

Welcome to the July edition of the FHI 360 Papua New Guinea (PNG) newsletter. This quarter we focus our attention on prevention, as this underpins the work that we do across all of our projects. Through our work within HIV&AIDS, our Strengthening HIV/AIDS Services for Key Populations project has been working hard to promote safe sexual practices through condom use, empowering people to know their status by getting tested and reinforcing risk reduction messages that prevention is better than cure.

We take an in-depth look at our innovative enhanced outreach approach within our HIV&AIDS work. This method selects peer educators from high-risk groups to reach out to the key populations in identified hot spots to promote preventative practices. Through our Komuniti Lukautim Ol Meri (KLOM) project we have engaged men in Aitape with a male discussion forum to help prevent gender based violence (GBV) and educated teachers in Vanimo and Mount Hagen on making schools a safe learning environment.

As we speed into the second part of the year, the team is looking forward to another busy quarter ahead with trainings, forums, supervisory visits, data quality assessments and more technical assistance from our Regional Office ●

Warm wishes,

Daniel Tesfaye
FHI 360 Country Director

Women Deliver viewing party in POM



As part of the 4th Women Deliver conference in Copenhagen from May 16-19, 2016, the FHI 360 PNG country office hosted a viewing party on the final day and discussed girl's power in play, examining equality in sports for women and girls in PNG.

The staff team facilitated the panel discussion and identified that sport is a great tool to use in development work, especially with adolescents. The panel comprised of elite sports women, to government officials, who have used sports as a tool to work with children. The talks were framed around sport being a fun, physical, rewarding way for children to get exercise and learn about

different development issues such as HIV and gender, but for them to also build their self-esteem and confidence.

Photographs were taken of the viewing party with the hashtag Port Moresby Deliver that was shared on social media platforms. Women Deliver, FHI 360 and Johnson & Johnson used these to share the best solutions caught on camera, online and in the email blasts, to the global Women Deliver community. This was a great opportunity for the team to share work being done by FHI 360 projects and programs by simply hosting a viewing party and getting involved in the discussions ●

Gender based violence in the classroom



Reports from the family support center in Vanimo, West Sepik province, show that children under 15-years-old are equally as vulnerable and exposed to experiencing sexual violence and physical assault. As part of the KLOM project, in April two Safe School training sessions were conducted in Mount Hagen, Western Highlands province and Vanimo, West Sepik province, to make school a safe learning environment for all students.

The training is part of the child protection aspect of KLOM and tackles the issue of school-related GBV that results in sexual, physical or psychological harm to girls and boys. It includes any form of violence or abuse that is based on gender stereotypes or that targets students on the basis of their sex. The training highlighted the right of children and the need to be protect them from harm. It also emphasized, encouraging children, particularly girls, to complete their education.

The 16 teachers from different schools in Western Highlands and 12 from West Sepik that attended the training learnt that

violence could take place in many parts of school life; in the classroom, on the school grounds, going to and from school or in school dormitories. It gave awareness that this violence may include rape, unwanted sexual touching, unwanted sexual comments, corporal punishment, bullying and verbal harassment. It was discussed that perpetrators could be teachers, students or community members and that both girls and boys can be victims, demystifying stereotypes or preconceptions that they might have. The training focused on how violence can affect the well being of students, putting them at greater risk of educational failure through absenteeism, dropping out and lack of motivation for academic achievement.

A major outcome from the training is that the teachers created personal pledges about what they would do differently with the knowledge that they have acquired. Following on from the training, the KLOM team will run refresher training in term three of the 2016 calendar where their pledges will be reviewed ●

Empowering men to stop violence against women and girls

On May 18, 2016, as part of the Komuniti Lukautim Ol Meri (KLOM) project, a men's discussion forum was held in Aitape, Sandaun province, to ensure men's active participation in reducing the tolerance of violence against women and girls.

