIV and other vulnerable children. Churches, women's groups and local NGOs have stepped in, however most of these organisations lack the resources to expand nationwide. In addition, village courts—often powerful and respected institutions—are not fulfilling their obligation to protect women and children, but have the potential to do so.

The way forward

Providing protection to HIV-affected and other vulnerable children is one key element missing from the country's response to the AIDS crisis. The "Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World with HIV and AIDS"—a document endorsed by UNAIDS and UNICEF—states that the main objective of any program providing care and protection is to strengthen families and communities by keeping parents alive and providing economic, psychosocial and other support.

In Papua New Guinea, nearly all children live with families. No institution can replace families, who remain the best providers of protection and care to children. Many communities still believe in traditions that promote social cohesion and solidarity, and while modern pressures have worn down the wantok system, it still exists and can be strengthened.

"My foster mother beats me up whenever she gets angry... I have not talked about this with anyone because I am afraid. I also hesitate to talk to anyone because I am HIV positive... Everytime I feel ill, I do not know what type of sickness I have. I treat myself with medicine that my friends give me."

-12-year-old girl orphaned by AIDS.