

Papua New Guinea | April 2016 | Partnerships edition

Editorial

Gender

Welcome to the April edition of the FHI 360 Papua New Guinea (PNG) newsletter. This quarterly edition focuses on the positive results that have been achieved through partnerships, to improve access to quality healthcare services in hospitals like Gaubin on Karkar island and setting up innovative services like the free family sexual violence (FSV) hotline with ChildFund.

The team has also been out in force in communities delivering safe motherhood training in Vanimo, making sure that police officials have appropriate psychosocial support skills to help survivors of gender based violence (GBV) in Western Highlands province and providing essential sensitisation training for healthcare workers on key populations in Port Moresby.

The emphasis on partnerships and training shows FHI 360s continued focus to build the capacity of local implementing organisations, to deliver a comprehensive response to HIV and AIDS and GBV.

We are looking forward to another busy quarter, working successfully with our dedicated partners and excellent implementing organisations

Warm wishes,

Daniel Tesfaye FHI 360 Country Director

Vanimo communities learn the importance of safe motherhood



Four community action groups that are part of the Komuniti Lukautim OI Meri (KLOM) project in Vanimo and West Sepik province, took part in a four-day community based training workshop on safe motherhood from 18-21 January.

The engaging training was delivered to 210 participants, 112 females and 98 males, under trees, in classrooms and wherever community members felt comfortable to learn. The subject was pitched to both

females and males to engage the male community members on this subject. This was a particpatory session in which opportunity was given for discussions, comments and case study reviews which focused on the importance of safe motherhood, identification of women who may be at high risk, signs of high risk during pregnancy and relevant information on safe motherhood that men need to know. The workshop also touched on gender norms that have negative impact on safe motherhood.



The participants made remarkable comments using the case study samples from their own experiences of GBV effecting pregnant woman in the community. An 86-year-old male community member shared his story: "I am very old but I have a long pending GBV case in which my pregnant daughter died in a locked room, behind closed doors, without me knowing for three days. The husband and his family who did this have never been charged and it is really frustrating that no justice has been done, even when the matter was brought before the court through village mediation. I encourage FHI 360 to continue this training for men on safe motherhood so that they know and understand their women when they are pregnant and can identify if their daughter or wife is a high risk mother."

For the men, this training was the first of its kind. Previously none of the men had been introduced to the concept of safe motherhood. It left the participants longing to continue learning about this subject

FHI 360 under the spotlight at annual PNG Women's Forum in Port Moresby

FHI 360 took centre stage with a booth at PNG Women's Forum, from 1-3 March 2016, at the Crown Plaza Hotel in Port Moresby. The FHI 360 booth was featured in the Post Courier and The National newspaper, as well as being captured on national television as part of the news coverage on the Women's Forum. In addition, the booth was also photographed and is due to be included in the March edition of PNG women's magazine, Lily. The booth not only captured media attention but the eyes and interest of many participants who attended the event.

There was a spectacular booth display and distribution of communication materials such as posters, factsheets, flyers, booklets and merchandise including condoms and lubricants. During the breaks the booth was overcrowded with visitors who had come from all around PNG. Visitors included representatives from government and non-government organisations, community based and private organisations, schools, the

media, businessmen and women, politicians and healthcare providers.

To top it all off, people attending witnessed the signing of an agreement between the Japanese Embassy and Living Light Health Services (key implementing partner under FHI 360s USAID MARPS project) for the establishment of a women's resource centre located at Kaugere in the National Capital District (NCD). The Kaugere Women's Resources Centre will provide an avenue for women to have access to life skills and other basic skills trainings to help empower them in their own communities. This will also benefit the women who access the Kaugere safe house to move forward in life by learning new skills and gaining knowledge.

