



# Thematic Briefing

## Intimate Partner Violence

December 2020

The 1-Tok Kaunselin Helpim Lain (Helpline) (715-08000) is a free, confidential phone counselling service providing information and support for anyone in Papua New Guinea experiencing family violence or sexual violence issues. Since 2017, the 1-Tok has received over 50,000 calls from all 22 Provinces in Papua New Guinea (PNG).

### In Brief

- Globally, Intimate Partner Violence (IPV) is considered the most common type of Gender-Based Violence and is defined as any form of violence, perpetrated by a current or former partner. The PNG Gender-Based Violence Strategy 2016-2025 defines IPV as behavior within an intimate relationship that causes physical, sexual or psychological harm.<sup>1</sup> According to most recent DHS in PNG (2016-18) 63% of ever-married women have experienced spousal physical, sexual, or emotional violence.<sup>2</sup>
- IPV is the most common form of GBV reported to the 1-Tok. Approximately 1 in 3 calls report IPV. Cases have not reduced over time, reflecting a lack of significant progress in tackling the root causes.
- 45% of all IPV cases reported to the 1-Tok occur in the National Capital District, followed by Morobe (12%) and Central (5%) and Highland provinces, respectively. 70% of callers reporting IPV are women, whilst most men (30%) who call to report IPV have been a witness (reporting on behalf of someone else) or perpetrator to IPV. Approximately 90% of survivors of IPV that call the helpline are women.
- More than 50% of survivors of IPV have children that are indirectly affected, however in PNG there are a lack of child focused services and general awareness on the harm that IPV can have on children. More awareness on the impacts of IPV on children clearly needs to be rolled out.
- The most common referrals are to the police, counselling or welfare services, courts (at all levels) and community leaders. 1-Tok refers a majority of IPV cases to Police, as often they are the only GBV response agency available, and provide support including transport to medical facilities and justice response support. 1-Tok has established a network of Police contacts across PNG. Historically there has been a lack of professional counselling services. 1-Tok was designed to fulfil this need and link people with a growing range of support services, including medical support, police assistance and safe houses.

### The Analysis

- This briefing is based on data from the 1-Tok data systems, spanning the period July 2017 to June 2020. All cases within this period were considered for this analysis. The helpline data does not represent the prevalence rate of issue in PNG. Even in high resource context where there are higher rates of reporting and functioning referral pathways, under reporting is a persistent issue.
- 1-Tok's systems are currently in the process of upgrading. Future analyses will analyze more variables, disaggregate by location and gender, and reveal important trends about the service to inform the broader sector. In addition, given that the Helpline plays such a critical role in referrals, there is a need to develop the system to enable counsellors to enter data on client follow-up.

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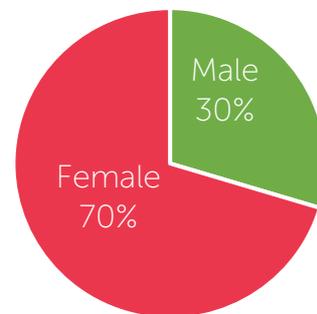
## Who are we talking about?

More women report surviving IPV than men to the 1-Tok helpline. This has remained steady since 2017. In the 2016-2018 DHS Report, 63% of ever-married women have experienced spousal physical, sexual, or emotional violence.

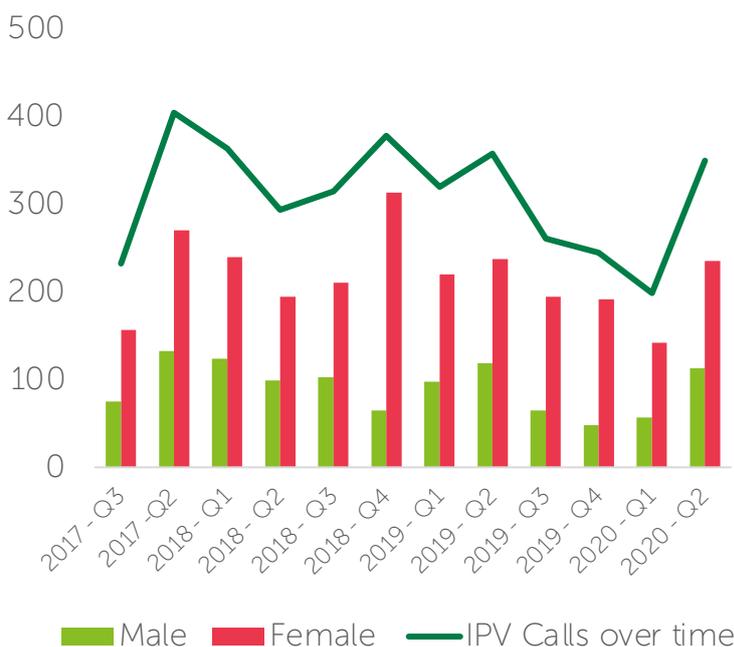
Globally, women are said to be more affected by IPV than men and this is thought to be higher in countries such as PNG that have significant gender inequality.

Although ages of survivors were not consistently collected over this period, the highest rates of IPV tended to be amongst women aged between 20-50. Rates generally declined with increasing age and is higher for women in every age group compared to men

Breakdown of Callers of IPV



## How has the situation changed over time?



Worryingly, IPV cases appear to be stable over time, reflecting a lack of progress in tackling the root causes of IPV. There is also high acceptance of IPV (according to recent DHS report), suggesting under reporting. A similar number of survivors of IPV called to helpline. Between 200-400 IPV cases are reported every quarter since 2017 July.