Due to women's subordinate status in PNG society and with men playing a vital role in decision making within families, clans and villages, it is of upmost importance that they are equally and actively engaged in the discussion. The KLOM project identifies that men's engagement and by in is paramount to ensuring that there is a successful change in attitudes towards GBV in PNG. The discussion forum brought together 37 male participants from civil society organizations, the local level government, education, and the police, courts, community development and partners in the Diocese of Aitape Social Services.

The aim of the discussion forum was to educate and empower men to take action to stop GBV. The forum allowed participants to explore gender norms that contribute to violence against women. The discussions reflected on causes of GBV, concepts of masculinity and femininity and their role in GBV. As a result of the forum, a men's group has been formed in Aitape with funding from the District Administration to do work on violence against women | Adolf Tamalako ●



Training peer educators to be money minded



On May, 22 Peer Educators gained essential financial management skills through a one day life-skills training session. Among the 22 were 15 females and 7 males who are part of the outreach program implemented by VSO (Voluntary Services Overseas) which is an implementing partner under the FHI 360 Key Populations project funded by USAID. The training was hosted at Paddy's Hotel in Port Moresby. FHI 360, as part of its effort to building capacity of peer educators, conducted training on managing personal finances called money minded.

For this first round of training, peer educators were trained on being money minded, which is an ANZ bank adult financial literacy

program. The money minded program has five modules; planning for the future, making money last, needs and wants, budget and assertiveness, which included the culturally challenging subject of learning how to say 'no'. The training provided participants with knowledge on how to set goals that are specific, measurable, achievable, realistic and timed.

During the training they devised their own personal budgets as well as vision boards for things that they aspire to earn over time. The training empowered the peer educators to spend within their budget, to differentiate between needs and wants and to learn to say no. It reinforced with the peer educators

what their essential outgoings were and what were things that are less important. The target of the training was to enable them to make their salary last until the next payday and allow for them to save enough money to afford one of the goals on their vision boards.

All participants were excited about the training. Most mentioned that although they knew what a budget is, they did not really stick to a specific budget themselves. Some commented that this was the first time that they had ever sat in this kind of training and they were grateful for the information that was shared during the day

Elizabeth Tama ●

Positive partnership | The Salvation Army

FHI 360 and The Salvation Army (TSA) have worked in partnership since October 2012. Together, FHI 360 and TSA run two clinics through the USAID funded Key Population Project, Koki clinic and Ela Beach clinic. Prior to the partnership, Koki clinic was a staff clinic serving the employees of TSA. Since the partnership the clinic is now open to the general public.

The two clinics have a total of 17 employees with Koki clinic offering HIV counseling and testing, STI screening and treatment, HIV care and treatment, post GBV care and general outpatients clinic. Ela Beach Clinic

provides HCT, STI diagnosis and treatment, as well as a GBV safe house called 'House of Hope' that attends to GBV survivors. Since October 2012 the clinics have tested a total of 3,817 people; 1,489 patients for HIV, with 271 found to be HIV positive, as well as identifying 1,053 patients with STIs.

TSA is an ideal partner for FHI 360; both organizations have a similar focus on reducing the prevalence of HIV&AIDS among key populations and strengthening clinical services to provide effective service delivery to their target groups. FHI 360 has been able to provide continuous technical assistance to

the clinics, as well as capacity building and ongoing training for the staff. This support and expertise has had a great impact and has helped to support and strengthen ties to the National Department of Health and other government and church run health services.

The collaboration has proven to increase productivity and has provided life-changing care to patients. Both sites have improved service delivery, where clients are reached by peer educators through community interventions, community sensitization and mobile VCT (taking HIV testing into the communities) | Matilina Genduo ●

Condom promotion used as key prevention tool in response to HIV

Since October 2012, more than 1 million condoms and more than 500 000 lubricants have been distributed as part of the Strengthening HIV/AIDS Services for Key Populations project, with strong emphasis on correct and consistent condom use. Condom and lubricant promotion is a key tool under the prevention component of the Continuum of Prevention to Care and Treatment (COPCT) model. The COPCT model has been implemented by FHI 360 to reach key populations with prevention packages and enroll them in care and treatment if they are HIV positive. This model was adapted by the National Department of Health and has been integrated into the PNG health system.