In addition, FHI 360 participated in a panel discussion on practical resources that considered the key question of where a person could refer someone if he or she was a survivor of GBV Bolalava Vaia



Police officials get valuable training to tackle GBV in Western Highlands

On 26 January, FHI 360 conducted a quarterly gender learning forum, themed around the police curbing GBV in Western Highlands province (WHP). WHP has been making news headlines with lots of women dying and narrowly avoiding being burnt alive after being accused of sorcery. This training was to ensure police officials prioritise the safety of women and children in their communities.

The forum gave an opportunity for Well Women Clinic (WWC) and the Family Sexual Violence Unit (FSVU) to present data on the incidences of GBV in the province. The data was eye opening to the police in attendance and showed that GBV is still a big issue. It was a timely reminder that there is still a big challenge for them to tackle and that they need to work harder supporting the FSVU.

Mr Joseph Neng, WHP provincial administrator, was very surprised and frightened with the alarming figures that were presented by the WWC and FSVU. He commented about the good job that NGOs like FHI 360 are doing to take the initiative to train police to be sensitised in handling GBV cases. He said that the training is important for the police to undertake to better support survivors.

The 75 participants who have been trained on psychosocial support between 2013-2015 are now ready to combat GBV in WHP. At the end of the forum all of the police officials were presented with certificates.

The overall feeling from the forum is that there is still a lot to do but that this training is a step in the right direction



Strengthening referral pathways for GBV survivors in Aitape

FHI 360 has developed a well-coordinated network of GVB service providers that link and consolidate prevention, care and support, and treatment services to ensure survivors of GBV have access to quality services when they need them. The referral pathway has been at the core of this unified service delivery mechanism.

On 25 January 2016, FHI 360 coordinated a referral pathway meeting and facility readiness assessment with its partner organisations providing GBV support in Aitape to discuss results and progress from the previous meeting. The 14 participants discussed resolving coordination problems and improving referrals between GBV service providers, strategies to establish a strong and simple referral system that can be easily coordinated and the individual organisations ability to coordinate referrals.

Strengths identified at Raihu District hospital include that there is evidence of good dialogue reporting and monitoring GBV cases, that there is existence of a network that comprises of very vibrant partners, and that there is also evidence of a referral pathway that is being used by some partners. It was identified that the hospital needs to work on referrals being fairly facilitated, service providers having better skills and

knowledge of GBV, better communication, understanding and coordination between service providers.

The provision of GBV services in Aitape-Lumi district is beginning to take shape, however, proper identification of GBV cases, reaching out to provide awareness, as well as medical care and treatment and other social support services have been great challenges to service delivery. With set strategies the current status of service delivery will change dramatically. Technical support from FHI 360, through continued training for staff and negotiation with the administrators of partner GBV service providing organisations to assist with resource mobilisation will have a significant impact.

Key recommendations from the meeting include a need to improve the reporting and monitoring of GBV cases, integrate awareness programmes into the hospitals maternal child health outreach programmes to ensure a well-informed general population in regards to the provision of GBV services, improve communication and understanding between service providers, strengthen collaboration and referral linkages between all partners and improve supply chain management of GBV drugs at the hospital



World health day 2016: beat diabetes

The number of people living with diabetes has nearly quadrupled since 1980 to 422 million adults, with most living in developing countries. The global prevalence (agestandardised) of diabetes has nearly doubled, rising from 4.7% to 8.5% in the adult population. This reflects an increase in associated risk factors such as being overweight or obese. The World Health Organization (WHO) is marked World Health Day on 7 April by calling for action on diabetes. In its first 'Global report on diabetes', WHO highlights the need to step up prevention and treatment of the disease.

Diabetes is a serious, chronic disease that occurs either when the pancreas does not produce enough insulin (a hormone that regulates blood sugar, or glucose), or when the body cannot effectively use the insulin it produces. Diabetes is an important public health problem, one of four priority noncommunicable diseases targeted for action by world leaders. Both the number of

cases and the prevalence of diabetes have been steadily increasing over the past few decades.