While there is no significant increasing trend in IPV during COVID19, there was a significant trend in other forms of GBV, notably violence, relationship issues and other child protection issues.

Anecdotally, from partners and community members responding on the ground, they reported seeing an increase in IPV and family violence. This was said to increase as a result of COVID and the restrictions. According to report 'state of GBV in PNG during COVID' by the UN, other front line services including family support centers at Hospitals reported a decrease in client access- due the lock down and restrictions.

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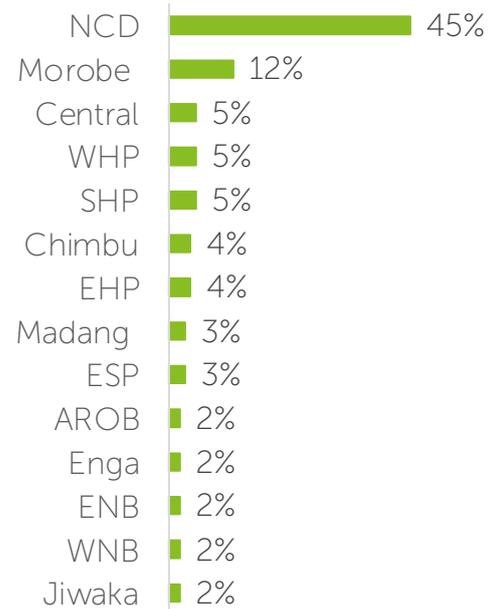
## Where are cases reported?

45% of all callers presenting IPV are from the National Capital District (NCD), 12% from Morobe and less than 10% of callers are from each other province.

Urban centers reported highest rates of IPV, including NCD and Morobe where there is more awareness on rights, and knowledge of how to report and access the helpline. Other factors such as access to phones, phone networks, and power to charge phones, may also be a factor. In a recent DHS study, 89% of people in urban areas owned mobile phones, compared to just 53% in rural areas, and for women this is thought to be less.

Some reports have pointed to more IPV in urban areas due to contributing factors including poorer living standards and alcohol and drug abuse.

A campaign to promote the Helpline after the 2018 Earthquake in the Highlands has resulted in increased calls from the Highlands including the worst affected province, Southern Highlands. 1-Tok acknowledges the accessibility issues that majority of women who live in rural areas have to access any type of support and the need for more resources to address this.



## What are the overlaps between IPV and other issues?



The five most common issues correlated with IPV are family violence (28%), relationship issues (26%), child welfare (16%), safety issues (15%), legal issues (12%) and child abuse (3%). I.e., when callers report IPV, they also report another issue at the same time.

There are clear strong linkages between family violence, relationship issues, and child welfare (that can include safety, neglect and abuse concerns). Survivors reporting IPV are most likely to report family violence (violence occurring in the family and between family members and relationship issues).

These issues are thought to be linked to issues that likely lead to an escalation to IPV. However, there is not enough data to validate this and nor enough data more broadly in PNG.

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## What are the referral pathways?

Referral pathways are often fragmented or limited outside of urban areas. The top five service providers IPV referrals are made to are: police (33%), counselling services (18%), welfare services (16%), court (12%) and community leaders (5%)

Police are the main referral service for the Helpline with 33% of IPV cases being referred in the reporting period. Police are present in all provinces and districts thus they are a major point of entry by survivors of IPV. Police often provide services such as transportation to medical facilities and the 1-Tok has established a good network of reliable contacts in each province.

However, the police are also significantly under resourced and lack capacity to provide support that is survivor-centred and need more training and resources. In some parts of PNG referrals to formal services are non-existent and instead the burden of finding support is placed on survivors. In this instance the 1-Tok counsellor endeavours to provide any factual referrals and service information.

1-Tok's service provider database has over 350 service providers nationally and 1-Tok is a key entry point in the referral pathway. In the absence of a national client tracking system, it is difficult to get reliable information about how many clients have been successfully referred.



## Key Messages

- IPV is a significant obstacle to PNG's development and prosperity. While there have been many steps forward, significant work to address the issue of IPV is still needed.
- PNG requires more services with increased quality, wider coverage, and a more integrated response system. Outside urban settings, psychosocial or mental trauma support is extremely limited, and efforts to address GBV in rural areas remain under-resourced.
- IPV hurts children – witnessing or experiencing abuse can impact on children's healthy development.
- Counselling can help survivors and perpetrators of abuse, including children, heal their issues and end the cycle of violence
- Combating this epidemic of IPV in PNG requires a concerted and multi-sectorial effort from all individuals, agencies, and organizations from all levels of prevention and response.

## For further information...

Contact: ChildFund Papua New Guinea  
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## References

1 Department for Community Development and Religion, 2016-2025. Papua New Guinea National Strategy to Prevent and Respond to Gender Based Violence 2016-2025  
2 National Statistical Office - NSO and ICF. 2019. Papua New Guinea Demographic and Health Survey 2016-18. Port Moresby, Papua New Guinea: NSO and ICF. Available at <https://www.dhsprogram.com/pubs/pdf/FR364/FR364.pdf>.

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