Condom and lubricant promotion includes step-by-step demonstration of condom and lubricant use. In addition, condom promotion includes development of communication materials that emphasize the benefits of consistent and correct condom and lubricant use with every partner. The importance of using water-based lubricant compared to using oil-based lubricant especially, during risky sexual behaviors is also stressed. These messages are targeted to reach men with diverse sexuality and transgender people and women in transactional sex. High-risk men and women are also reached with these important messages.

As part of the prevention interventions, organizations involved in HIV response distributed strawberry scented male condoms, FC2 female condoms and water-based lubricants to key populations and other who request condoms and lubricants. The key message was to encourage and motivate sexually active individuals to protect what they love (themselves and partners) from HIV and STIs as well as unwanted pregnancy by always using condoms during every sexual encounter | Bolalava Vaia ●

Risk reduction cards used to promote safe sexual practices for key populations



To improve risk reduction and healthcare seeking behaviors in key populations, FHI 360 has developed a range of risk message cards under Strengthening HIV/AIDS Services for Key Populations project.

The risk message cards target men with diverse sexuality and transgender individuals, including women in transactional sex. There are four cards that come in different colors and emphasize four

different themes. The cards come in both English and Tok Pisin, with both male and female versions. Card one promotes safe sex practices if condom is not used, card two encourages alcohol reduction tips, card three encourages regular health checkups and card four focuses on male and female condom efficacy. This last card instills confidence in negotiating condom use and the benefits of using both condoms and water-based lubricant.

The messages on the cards are targeted and are only distributed through peer educators during one-to-one interactions with the target audience. The peer educators, members of Civil Society Organizations and other partners have been using the cards carefully during outreach in the National Capital District and Madang | Bolalava Vaia ●

Encouraging people to know their HIV status



Promoting HIV counselling and testing is a major component of the Strengthening HIV/AIDS Services for Key Populations project. Since commencement of the project in October 2012, a total of 13,278 individuals were tested for HIV. Among those tested 7,861 were female.

Trained counsellors and nurses provide the initial, onsite Determine tests and have gone a step further to perform confirmatory tests. In order to ensure the services are user-friendly and that beneficiaries feel comfortable to access our services, a male and female counsellor are placed in all static sites. Beneficiaries accessing the service from a variety of referral pathways including referral from peer educators, to walk-In clients, and cross referrals from other services such as tuberculosis, gender based violence, sexually transmitted infections, outpatient and antenatal clinics.

In October 2015, mobile voluntary counselling and testing (MVCT) was introduced. This model brings HIV testing services into targeted sites in the community, making the services appealing and accessible for the key population and getting tested. The mobile MVCT service links to the existing clinics so patients who test reactive in the Determine test are linked directly to VCT centers for confirmation. HIV positive clients are linked to existing key-population-friendly HIV care and treatment sites.

MCT is implemented on a monthly basis and is a collaborative effort between FHI 360 and its partners; The Salvation Army, Living Light Health Service and VSO. Prior to conducting MVCT in hot spot areas, peer educators will mobilize their peers in advance and will collectively identify a suitable time and venue for the testing to be conducted. Nurses, counsellors and selected peer educators participate on that day

providing counselling and testing, basic general check-ups (blood pressure, weight, random blood sugar testing) and deliver messages on HIV risk, promote condom use, STI and HCT check up, with support from FHI 360 program team | Francil Kaemala ●

Visitors

FHI 360 had mid-term evaluation for its Strengthening HIV/AIDS Services for Key Populations) in Papua New Guinea program, funded by USAID. The evaluation was completed between May 16-June 10, 2016. The evaluation was conducted by a team of international and local consultants, comprised of David Lowe (team leader), Jay Gilvyids, Maryanne Kehalie, Alertine Kabaru, Mark Gilbert and Ware Aulakua ●