Diabetes caused 1.5 million deaths in 2012. Diabetes can lead to complications in many parts of the body and increase the risk of dying prematurely. Higher-than-optimal blood glucose caused an additional 2.2 million deaths, by increasing the risks of cardiovascular and other diseases. Forty-three percent of these 3.7 million deaths occur before the age of 70 years.

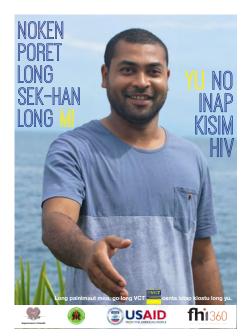
With 1 adult in 11 with diabetes the campaign is to increase awareness about the rise in diabetes and its staggering burden and consequences, in particular in low and middle income countries. It also aims to trigger a set of specific, effective and affordable actions to tackle diabetes. These will include steps to prevent diabetes and diagnose, treat and care for people with diabetes.

Key actions for everyone to include are eating healthily, being physically active, avoiding excessive weight gain, checking blood glucose levels and following medical advice. To support the campaign WHO has designed posters on diabetes for use around the world during the year's campaign. The poster visuals promote ways to 'stay super' and 'beat diabetes' with superheroes in everyday situations.

There are no simple solutions for addressing diabetes but coordinated intervention can make a significant difference. Everyone can play a role in reducing the impact of all forms of diabetes. Governments, health-care providers, people with diabetes, civil society, food producers and manufacturers and suppliers of medicines and technology are all stakeholders. Collectively, they can make a significant contribution to halt the rise in diabetes and improve the lives of those living with the disease



Positive promotion to stop PLHIV stigma and discrimination



In PNG people living with HIV (PLHIV) are faced with stigma and discrimination, which makes their illness worse. As part of the increasing demand and supply of comprehensive HIV and AIDS services for key populations, their sexual partners and

families, as well as the need for awareness to demystify some of the misconceptions about living with HIV, FHI 360 has developed a poster. The hope is that this A2 poster will contribute to improving the quality of HIV and AIDS services by informing communities to change the way that they treat people with the virus which in the long term improves information dissemination, leading to behaviour change, as well as supporting PLHIV case management teams (adherence counsellors who provide adherence counselling to PLHIV and also track and follow up with PLHIVs who have failed to adhere to treatment).

The key message on the poster is that if someone shakes hands with another person who is HIV positive, they will not be infected with the HIV virus. Shaking hands in PNG is a common way of greeting someone and there is still the misconception that by touching someone with the virus that you may get

infected. Therefore, it is hoped that the message will help people understand that this is not the case and if someone can shake-hands with a PLHIV, then this form of social stigma will be reduced.

The poster intends to reach out to immediate family members of PLHIV, friends and community members, as well as staff of health care centres who provide services for PLHIV. The poster has been created with both female and male models and in English and Tok Pisin to ensure that they are accessible. Posters can be found at Koki clinic, Kaugere clinic, Kilakila clinic, Ela VCT centre and Id Inad clinic | Bolalava Vaia



FHI 360 helps bring essential HIV services to Gaubin hospital

Karkar island is part of Sumkar district in Madang province. The island has an estimated population of 80,000 people with one, main hospital. Gaubin hospital, managed by the Lutheran Church, provides indispensable services for the people residing on the island and the surrounding locations. The hospital initially had 180 beds with medical, surgical, gynecology and obstetrics, TB, inpatient and outpatient wards. The hospital also provides much needed ART services for people who are living with HIV. Over time however, the rural hospital's services have deteriorated and all that remains functional are the inpatient and outpatient wards.

Gaubin hospital has 47 PLHIV registered in care, 12 are active on ART and 7 are TB/HIV co-infection cases. Since the end of 2014, the

hospital is facing challenges in its provision of ART services due to the absence of a trained ART prescriber and is running out of essential drugs. The hospital and the district raised the challenge to the provincial health office, as well as Igat Hope and UNAIDS voicing their concern.

FHI 360 in collaboration with the Provincial Health Officer and Id Inad clinic in Madang responded to provide support. Dr Susan Kima, medical officer at Id Inad Clinic, visited Gaubin hospital three times with support from USAID funding. The technical assistance from Dr Kima enabled the hospital to obtain ART/opportunistic infection (OI) drug supplies and set up a temporary system to maintain ART/OI to clients. The National Department of Health visited Madang to find a lasting solution for the problem in the

hospital, twice with support from FHI 360. The multipronged interventions at the hospital are really starting to bear fruit. Dr Kima did consultations for an HIV positive couple, the wife was diagnosed with bacterial meningitis and the husband was asymptomatic. Dr Kima provided technical support to another doctor to start the couple on ART. On her next visit she witnessed the tremendous progress in the female patient. The patient had previously been bed ridden with paralysis of her left side. Since begginning treatment she is now able to sit up, move around in a wheelchair and can control her bladder and bowl function. A new system of ART drug stocking through Id Inad clinic has also been introduced. This support has allowed for these essential services to continue to be delivered to PLHIV on Karkar | Daniel Tesfaye

Community education

Site improvement exercise helps improve clinic quality

FHI 360 has been supporting HIV clinics in Port Moresby and Madang by carrying out Site Improvement Monitoring System (SIMS) checks. These checks provide a quality assessment tool that assess all clinical and outreach interventions implemented by partner organisations. The SIMS facility tool comprises of an 86-page book with 24 different areas of assessment which are checked by the assessing team at site visits. The purpose of SIMS checks are to assist the clinics in identifying gaps within the different health care services provided in the areas of HIV testing, sexual health checkups and HIV care, as well as developing strategies to fill the gaps.

The SIMS exercise has been done for clinics in NCD — Kilakila (under Four Square) and Ela beach (under Salvation Army) — as well as Id lnad in Madang. SIMS checks have improved the system of giving clients a code that they use to access all services within the clinic, which in turn makes tracking the patient easier, there are now drug inventory systems in place and it has standardised clinical tools used at all clinics.

In February, the exercise was completed for Id Inad clinic by Joan Atkinson who is the USAID health advisor with the assistance of the FHI 360 senior program officer and staff from Id Inad clinic. The SIMS exercise helped the clinic improve the quality of service to patients, documentation and record keeping of patient information, following of standard operation procedure and waste management practices at the clinic. Through the SIMS check the quality of health services has improved in all of the clinics | Vanessa Kapus

Essential sensitivity training to make health services friendlier for key populations

In February 2015, FHI 360, in collaboration with Civil Society Organisation, carried out a key population friendly assessment using mystery clients to assess the response of health care workers. This assessment revealed a significant issue with unfriendly attitudes towards key populations.

To address this issue FHI 360 conducted twoday sensitisation training on key populations for health care workers, as well as non-clinicians who work within the clinics, including receptionists, hygienists and case managers. The training in Port Moresby focussed on understanding the different types of key populations, their sexual behaviour, the barriers that key populations encounter in terms of clinical services and clinical care. This training enhanced the capacity of the 15 healthcare workers that attended and ensured that they create a friendly and conducive environment for key populations to access the much-needed STI, VCT and ART services. The training helped to reorient them on the importance of equity in healthcare, particularly the challenge of reducing stigma and discrimination towards key populations.

There were still some barriers and challenges encountered during the training in relation to men who have sex with men and transgender people. Participants still felt that it is a choice that an individual is transgender. Following on from the training FHI 360 will be conducting follow up visits to ensure that clinician's attitudes have changed towards key populations. Preparations will also begin to start planning the second phase of the training

Take preventative action to stop mosquito borne diseases

In March 2016, the Secretary of the National Department of Health announced the presence of a dengue outbreak in Kiunga, Western province as well as in Port Moresby, NCD. Testing for Zika has been undertaken and results have found that the virus has been present in multiple cases dated back to May 2015. This is certainly no indication that there is an outbreak of Zika in PNG. The increase in cases of both mosquito borne diseases is due to an increase in mosquitoes brought on by recent rains.