Enhanced outreach approach targets key populations through 'pass it on' peer referrals

The USAID funded, Strengthening HIV/AIDS Services for Key Populations project, works through peer educator outreach to specifically target hard to reach, key populations. The key populations that are the core focus of this work are men and women in transactional sex, men with diverse sexuality, transgender individuals, including high-risk men and women who are engaged in multiple sexual concurrent partnerships. Peer educators are selected from members of the high-risk groups to reach out to the key populations in the identified hot spots to help them reduce their risks and refer them for STI check ups and HIV counseling and testing. Through this outreach, the peer uses the innovative 'pass it on' approach of reaching out to further members in the key population by a targeted referral technique.

To ensure an HIV-free PNG, reaching out to as many high-risk individuals is essential. The peer educators have clear guidelines and tools to ensure that the identified client has a

referral slip to pass on to a friend or partner. When the peer makes the initial referral they tell the client where the service is located, give the opening hours and their referral slip but it is the second referral slip which allows for the project to have greater reach, creating a snowball effect. In every outreach session the peer educator will ask the client have a regular sexual partner and if the client can introduce their regular partner to the peer educator, or if they will pass on referral strips to three of their friends and partners in the high-risk groups. This approach means that the project not only reaches the individual but also into the individual's social network. By passing the strips to further members of the key population, clients will earn mobile phone credits for each successful referral, as long as their contact number is on the referral slip. The client will also receive incentives if they pass on referral slips themselves. So anyone who visits a clinic with a 'pass it on' referral slip will be given a further 'pass it on' slip to give to his or her

partners or friends. Not only will they receive a reward for successful referral, so will their client, so everyone wins and the project reaches out to the key populations.

Every time that the peer educator supports a peer or partner to receive an HIV test and know their status, identifies a new HIV-positive case, refers an HIV-positive client to register at an HIV clinic, helps a peer or partner to receive an STI examination or assists a survivor of GBV to access counselling and care, they will receive an incentive. The project develops opportunities for capacity development of the peer educators through trainings at monthly meetings, educational sessions at support groups, and explores other opportunities for life skills training. By the peer educators directly targeting the key high risk populations, giving the right information, sign posting the right services and helping them stay in care if they are positive, they are making a huge contribution to making an HIV-free PNG 🍌





Ms Bolalava Vaia | Strategic Behavioral Communication Officer

“First and foremost, working with FHI 360 for the past five years has been an empowering experience for me both personally and professionally. I have gained a variety of skills and obtained vast knowledge in my specific field, as well as understanding what the organization has done and is still doing globally and nationally in contributing towards the HIV and GBV response.

My job as Strategic Behavioral Communication Officer has taught me that in life, there will always be challenges and when we have challenges, we have to stand our ground with our heads held high and face them one day at a time. This has

moulded me into a more confident, strong and very outspoken young woman. Working for FHI 360 has given me the opportunity to be part of a family of brothers and sisters with a common goal, working in arms during good and bad times, supporting each other to make it through each working day.

Personally, as a survivor of GBV, words cannot express how grateful I am to have been empowered not only in knowing my rights but in speaking up for my rights as well. This has inspired me to share my story with other survivors out there that they too need to break the silence. In the beginning when my family knew

about the work that I was engaged in, especially working with key populations and people living with HIV, it took them a while to absorb. This is when I began sensitizing them about everything that corresponded with the misconceptions of key populations, HIV, STIs, GBV and even condoms. As weeks turned into months, and months to years, I found myself speaking openly with my family about my work. When people would ask my daughter what work I did, she would automatically respond with one word, saying HIV. This made me realize that even my children understood very well the work that I do, which makes me proud.”



Contact details

FHI 360 Papua New Guinea Country office
PO Box 447 Waigani
Unit 3, Allotment 33, Section 38 Steamships Compound
Phone: 323 0966
Mobile: 72014401
www.fhi360.org



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