There is no specific treatment and no vaccine for either virus, the best strategy is prevention. The best defense against mosquito borne diseases is to apply a reliable brand of mosquito repellent, wear light coloured clothes which cover exposed parts of the body for protection, use window and door screens that are free from holes where possible, and sleep under mosquito nets, particularly if sleeping during daylight hours. The World Health Organisation also advises that women who are pregnant or who are planning to become pregnant should take extra care to protect themselves from mosquito bites.

Mosquitoes carrying both diseases prefer to breed in artificial containers around the home so it is encouraged to make an effort to clean around your premises at least once a week, emptying discarded or covered containers that can hold water; these include buckets, flower pots, old tyres, discarded cans, coconut shells and regularly change your pets water dishes. This preventative action reduces the places that mosquitos can breed and significantly reduces their numbers

Getting to know the team



First FSV helpline service in PNG



FHI 360 and ChildFund have partnered with the Family Sexual Violence Action Committee (FSVAC) to launch the first, toll free,

confidential phone counseling service in PNG. FSVAC run the service, ChildFund PNG is the lead implementer and the project is funded through the support of New Zealand Aid Programme, ChildFund Australia and USAID.

On 19 August 2015, the helpline service was launched which provides quick and comprehensive access to information, basic counselling and help with referrals related to incidents of GBV and child protection. Anyone in PNG facing FSV can call the free hotline on 7150 8000 and talk to trained counsellors who will provide the support they need to calm the situation.

A total of 403 individuals (177 female and 226 male callers) accessed the service during the reporting period, 1 October—31 December 2015. Through the service 372 of the callers were referred to other related services

Visitors

Maryce Ramsey is the senior gender technical adviser at FHI 360 based at the Asia Pacific Regional office in Bangkok, Thailand. On 24 January—13 February 2016, she conducted a gender assessment for the President's Emergency Plan for AIDS Relief PNG programme

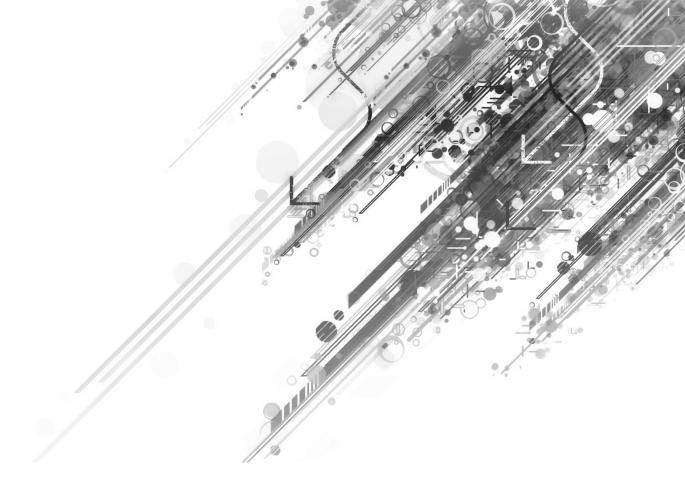


Tony Angu | Driver and Admin Assistant

Working with FHI 360 for the past six years has increased my knowledge, particularly within the area of HIV and AIDS. I now have detailed knowledge about the virus, routes of transmission and treatment. Through understanding our key populations I have become sensitised to the issue, my opinions have changed and I am far more understanding towards our target groups.

I am an introverted person and FHI 360 has given me the confidence to open up

and speak out. From starting out as a driver I am now getting to know basic administration tasks, I am really grateful to the organisation for letting me learn and grow. Just being present and witnessing activities happening on the ground has enabled me to absorb so much information. Working with FHI 360 has changed my life and mindset dramatically compared to the first day I began work with the organisation. I have gained so much knowledge. Matilina Gendua



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